

PREFACE

This 2-volume compilation contains historical documents pertaining to P.L. 106-170, the “Ticket to Work and Work Incentives Improvement Act of 1999.” These books contain congressional debates and a chronological compilation of documents pertinent to the legislative history of the public law.

Pertinent documents include:

- Differing versions of key bills
- Committee Reports
- Excerpts from the Congressional Record
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- Legislative Bulletins

The books are prepared by the Office of the Deputy Commissioner for Legislation and Congressional Affairs and are designed to serve as helpful resource tools for those charged with interpreting laws administered by the Social Security Administration.

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106TH CONGRESS
1ST SESSION

H. R. 1180

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 18, 1999

Mr. LAZIO (for himself, Mr. WAXMAN, Mr. BLILEY, Mr. DINGELL, Mrs. JOHNSON of Connecticut, Mr. MATSUI, Mr. BILIRAKIS, Mr. BROWN of Ohio, Mr. RAMSTAD, Mr. CARDIN, Mr. GREENWOOD, Ms. BALDWIN, Mr. CAMP, Mr. STARK, Mr. PICKERING, Mr. PALLONE, Mr. FOLEY, Mr. LEVIN, Mr. BILBRAY, Mr. TANNER, Mrs. MORELLA, Mr. DOGGETT, Mr. HORN, Mr. MURTHA, Mr. UPTON, Mr. STRICKLAND, Mrs. KELLY, Mr. HOEFFEL, Mr. BOEHLERT, Mr. BOUCHER, Mr. KOLBE, Ms. MCCARTHY of Missouri, Mr. FRELINGHUYSEN, Mr. MARKEY, Mr. BARRETT of Wisconsin, Mr. GORDON, Mr. RUSH, Mr. WYNN, Mr. MEEHAN, Mr. DELAHUNT, Mr. BARCIA, Mr. GREEN of Texas, Mr. KLINK, and Mr. JEFFERSON) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration

to provide such individuals with meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) **SHORT TITLE.**—This Act may be cited as the
5 “Work Incentives Improvement Act of 1999”.

6 (b) **TABLE OF CONTENTS.**—The table of contents of
7 this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under the medicaid program for workers with disabilities.

Sec. 102. Continuation of medicare coverage for working individuals with disabilities.

Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 104. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 211. Work activity standard as a basis for review of an individual’s disabled status.

Sec. 212. Expedited reinstatement of disability benefits.

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Sec. 221. Work incentives outreach program.

Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Permanent extension of disability insurance program demonstration project authority.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics.

Sec. 402. Treatment of prisoners.

Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage.

Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.

Sec. 405. Authorization for State to permit annual wage reports.

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) FINDINGS.—Congress makes the following find-
3 ings:

4 (1) Health care is important to all Americans.

5 (2) Health care is particularly important to in-
6 dividuals with disabilities and special health care
7 needs who often cannot afford the insurance avail-
8 able to them through the private market, are unin-
9 surable by the plans available in the private sector,
10 and are at great risk of incurring very high and eco-
11 nomically devastating health care costs.

12 (3) Americans with significant disabilities often
13 are unable to obtain health care insurance that pro-
14 vides coverage of the services and supports that en-
15 able them to live independently and enter or rejoin
16 the workforce. Personal assistance services (such as
17 attendant services, personal assistance with trans-
18 portation to and from work, reader services, job
19 coaches, and related assistance) remove many of the
20 barriers between significant disability and work.

1 Coverage for such services, as well as for prescrip-
2 tion drugs, durable medical equipment, and basic
3 health care are powerful and proven tools for indi-
4 viduals with significant disabilities to obtain and re-
5 tain employment.

6 (4) For individuals with disabilities, the fear of
7 losing health care and related services is one of the
8 greatest barriers keeping the individuals from maxi-
9 mizing their employment, earning potential, and
10 independence.

11 (5) Individuals with disabilities who are bene-
12 ficiaries under title II or XVI of the Social Security
13 Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing
14 medicare or medicaid coverage that is linked to their
15 cash benefits, a risk that is an equal, or greater,
16 work disincentive than the loss of cash benefits asso-
17 ciated with working.

18 (6) Currently, less than $\frac{1}{2}$ of 1 percent of so-
19 cial security disability insurance and supplemental
20 security income beneficiaries cease to receive benefits
21 as a result of employment.

22 (7) Beneficiaries have cited the lack of adequate
23 employment training and placement services as an
24 additional barrier to employment.

1 (8) If an additional $\frac{1}{2}$ of 1 percent of the cur-
2 rent social security disability insurance (DI) and
3 supplemental security income (SSI) recipients were
4 to cease receiving benefits as a result of employ-
5 ment, the savings to the Social Security Trust
6 Funds in cash assistance would total
7 \$3,500,000,000 over the worklife of the individuals.

8 (b) PURPOSES.—The purposes of this Act are as fol-
9 lows:

10 (1) To provide health care and employment
11 preparation and placement services to individuals
12 with disabilities that will enable those individuals to
13 reduce their dependency on cash benefit programs.

14 (2) To encourage States to adopt the option of
15 allowing individuals with disabilities to purchase
16 medicaid coverage that is necessary to enable such
17 individuals to maintain employment.

18 (3) To provide individuals with disabilities the
19 option of maintaining medicare coverage while work-
20 ing.

21 (4) To establish a return to work ticket pro-
22 gram that will allow individuals with disabilities to
23 seek the services necessary to obtain and retain em-
24 ployment and reduce their dependency on cash ben-
25 efit programs.

1 **TITLE I—EXPANDED AVAIL-**
2 **ABILITY OF HEALTH CARE**
3 **SERVICES**

4 **SEC. 101. EXPANDING STATE OPTIONS UNDER THE MED-**
5 **ICAID PROGRAM FOR WORKERS WITH DIS-**
6 **ABILITIES.**

7 (a) IN GENERAL.—

8 (1) STATE OPTION TO ELIMINATE INCOME, AS-
9 SETS, AND RESOURCE LIMITATIONS FOR WORKERS
10 WITH DISABILITIES BUYING INTO MEDICAID.—Sec-
11 tion 1902(a)(10)(A)(ii) of the Social Security Act
12 (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

13 (A) in subclause (XIII), by striking “or”
14 at the end;

15 (B) in subclause (XIV), by adding “or” at
16 the end; and

17 (C) by adding at the end the following:

18 “(XV) who, but for earnings in
19 excess of the limit established under
20 section 1905(q)(2)(B), would be con-
21 sidered to be receiving supplemental
22 security income and whose assets, re-
23 sources, and earned or unearned in-
24 come (or both) do not exceed such

1 limitations (if any) as the State may
2 establish;”.

3 (2) STATE OPTION TO PROVIDE OPPORTUNITY
4 FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY
5 IMPROVED DISABILITY TO BUY INTO MEDICAID.—

6 (A) ELIGIBILITY.—Section
7 1902(a)(10)(A)(ii) of the Social Security Act
8 (42 U.S.C. 1396a(a)(10)(A)(ii)), as amended by
9 paragraph (1), is amended—

10 (i) in subclause (XIV), by striking
11 “or” at the end;

12 (ii) in subclause (XV), by adding “or”
13 at the end; and

14 (iii) by adding at the end the fol-
15 lowing:

16 “(XVI) who are employed indi-
17 viduals with a medically improved dis-
18 ability described in section 1905(v)(1)
19 and whose assets, resources, and
20 earned or unearned income (or both)
21 do not exceed such limitations (if any)
22 as the State may establish, but only if
23 the State provides medical assistance
24 to individuals described in subclause
25 (XV);”.

1 (B) DEFINITION OF EMPLOYED INDIVID-
2 UALS WITH A MEDICALLY IMPROVED DIS-
3 ABILITY.—Section 1905 of the Social Security
4 Act (42 U.S.C. 1396d) is amended by adding at
5 the end the following:

6 “(v)(1) The term ‘employed individual with a medi-
7 cally improved disability’ means an individual who—

8 “(A) is at least 16, but less than 65, years of
9 age;

10 “(B) is employed (as defined in paragraph (2));

11 “(C) ceases to be eligible for medical assistance
12 under section 1902(a)(10)(A)(ii)(XV) because the
13 individual, by reason of medical improvement, is de-
14 termined at the time of a regularly scheduled con-
15 tinuing disability review to no longer be eligible for
16 benefits under section 223(d) or 1614(a)(3); and

17 “(D) continues to have a severe medically deter-
18 minable impairment, as determined under regula-
19 tions of the Secretary.

20 “(2) For purposes of paragraph (1), an individual is
21 considered to be ‘employed’ if the individual—

22 “(A) is earning at least the applicable minimum
23 wage requirement under section 6 of the Fair Labor
24 Standards Act (29 U.S.C. 206) and working at least
25 40 hours per month; or

1 “(B) is engaged in a work effort that meets
2 substantial and reasonable threshold criteria for
3 hours of work, wages, or other measures, as defined
4 by the State and approved by the Secretary.”.

5 (C) CONFORMING AMENDMENT.—Section
6 1905(a) of such Act (42 U.S.C. 1396d(a)) is
7 amended in the matter preceding paragraph
8 (1)—

9 (i) in clause (x), by striking “or” at
10 the end;

11 (ii) in clause (xi), by adding “or” at
12 the end; and

13 (iii) by inserting after clause (xi), the
14 following:

15 “(xii) employed individuals with a medically im-
16 proved disability (as defined in subsection (v)),”.

17 (3) STATE AUTHORITY TO IMPOSE INCOME-RE-
18 LATED PREMIUMS AND COST-SHARING.—Section
19 1916 of such Act (42 U.S.C. 1396o) is amended—

20 (A) in subsection (a), by striking “The
21 State plan” and inserting “Subject to sub-
22 section (g), the State plan”; and

23 (B) by adding at the end the following:

24 “(g) With respect to individuals provided medical as-
25 sistance only under subclause (XV) or (XVI) of section

1 1902(a)(10)(A)(ii), a State may (in a uniform manner for
2 individuals described in either such subclause)—

3 “(1) require such individuals to pay premiums
4 or other cost-sharing charges set on a sliding scale
5 based on income that the State may determine; and

6 “(2) require payment of 100 percent of such
7 premiums in the case of such an individual who has
8 income that exceeds 250 percent of the income offi-
9 cial poverty line (referred to in subsection (c)(1)) ap-
10 plicable to a family of the size involved.”.

11 (4) PROHIBITION AGAINST SUPPLANTATION OF
12 STATE FUNDS AND STATE FAILURE TO MAINTAIN
13 EFFORT.—Section 1903(i) of such Act (42 U.S.C.
14 1396b(i)) is amended—

15 (A) by striking the period at the end of
16 paragraph (18) and inserting “; or”; and

17 (B) by inserting after such paragraph the
18 following:

19 “(19) with respect to amounts expended for
20 medical assistance provided to an individual de-
21 scribed in subclause (XV) or (XVI) of section
22 1902(a)(10)(A)(ii) for a fiscal year unless the State
23 demonstrates to the satisfaction of the Secretary
24 that the level of State funds expended for such fiscal
25 year for programs to enable working individuals with

1 disabilities to work (other than for such medical as-
2 sistance) is not less than the level expended for such
3 programs during the most recent State fiscal year
4 ending before the date of enactment of this para-
5 graph.”.

6 (b) CONFORMING AMENDMENTS.—

7 (1) Section 1903(f)(4) of the Social Security
8 Act (42 U.S.C. 1396b(f)(4)) is amended in the mat-
9 ter preceding subparagraph (A) by inserting
10 “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI)”
11 after “1902(a)(10)(A)(ii)(X),”.

12 (2) Section 1903(f)(4) of such Act, as amended
13 by paragraph (1), is amended by inserting
14 “1902(a)(10)(A)(ii)(XIII),” before
15 “1902(a)(10)(A)(ii)(XV)”.

16 (c) EFFECTIVE DATE.—

17 (1) IN GENERAL.—Except as provided in para-
18 graph (2), the amendments made by this section
19 apply to medical assistance for items and services
20 furnished on or after October 1, 1999.

21 (2) RETROACTIVITY OF CONFORMING AMEND-
22 MENT.—The amendment made by subsection (b)(2)
23 takes effect as if included in the enactment of the
24 Balanced Budget Act of 1997.

1 **SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR**
2 **WORKING INDIVIDUALS WITH DISABILITIES.**

3 (a) CONTINUATION OF COVERAGE.—

4 (1) IN GENERAL.—Section 226 of the Social
5 Security Act (42 U.S.C. 426) is amended—

6 (A) in the third sentence of subsection (b),
7 by inserting “, except as provided in subsection
8 (j)” after “but not in excess of 24 such
9 months”; and

10 (B) by adding at the end the following:

11 “(j) The 24-month limitation on deemed entitlement
12 under the third sentence of subsection (b) shall not
13 apply—

14 “(1) for months occurring during the 10-year
15 period beginning with the first month that begins
16 after the date of enactment of this subsection; and

17 “(2) for subsequent months, in the case of an
18 individual who was entitled to benefits under sub-
19 section (b) as of the last month of such 10-year pe-
20 riod and would continue (but for such 24-month lim-
21 itation) to be so entitled.”.

22 (2) CONFORMING AMENDMENT.—Section
23 1818A(a)(2)(C) of the Social Security Act (42
24 U.S.C. 1395i–2a(a)(2)(C)) is amended—

25 (A) by striking “solely”; and

1 (B) by inserting “or the expiration of the
2 last month of the 10-year period described in
3 section 226(j)” before the semicolon.

4 (b) GAO REPORT.—Not later than 8 years after the
5 date of the enactment of this Act, the Comptroller General
6 of the United States shall submit a report to Congress
7 that—

8 (1) examines the effectiveness and cost of sub-
9 section (j) of section 226 of the Social Security Act
10 (42 U.S.C. 426); and

11 (2) recommends whether that subsection should
12 continue to be applied beyond the 10-year period de-
13 scribed in the subsection.

14 (c) EFFECTIVE DATE.—The amendments made by
15 subsection (a) apply to months beginning with the first
16 month that begins after the date of the enactment of this
17 Act.

18 (d) TREATMENT OF CERTAIN INDIVIDUALS.—An in-
19 dividual enrolled under section 1818A of the Social Secu-
20 rity Act (42 U.S.C. 1395i–2a) shall be treated with re-
21 spect to premium payment obligations under such section
22 as though the individual had continued to be entitled to
23 benefits under section 226(b) of such Act for—

1 (1) months described in section 226(j)(1) of
2 such Act (42 U.S.C. 426(j)(1)) (as added by sub-
3 section (a)); and

4 (2) subsequent months, in the case of an indi-
5 vidual who was so enrolled as of the last month de-
6 scribed in section 226(j)(2) of such Act (42 U.S.C.
7 426(j)(2)) (as so added).

8 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
9 **FRASTRUCTURES TO SUPPORT WORKING IN-**
10 **DIVIDUALS WITH DISABILITIES.**

11 (a) ESTABLISHMENT.—

12 (1) IN GENERAL.—The Secretary of Health and
13 Human Services (in this section referred to as the
14 “Secretary”) shall award grants described in sub-
15 section (b) to States to support the design, establish-
16 ment, and operation of State infrastructures that
17 provide items and services to support working indi-
18 viduals with disabilities.

19 (2) APPLICATION.—In order to be eligible for
20 an award of a grant under this section, a State shall
21 submit an application to the Secretary at such time,
22 in such manner, and containing such information as
23 the Secretary shall require.

24 (3) DEFINITION OF STATE.—In this section,
25 the term “State” means each of the 50 States, the

1 District of Columbia, Puerto Rico, Guam, the
2 United States Virgin Islands, American Samoa, and
3 the Commonwealth of the Northern Mariana Is-
4 lands.

5 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
6 REACH.—

7 (1) IN GENERAL.—Out of the funds appro-
8 priated under subsection (e), the Secretary shall
9 award grants to States to—

10 (A) support the establishment, implemen-
11 tation, and operation of the State infrastruc-
12 tures described in subsection (a); and

13 (B) conduct outreach campaigns regarding
14 the existence of such infrastructures.

15 (2) ELIGIBILITY FOR GRANTS.—

16 (A) IN GENERAL.—No State may receive a
17 grant under this subsection unless the State—

18 (i) has an approved amendment to the
19 State plan under title XIX of the Social
20 Security Act (42 U.S.C. 1396 et seq.) that
21 provides medical assistance under such
22 plan to individuals described in section
23 1902(a)(10)(A)(ii)(XV) of the Social Secu-
24 rity Act (42 U.S.C.
25 1396a(a)(10)(A)(ii)(XV)); and

1 (ii) demonstrates to the satisfaction of
2 the Secretary that the State makes per-
3 sonal assistance services available under
4 the State plan under title XIX of the So-
5 cial Security Act (42 U.S.C. 1396 et seq.)
6 to the extent necessary to enable individ-
7 uals described in clause (i) to remain em-
8 ployed (as determined under section
9 1905(v)(2) of the Social Security Act (42
10 U.S.C. 1396d(v)(2))).

11 (B) DEFINITION OF PERSONAL ASSIST-
12 ANCE SERVICES.—In this paragraph, the term
13 “personal assistance services” means a range of
14 services, provided by 1 or more persons, de-
15 signed to assist an individual with a disability
16 to perform daily activities on and off the job
17 that the individual would typically perform if
18 the individual did not have a disability. Such
19 services shall be designed to increase the indi-
20 vidual’s control in life and ability to perform ev-
21 eryday activities on or off the job.

22 (3) DETERMINATION OF AWARDS.—

23 (A) IN GENERAL.—Subject to subpara-
24 graph (B), the Secretary shall determine a for-
25 mula for awarding grants to States under this

1 section that provides special consideration to
2 States that provide medical assistance under
3 title XIX of the Social Security Act to individ-
4 uals described in section
5 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
6 1396a(a)(10)(A)(ii)(XVI)).

7 (B) AWARD LIMITS.—

8 (i) MINIMUM AWARDS.—

9 (I) IN GENERAL.—Subject to
10 subclause (II), no State with an ap-
11 proved application under this section
12 shall receive a grant for a fiscal year
13 that is less than \$500,000.

14 (II) PRO RATA REDUCTIONS.—If
15 the funds appropriated under sub-
16 section (e) for a fiscal year are not
17 sufficient to pay each State with an
18 application approved under this sec-
19 tion the minimum amount described
20 in subclause (I), the Secretary shall
21 pay each such State an amount equal
22 to the pro rata share of the amount
23 made available.

24 (ii) MAXIMUM AWARDS.—No State
25 with an application that has been approved

1 under this section shall receive a grant for
2 a fiscal year that exceeds 15 percent of the
3 total expenditures by the State (including
4 the reimbursed Federal share of such ex-
5 penditures) for medical assistance for indi-
6 viduals eligible under subclause (XV) and
7 (XVI) of section 1902(a)(10)(A)(ii) of the
8 Social Security Act (42 U.S.C.
9 1396a(a)(10)(A)(ii)), as estimated by the
10 State and approved by the Secretary.

11 (c) AVAILABILITY OF FUNDS.—

12 (1) FUNDS AWARDED TO STATES.—Funds
13 awarded to a State under a grant made under this
14 section for a fiscal year shall remain available until
15 expended.

16 (2) FUNDS NOT AWARDED TO STATES.—Funds
17 not awarded to States in the fiscal year for which
18 they are appropriated shall remain available in suc-
19 ceeding fiscal years for awarding by the Secretary.

20 (d) ANNUAL REPORT.—A State that is awarded a
21 grant under this section shall submit an annual report to
22 the Secretary on the use of funds provided under the
23 grant. Each report shall include the percentage increase
24 in the number of title II disability beneficiaries, as defined
25 in section 1148(k)(3) of the Social Security Act (as

1 amended by section 201) in the State, and title XVI dis-
2 ability beneficiaries, as defined in section 1148(k)(4) of
3 the Social Security Act (as so amended) in the State who
4 return to work.

5 (e) APPROPRIATION.—

6 (1) IN GENERAL.—Out of any funds in the
7 Treasury not otherwise appropriated, there is appro-
8 priated to make grants under this section—

9 (A) for fiscal year 2000, \$20,000,000;

10 (B) for fiscal year 2001, \$25,000,000;

11 (C) for fiscal year 2002, \$30,000,000;

12 (D) for fiscal year 2003, \$35,000,000;

13 (E) for fiscal year 2004, \$40,000,000; and

14 (F) for each of fiscal years 2005 through
15 2010, the amount appropriated for the pre-
16 ceding fiscal year increased by the percentage
17 increase (if any) in the Consumer Price Index
18 for All Urban Consumers (United States city
19 average) for the preceding fiscal year.

20 (2) BUDGET AUTHORITY.—This subsection con-
21 stitutes budget authority in advance of appropria-
22 tions Acts and represents the obligation of the Fed-
23 eral Government to provide for the payment of the
24 amounts appropriated under paragraph (1).

1 (f) RECOMMENDATION.—Not later than October 1,
2 2009, the Secretary, in consultation with the Work Incen-
3 tives Advisory Panel established under section 201(f),
4 shall submit a recommendation to the Committee on Com-
5 merce of the House of Representatives and the Committee
6 on Finance of the Senate regarding whether the grant pro-
7 gram established under this section should be continued
8 after fiscal year 2010.

9 **SEC. 104. DEMONSTRATION OF COVERAGE UNDER THE**
10 **MEDICAID PROGRAM OF WORKERS WITH PO-**
11 **TENTIALLY SEVERE DISABILITIES.**

12 (a) STATE APPLICATION.—A State may apply to the
13 Secretary of Health and Human Services (in this section
14 referred to as the “Secretary”) for approval of a dem-
15 onstration project (in this section referred to as a “dem-
16 onstration project”) under which up to a specified max-
17 imum number of individuals who are workers with a po-
18 tentially severe disability (as defined in subsection (b)(1))
19 are provided medical assistance equal to that provided
20 under section 1905(a) of the Social Security Act (42
21 U.S.C. 1396d(a)) to individuals described in section
22 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
23 1396a(a)(10)(A)(ii)(XV)).

24 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
25 ABILITY DEFINED.—For purposes of this section—

1 (1) IN GENERAL.—The term “worker with a
2 potentially severe disability” means, with respect to
3 a demonstration project, an individual who—

4 (A) is at least 16, but less than 65, years
5 of age;

6 (B) has a specific physical or mental im-
7 pairment that, as defined by the State under
8 the demonstration project, is reasonably ex-
9 pected, but for the receipt of items and services
10 described in section 1905(a) of the Social Secu-
11 rity Act (42 U.S.C. 1396d(a)), to become blind
12 or disabled (as defined under section 1614(a) of
13 the Social Security Act (42 U.S.C. 1382c(a)));
14 and

15 (C) is employed (as defined in paragraph
16 (2)).

17 (2) DEFINITION OF EMPLOYED.—An individual
18 is considered to be “employed” if the individual—

19 (A) is earning at least the applicable min-
20 imum wage requirement under section 6 of the
21 Fair Labor Standards Act (29 U.S.C. 206) and
22 working at least 40 hours per month; or

23 (B) is engaged in a work effort that meets
24 substantial and reasonable threshold criteria for
25 hours of work, wages, or other measures, as de-

1 fined under the demonstration project and ap-
2 proved by the Secretary.

3 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

4 (1) IN GENERAL.—Subject to paragraph (3),
5 the Secretary shall approve applications under sub-
6 section (a) that meet the requirements of paragraph
7 (2) and such additional terms and conditions as the
8 Secretary may require. The Secretary may waive the
9 requirement of section 1902(a)(1) of the Social Se-
10 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
11 State demonstrations.

12 (2) TERMS AND CONDITIONS OF DEMONSTRA-
13 TION PROJECTS.—The Secretary may not approve a
14 demonstration project under this section unless the
15 State provides assurances satisfactory to the Sec-
16 retary that the following conditions are or will be
17 met:

18 (A) ELECTION OF OPTIONAL CATEGORY.—

19 The State has elected to provide coverage under
20 its plan under title XIX of the Social Security
21 Act of individuals described in section
22 1902(a)(10)(A)(ii)(XV) of the Social Security
23 Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

24 (B) MAINTENANCE OF STATE EFFORT.—

25 Federal funds paid to a State pursuant to this

1 section must be used to supplement, but not
2 supplant, the level of State funds expended for
3 workers with potentially severe disabilities
4 under programs in effect for such individuals
5 at the time the demonstration project is ap-
6 proved under this section.

7 (C) INDEPENDENT EVALUATION.—The
8 State provides for an independent evaluation of
9 the project.

10 (3) LIMITATIONS ON FEDERAL FUNDING.—

11 (A) APPROPRIATION.—

12 (i) IN GENERAL.—Out of any funds in
13 the Treasury not otherwise appropriated,
14 there is appropriated to carry out this
15 section—

16 (I) for fiscal year 2000,

17 \$70,000,000;

18 (II) for fiscal year 2001,

19 \$73,000,000;

20 (III) for fiscal year 2002,

21 \$77,000,000; and

22 (IV) for fiscal year 2003,

23 \$80,000,000.

24 (ii) BUDGET AUTHORITY.—Clause (i)
25 constitutes budget authority in advance of

1 appropriations Acts and represents the ob-
2 ligation of the Federal Government to pro-
3 vide for the payment of the amounts ap-
4 propriated under clause (i).

5 (B) LIMITATION ON PAYMENTS.—In no
6 case may—

7 (i) the aggregate amount of payments
8 made by the Secretary to States under this
9 section exceed \$300,000,000; or

10 (ii) payments be provided by the Sec-
11 retary for a fiscal year after fiscal year
12 2005.

13 (C) FUNDS ALLOCATED TO STATES.—The
14 Secretary shall allocate funds to States based
15 on their applications and the availability of
16 funds. Funds allocated to a State under a grant
17 made under this section for a fiscal year shall
18 remain available until expended.

19 (D) FUNDS NOT ALLOCATED TO STATES.—
20 Funds not allocated to States in the fiscal year
21 for which they are appropriated shall remain
22 available in succeeding fiscal years for alloca-
23 tion by the Secretary using the allocation for-
24 mula established under this section.

1 (E) PAYMENTS TO STATES.—The Sec-
2 retary shall pay to each State with a dem-
3 onstration project approved under this section,
4 from its allocation under subparagraph (C), an
5 amount for each quarter equal to the Federal
6 medical assistance percentage (as defined in
7 section 1905(b) of the Social Security Act (42
8 U.S.C. 1395d(b)) of expenditures in the quarter
9 for medical assistance provided to workers with
10 a potentially severe disability.

11 (d) RECOMMENDATION.—Not later than October 1,
12 2002, the Secretary shall submit a recommendation to the
13 Committee on Commerce of the House of Representatives
14 and the Committee on Finance of the Senate regarding
15 whether the demonstration project established under this
16 section should be continued after fiscal year 2003.

17 (e) STATE DEFINED.—In this section, the term
18 “State” has the meaning given such term for purposes of
19 title XIX of the Social Security Act (42 U.S.C. 1396 et
20 seq.).

1 **TITLE II—TICKET TO WORK AND**
2 **SELF-SUFFICIENCY AND RE-**
3 **LATED PROVISIONS**

4 **Subtitle A—Ticket to Work and**
5 **Self-Sufficiency**

6 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
7 **SELF-SUFFICIENCY PROGRAM.**

8 (a) IN GENERAL.—Part A of title XI of the Social
9 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
10 ing after section 1147 (as added by section 8 of the Non-
11 citizen Benefit Clarification and Other Technical Amend-
12 ments Act of 1998 (Public Law 105–306; 112 Stat.
13 2928)) the following:

14 “TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

15 “SEC. 1148. (a) IN GENERAL.—The Commissioner
16 shall establish a Ticket to Work and Self-Sufficiency Pro-
17 gram, under which a disabled beneficiary may use a ticket
18 to work and self-sufficiency issued by the Commissioner
19 in accordance with this section to obtain employment serv-
20 ices, vocational rehabilitation services, or other support
21 services from an employment network which is of the bene-
22 ficiary’s choice and which is willing to provide such serv-
23 ices to the beneficiary.

24 “(b) TICKET SYSTEM.—

1 “(1) DISTRIBUTION OF TICKETS.—The Com-
2 missioner may issue a ticket to work and self-suffi-
3 ciency to disabled beneficiaries for participation in
4 the Program.

5 “(2) ASSIGNMENT OF TICKETS.—A disabled
6 beneficiary holding a ticket to work and self-suffi-
7 ciency may assign the ticket to any employment net-
8 work of the beneficiary’s choice which is serving
9 under the Program and is willing to accept the as-
10 signment.

11 “(3) TICKET TERMS.—A ticket issued under
12 paragraph (1) shall consist of a document which evi-
13 dences the Commissioner’s agreement to pay (as
14 provided in paragraph (4)) an employment network,
15 which is serving under the Program and to which
16 such ticket is assigned by the beneficiary, for such
17 employment services, vocational rehabilitation serv-
18 ices, and other support services as the employment
19 network may provide to the beneficiary.

20 “(4) PAYMENTS TO EMPLOYMENT NET-
21 WORKS.—The Commissioner shall pay an employ-
22 ment network under the Program in accordance with
23 the outcome payment system under subsection
24 (h)(2) or under the outcome-milestone payment sys-
25 tem under subsection (h)(3) (whichever is elected

1 pursuant to subsection (h)(1)). An employment net-
2 work may not request or receive compensation for
3 such services from the beneficiary.

4 “(c) STATE PARTICIPATION.—

5 “(1) IN GENERAL.—Each State agency admin-
6 istering or supervising the administration of the
7 State plan approved under title I of the Rehabilita-
8 tion Act of 1973 may elect to participate in the Pro-
9 gram as an employment network with respect to a
10 disabled beneficiary. If the State agency does elect
11 to participate in the Program, the State agency also
12 shall elect to be paid under the outcome payment
13 system or the outcome-milestone payment system in
14 accordance with subsection (h)(1). With respect to a
15 disabled beneficiary that the State agency does not
16 elect to have participate in the Program, the State
17 agency shall be paid for services provided to that
18 beneficiary under the system for payment applicable
19 under section 222(d) and subsections (d) and (e) of
20 section 1615. The Commissioner shall provide for
21 periodic opportunities for exercising such elections
22 (and revocations).

23 “(2) EFFECT OF PARTICIPATION BY STATE
24 AGENCY.—

1 “(A) STATE AGENCIES PARTICIPATING.—

2 In any case in which a State agency described
3 in paragraph (1) elects under that paragraph to
4 participate in the Program, the employment
5 services, vocational rehabilitation services, and
6 other support services which, upon assignment
7 of tickets to work and self-sufficiency, are pro-
8 vided to disabled beneficiaries by the State
9 agency acting as an employment network shall
10 be governed by plans for vocational rehabilita-
11 tion services approved under title I of the Reha-
12 bilitation Act of 1973.

13 “(B) STATE AGENCIES ADMINISTERING
14 MATERNAL AND CHILD HEALTH SERVICES PRO-
15 GRAMS.—Subparagraph (A) shall not apply
16 with respect to any State agency administering
17 a program under title V of this Act.

18 “(3) SPECIAL REQUIREMENTS APPLICABLE TO
19 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

20 “(A) IN GENERAL.—In any case in which
21 an employment network has been assigned a
22 ticket to work and self-sufficiency by a disabled
23 beneficiary, no State agency shall be deemed re-
24 quired, under this section, title I of the Work-
25 force Investment Act of 1998, title I of the Re-

1 habilitation Act of 1973, or a State plan ap-
2 proved under such title, to accept any referral
3 of such disabled beneficiary from such employ-
4 ment network unless such employment network
5 and such State agency have entered into a writ-
6 ten agreement that meets the requirements of
7 subparagraph (B). Any beneficiary who has as-
8 signed a ticket to work and self-sufficiency to
9 an employment network that has not entered
10 into such a written agreement with such a
11 State agency may not access vocational rehabili-
12 tation services under title I of the Rehabilita-
13 tion Act of 1973 until such time as the bene-
14 ficiary is reassigned to a State vocational reha-
15 bilitation agency by the Program Manager.

16 “(B) TERMS OF AGREEMENT.—An agree-
17 ment required by subparagraph (A) shall speci-
18 fy, in accordance with regulations prescribed
19 pursuant to subparagraph (C)—

20 “(i) the extent (if any) to which the
21 employment network holding the ticket will
22 provide to the State agency—

23 “(I) reimbursement for costs in-
24 curred in providing services described

1 in subparagraph (A) to the disabled
2 beneficiary; and

3 “(II) other amounts from pay-
4 ments made by the Commissioner to
5 the employment network pursuant to
6 subsection (h); and

7 “(ii) any other conditions that may be
8 required by such regulations.

9 “(C) REGULATIONS.—The Commissioner
10 and the Secretary of Education shall jointly
11 prescribe regulations specifying the terms of
12 agreements required by subparagraph (A) and
13 otherwise necessary to carry out the provisions
14 of this paragraph.

15 “(D) PENALTY.—No payment may be
16 made to an employment network pursuant to
17 subsection (h) in connection with services pro-
18 vided to any disabled beneficiary if such em-
19 ployment network makes referrals described in
20 subparagraph (A) in violation of the terms of
21 the agreement required under subparagraph (A)
22 or without having entered into such an agree-
23 ment.

24 “(d) RESPONSIBILITIES OF THE COMMISSIONER.—

1 “(1) SELECTION AND QUALIFICATIONS OF PRO-
2 GRAM MANAGERS.—The Commissioner shall enter
3 into agreements with 1 or more organizations in the
4 private or public sector for service as a program
5 manager to assist the Commissioner in admin-
6 istering the Program. Any such program manager
7 shall be selected by means of a competitive bidding
8 process, from among organizations in the private or
9 public sector with available expertise and experience
10 in the field of vocational rehabilitation and employ-
11 ment services.

12 “(2) TENURE, RENEWAL, AND EARLY TERMI-
13 NATION.—Each agreement entered into under para-
14 graph (1) shall provide for early termination upon
15 failure to meet performance standards which shall be
16 specified in the agreement and which shall be
17 weighted to take into account any performance in
18 prior terms. Such performance standards shall
19 include—

20 “(A) measures for ease of access by bene-
21 ficiaries to services; and

22 “(B) measures for determining the extent
23 to which failures in obtaining services for bene-
24 ficiaries fall within acceptable parameters, as
25 determined by the Commissioner.

1 “(3) PRECLUSION FROM DIRECT PARTICIPA-
2 TION IN DELIVERY OF SERVICES IN OWN SERVICE
3 AREA.—Agreements under paragraph (1) shall
4 preclude—

5 “(A) direct participation by a program
6 manager in the delivery of employment services,
7 vocational rehabilitation services, or other sup-
8 port services to beneficiaries in the service area
9 covered by the program manager’s agreement;
10 and

11 “(B) the holding by a program manager of
12 a financial interest in an employment network
13 or service provider which provides services in a
14 geographic area covered under the program
15 manager’s agreement.

16 “(4) SELECTION OF EMPLOYMENT NET-
17 WORKS.—

18 “(A) IN GENERAL.—The Commissioner
19 shall select and enter into agreements with em-
20 ployment networks for service under the Pro-
21 gram. Such employment networks shall be in
22 addition to State agencies serving as employ-
23 ment networks pursuant to elections under sub-
24 section (c).

1 “(B) ALTERNATE PARTICIPANTS.—In any
2 State where the Program is being implemented,
3 the Commissioner shall enter into an agreement
4 with any alternate participant that is operating
5 under the authority of section 222(d)(2) in the
6 State as of the date of enactment of this section
7 and chooses to serve as an employment network
8 under the Program.

9 “(5) TERMINATION OF AGREEMENTS WITH EM-
10 PLOYMENT NETWORKS.—The Commissioner shall
11 terminate agreements with employment networks for
12 inadequate performance, as determined by the Com-
13 missioner.

14 “(6) QUALITY ASSURANCE.—The Commissioner
15 shall provide for such periodic reviews as are nec-
16 essary to provide for effective quality assurance in
17 the provision of services by employment networks.
18 The Commissioner shall solicit and consider the
19 views of consumers and the program manager under
20 which the employment networks serve and shall con-
21 sult with providers of services to develop perform-
22 ance measurements. The Commissioner shall ensure
23 that the results of the periodic reviews are made
24 available to beneficiaries who are prospective service
25 recipients as they select employment networks. The

1 Commissioner shall ensure that the periodic surveys
2 of beneficiaries receiving services under the Program
3 are designed to measure customer service satisfac-
4 tion.

5 “(7) DISPUTE RESOLUTION.—The Commis-
6 sioner shall provide for a mechanism for resolving
7 disputes between beneficiaries and employment net-
8 works, between program managers and employment
9 networks, and between program managers and pro-
10 viders of services. The Commissioner shall afford a
11 party to such a dispute a reasonable opportunity for
12 a full and fair review of the matter in dispute.

13 “(e) PROGRAM MANAGERS.—

14 “(1) IN GENERAL.—A program manager shall
15 conduct tasks appropriate to assist the Commis-
16 sioner in carrying out the Commissioner’s duties in
17 administering the Program.

18 “(2) RECRUITMENT OF EMPLOYMENT NET-
19 WORKS.—A program manager shall recruit, and rec-
20 ommend for selection by the Commissioner, employ-
21 ment networks for service under the Program. The
22 program manager shall carry out such recruitment
23 and provide such recommendations, and shall mon-
24 itor all employment networks serving in the Program
25 in the geographic area covered under the program

1 manager's agreement, to the extent necessary and
2 appropriate to ensure that adequate choices of serv-
3 ices are made available to beneficiaries. Employment
4 networks may serve under the Program only pursu-
5 ant to an agreement entered into with the Commis-
6 sioner under the Program incorporating the applica-
7 ble provisions of this section and regulations there-
8 under, and the program manager shall provide and
9 maintain assurances to the Commissioner that pay-
10 ment by the Commissioner to employment networks
11 pursuant to this section is warranted based on com-
12 pliance by such employment networks with the terms
13 of such agreement and this section. The program
14 manager shall not impose numerical limits on the
15 number of employment networks to be recommended
16 pursuant to this paragraph.

17 “(3) FACILITATION OF ACCESS BY BENE-
18 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
19 gram manager shall facilitate access by beneficiaries
20 to employment networks. The program manager
21 shall ensure that each beneficiary is allowed changes
22 in employment networks for good cause, as deter-
23 mined by the Commissioner, without being deemed
24 to have rejected services under the Program. The
25 program manager shall establish and maintain lists

1 of employment networks available to beneficiaries
2 and shall make such lists generally available to the
3 public. The program manager shall ensure that all
4 information provided to disabled beneficiaries pursu-
5 ant to this paragraph is provided in accessible for-
6 mats.

7 “(4) ENSURING AVAILABILITY OF ADEQUATE
8 SERVICES.—The program manager shall ensure that
9 employment services, vocational rehabilitation serv-
10 ices, and other support services are provided to
11 beneficiaries throughout the geographic area covered
12 under the program manager’s agreement, including
13 rural areas.

14 “(5) REASONABLE ACCESS TO SERVICES.—The
15 program manager shall take such measures as are
16 necessary to ensure that sufficient employment net-
17 works are available and that each beneficiary receiv-
18 ing services under the Program has reasonable ac-
19 cess to employment services, vocational rehabilitation
20 services, and other support services. Services pro-
21 vided under the Program may include case manage-
22 ment, work incentives planning, supported employ-
23 ment, career planning, career plan development, vo-
24 cational assessment, job training, placement, fol-
25 lowup services, and such other services as may be

1 specified by the Commissioner under the Program.
2 The program manager shall ensure that such serv-
3 ices are available in each service area.

4 “(f) EMPLOYMENT NETWORKS.—

5 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
6 WORKS.—

7 “(A) IN GENERAL.—Each employment net-
8 work serving under the Program shall consist of
9 an agency or instrumentality of a State (or a
10 political subdivision thereof) or a private entity
11 that assumes responsibility for the coordination
12 and delivery of services under the Program to
13 individuals assigning to the employment net-
14 work tickets to work and self-sufficiency issued
15 under subsection (b).

16 “(B) ONE-STOP DELIVERY SYSTEMS.—An
17 employment network serving under the Pro-
18 gram may consist of a one-stop delivery system
19 established under subtitle B of title I of the
20 Workforce Investment Act of 1998.

21 “(C) COMPLIANCE WITH SELECTION CRI-
22 TERIA.—No employment network may serve
23 under the Program unless it meets and main-
24 tains compliance with both general selection cri-
25 teria (such as professional and educational

1 qualifications (where applicable)) and specific
2 selection criteria (such as substantial expertise
3 and experience in providing relevant employ-
4 ment services and supports).

5 “(D) SINGLE OR ASSOCIATED PROVIDERS
6 ALLOWED.—An employment network shall con-
7 sist of either a single provider of such services
8 or of an association of such providers organized
9 so as to combine their resources into a single
10 entity. An employment network may meet the
11 requirements of subsection (e)(4) by providing
12 services directly, or by entering into agreements
13 with other individuals or entities providing ap-
14 propriate employment services, vocational reha-
15 bilitation services, or other support services.

16 “(2) REQUIREMENTS RELATING TO PROVISION
17 OF SERVICES.—Each employment network serving
18 under the Program shall be required under the
19 terms of its agreement with the Commissioner to—

20 “(A) serve prescribed service areas; and

21 “(B) take such measures as are necessary
22 to ensure that employment services, vocational
23 rehabilitation services, and other support serv-
24 ices provided under the Program by, or under
25 agreements entered into with, the employment

1 network are provided under appropriate indi-
2 vidual work plans meeting the requirements of
3 subsection (g).

4 “(3) ANNUAL FINANCIAL REPORTING.—Each
5 employment network shall meet financial reporting
6 requirements as prescribed by the Commissioner.

7 “(4) PERIODIC OUTCOMES REPORTING.—Each
8 employment network shall prepare periodic reports,
9 on at least an annual basis, itemizing for the covered
10 period specific outcomes achieved with respect to
11 specific services provided by the employment net-
12 work. Such reports shall conform to a national
13 model prescribed under this section. Each employ-
14 ment network shall provide a copy of the latest re-
15 port issued by the employment network pursuant to
16 this paragraph to each beneficiary upon enrollment
17 under the Program for services to be received
18 through such employment network. Upon issuance of
19 each report to each beneficiary, a copy of the report
20 shall be maintained in the files of the employment
21 network. The program manager shall ensure that
22 copies of all such reports issued under this para-
23 graph are made available to the public under reason-
24 able terms.

25 “(g) INDIVIDUAL WORK PLANS.—

1 “(1) REQUIREMENTS.—Each employment net-
2 work shall—

3 “(A) take such measures as are necessary
4 to ensure that employment services, vocational
5 rehabilitation services, and other support serv-
6 ices provided under the Program by, or under
7 agreements entered into with, the employment
8 network are provided under appropriate indi-
9 vidual work plans that meet the requirements of
10 subparagraph (C);

11 “(B) develop and implement each such in-
12 dividual work plan in partnership with each
13 beneficiary receiving such services in a manner
14 that affords the beneficiary the opportunity to
15 exercise informed choice in selecting an employ-
16 ment goal and specific services needed to
17 achieve that employment goal;

18 “(C) ensure that each individual work plan
19 includes at least—

20 “(i) a statement of the vocational goal
21 developed with the beneficiary;

22 “(ii) a statement of the services and
23 supports that have been deemed necessary
24 for the beneficiary to accomplish that goal;

1 “(iii) a statement of any terms and
2 conditions related to the provision of such
3 services and supports; and

4 “(iv) a statement of understanding re-
5 garding the beneficiary’s rights under the
6 Program (such as the right to retrieve the
7 ticket to work and self-sufficiency if the
8 beneficiary is dissatisfied with the services
9 being provided by the employment net-
10 work) and remedies available to the indi-
11 vidual, including information on the avail-
12 ability of advocacy services and assistance
13 in resolving disputes through the State
14 grant program authorized under section
15 1150;

16 “(D) provide a beneficiary the opportunity
17 to amend the individual work plan if a change
18 in circumstances necessitates a change in the
19 plan; and

20 “(E) make each beneficiary’s individual
21 work plan available to the beneficiary in, as ap-
22 propriate, an accessible format chosen by the
23 beneficiary.

24 “(2) EFFECTIVE UPON WRITTEN APPROVAL.—
25 A beneficiary’s individual work plan shall take effect

1 upon written approval by the beneficiary or a rep-
2 resentative of the beneficiary and a representative of
3 the employment network that, in providing such
4 written approval, acknowledges assignment of the
5 beneficiary's ticket to work and self-sufficiency.

6 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

7 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
8 PLOYMENT NETWORKS.—

9 “(A) IN GENERAL.—The Program shall
10 provide for payment authorized by the Commis-
11 sioner to employment networks under either an
12 outcome payment system or an outcome-mile-
13 stone payment system. Each employment net-
14 work shall elect which payment system will be
15 utilized by the employment network, and, for
16 such period of time as such election remains in
17 effect, the payment system so elected shall be
18 utilized exclusively in connection with such em-
19 ployment network (except as provided in sub-
20 paragraph (B)).

21 “(B) NO CHANGE IN METHOD OF PAY-
22 MENT FOR BENEFICIARIES WITH TICKETS AL-
23 READY ASSIGNED TO THE EMPLOYMENT NET-
24 WORKS.—Any election of a payment system by
25 an employment network that would result in a

1 change in the method of payment to the em-
2 ployment network for services provided to a
3 beneficiary who is receiving services from the
4 employment network at the time of the election
5 shall not be effective with respect to payment
6 for services provided to that beneficiary and the
7 method of payment previously selected shall
8 continue to apply with respect to such services.

9 “(2) OUTCOME PAYMENT SYSTEM.—

10 “(A) IN GENERAL.—The outcome payment
11 system shall consist of a payment structure gov-
12 erning employment networks electing such sys-
13 tem under paragraph (1)(A) which meets the
14 requirements of this paragraph.

15 “(B) PAYMENTS MADE DURING OUTCOME
16 PAYMENT PERIOD.—The outcome payment sys-
17 tem shall provide for a schedule of payments to
18 an employment network in connection with each
19 individual who is a beneficiary for each month
20 during the individual’s outcome payment period
21 for which benefits (described in paragraphs (3)
22 and (4) of subsection (k)) are not payable to
23 such individual because of work or earnings.

24 “(C) COMPUTATION OF PAYMENTS TO EM-
25 PLOYMENT NETWORK.—The payment schedule

1 of the outcome payment system shall be de-
2 signed so that—

3 “(i) the payment for each of the 60
4 months during the outcome payment pe-
5 riod for which benefits (described in para-
6 graphs (3) and (4) of subsection (k)) are
7 not payable is equal to a fixed percentage
8 of the payment calculation base for the cal-
9 endar year in which such month occurs;
10 and

11 “(ii) such fixed percentage is set at a
12 percentage which does not exceed 40 per-
13 cent.

14 “(3) OUTCOME-MILESTONE PAYMENT SYS-
15 TEM.—

16 “(A) IN GENERAL.—The outcome-mile-
17 stone payment system shall consist of a pay-
18 ment structure governing employment networks
19 electing such system under paragraph (1)(A)
20 which meets the requirements of this para-
21 graph.

22 “(B) EARLY PAYMENTS UPON ATTAIN-
23 MENT OF MILESTONES IN ADVANCE OF OUT-
24 COME PAYMENT PERIODS.—The outcome-mile-
25 stone payment system shall provide for 1 or

1 more milestones with respect to beneficiaries re-
2 ceiving services from an employment network
3 under the Program that are directed toward the
4 goal of permanent employment. Such milestones
5 shall form a part of a payment structure that
6 provides, in addition to payments made during
7 outcome payment periods, payments made prior
8 to outcome payment periods in amounts based
9 on the attainment of such milestones.

10 “(C) LIMITATION ON TOTAL PAYMENTS TO
11 EMPLOYMENT NETWORK.—The payment sched-
12 ule of the outcome-milestone payment system
13 shall be designed so that the total of the pay-
14 ments to the employment network with respect
15 to each beneficiary is less than, on a net
16 present value basis (using an interest rate de-
17 termined by the Commissioner that appro-
18 priately reflects the cost of funds faced by pro-
19 viders), the total amount to which payments to
20 the employment network with respect to the
21 beneficiary would be limited if the employment
22 network were paid under the outcome payment
23 system.

24 “(4) DEFINITIONS.—In this subsection:

1 “(A) PAYMENT CALCULATION BASE.—The
2 term ‘payment calculation base’ means, for any
3 calendar year—

4 “(i) in connection with a title II dis-
5 ability beneficiary, the average disability
6 insurance benefit payable under section
7 223 for all beneficiaries for months during
8 the preceding calendar year; and

9 “(ii) in connection with a title XVI
10 disability beneficiary (who is not concur-
11 rently a title II disability beneficiary), the
12 average payment of supplemental security
13 income benefits based on disability payable
14 under title XVI (excluding State sup-
15 plementation) for months during the pre-
16 ceding calendar year to all beneficiaries
17 who have attained age 18 but have not at-
18 tained age 65.

19 “(B) OUTCOME PAYMENT PERIOD.—The
20 term ‘outcome payment period’ means, in con-
21 nection with any individual who had assigned a
22 ticket to work and self-sufficiency to an employ-
23 ment network under the Program, a period—

24 “(i) beginning with the first month,
25 ending after the date on which such ticket

1 was assigned to the employment network,
2 for which benefits (described in paragraphs
3 (3) and (4) of subsection (k)) are not pay-
4 able to such individual by reason of en-
5 gagement in substantial gainful activity or
6 by reason of earnings from work activity;
7 and

8 “(ii) ending with the 60th month
9 (consecutive or otherwise), ending after
10 such date, for which such benefits are not
11 payable to such individual by reason of en-
12 gagement in substantial gainful activity or
13 by reason of earnings from work activity.

14 “(5) PERIODIC REVIEW AND ALTERATIONS OF
15 PRESCRIBED SCHEDULES.—

16 “(A) PERCENTAGES AND PERIODS.—The
17 Commissioner shall periodically review the per-
18 centage specified in paragraph (2)(C), the total
19 payments permissible under paragraph (3)(C),
20 and the period of time specified in paragraph
21 (4)(B) to determine whether such percentages,
22 such permissible payments, and such period
23 provide an adequate incentive for employment
24 networks to assist beneficiaries to enter the
25 workforce, while providing for appropriate

1 economies. The Commissioner may alter such
2 percentage, such total permissible payments, or
3 such period of time to the extent that the Com-
4 missioner determines, on the basis of the Com-
5 missioner's review under this paragraph, that
6 such an alteration would better provide the in-
7 centive and economies described in the pre-
8 ceding sentence.

9 “(B) NUMBER AND AMOUNTS OF MILE-
10 STONE PAYMENTS.—The Commissioner shall
11 periodically review the number and amounts of
12 milestone payments established by the Commis-
13 sioner pursuant to this section to determine
14 whether they provide an adequate incentive for
15 employment networks to assist beneficiaries to
16 enter the workforce, taking into account infor-
17 mation provided to the Commissioner by pro-
18 gram managers, the Work Incentives Advisory
19 Panel established under section 201(f) of the
20 Work Incentives Improvement Act of 1999, and
21 other reliable sources. The Commissioner may
22 from time to time alter the number and
23 amounts of milestone payments initially estab-
24 lished by the Commissioner pursuant to this
25 section to the extent that the Commissioner de-

1 termines that such an alteration would allow an
2 adequate incentive for employment networks to
3 assist beneficiaries to enter the workforce. Such
4 alteration shall be based on information pro-
5 vided to the Commissioner by program man-
6 agers, the Work Incentives Advisory Panel es-
7 tablished under section 201(f) of the Work In-
8 centives Improvement Act of 1999, or other re-
9 liable sources.

10 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
11 any period for which an individual is using, as defined by
12 the Commissioner, a ticket to work and self-sufficiency
13 issued under this section, the Commissioner (and any ap-
14 plicable State agency) may not initiate a continuing dis-
15 ability review or other review under section 221 of whether
16 the individual is or is not under a disability or a review
17 under title XVI similar to any such review under section
18 221.

19 “(j) ALLOCATION OF COSTS.—

20 “(1) PAYMENTS TO EMPLOYMENT NET-
21 WORKS.—Payments to employment networks (in-
22 cluding State agencies that elect to participate in the
23 Program as an employment network) shall be made
24 from the Federal Old-Age and Survivors Insurance
25 Trust Fund or the Federal Disability Insurance

1 Trust Fund, as appropriate, in the case of ticketed
2 title II disability beneficiaries who return to work, or
3 from the appropriation made available for making
4 supplemental security income payments under title
5 XVI, in the case of title XVI disability beneficiaries
6 who return to work. With respect to ticketed bene-
7 ficiaries who concurrently are entitled to benefits
8 under title II and eligible for payments under title
9 XVI who return to work, the Commissioner shall al-
10 locate the cost of payments to employment networks
11 to which the tickets of such beneficiaries have been
12 assigned among such Trust Funds and appropria-
13 tion, as appropriate.

14 “(2) ADMINISTRATIVE EXPENSES.—The costs
15 of administering this section (other than payments
16 to employment networks) shall be paid from
17 amounts made available for the administration of
18 title II and amounts made available for the adminis-
19 tration of title XVI, and shall be allocated among
20 those amounts as appropriate.

21 “(k) DEFINITIONS.—In this section:

22 “(1) COMMISSIONER.—The term ‘Commis-
23 sioner’ means the Commissioner of Social Security.

1 “(2) DISABLED BENEFICIARY.—The term ‘dis-
2 abled beneficiary’ means a title II disability bene-
3 ficiary or a title XVI disability beneficiary.

4 “(3) TITLE II DISABILITY BENEFICIARY.—The
5 term ‘title II disability beneficiary’ means an indi-
6 vidual entitled to disability insurance benefits under
7 section 223 or to monthly insurance benefits under
8 section 202 based on such individual’s disability (as
9 defined in section 223(d)). An individual is a title II
10 disability beneficiary for each month for which such
11 individual is entitled to such benefits.

12 “(4) TITLE XVI DISABILITY BENEFICIARY.—
13 The term ‘title XVI disability beneficiary’ means an
14 individual eligible for supplemental security income
15 benefits under title XVI on the basis of blindness
16 (within the meaning of section 1614(a)(2)) or dis-
17 ability (within the meaning of section 1614(a)(3)).
18 An individual is a title XVI disability beneficiary for
19 each month for which such individual is eligible for
20 such benefits.

21 “(5) SUPPLEMENTAL SECURITY INCOME BEN-
22 EFIT UNDER TITLE XVI.—The term ‘supplemental
23 security income benefit under title XVI’ means a
24 cash benefit under section 1611 or 1619(a), and

1 does not include a State supplementary payment,
2 administered federally or otherwise.

3 “(l) REGULATIONS.—Not later than 1 year after the
4 date of enactment of this section, the Commissioner shall
5 prescribe such regulations as are necessary to carry out
6 the provisions of this section.

7 “(m) REAUTHORIZATION OF PROGRAM.—

8 “(1) IN GENERAL.—The Program established
9 under this section shall terminate on the date that
10 is 5 years after the date that the Commissioner com-
11 mences implementation of the Program.

12 “(2) ASSURANCE OF OUTCOME PAYMENT PE-
13 RIOD.—Notwithstanding paragraph (1)—

14 “(A) any individual who has initiated a
15 work plan in accordance with subsection (g)
16 may use services provided under the Program
17 in accordance with this section; and

18 “(B) any employment network that pro-
19 vides services to such an individual shall receive
20 payments for such services,

21 during the individual’s outcome payment period (as
22 defined in paragraph (4)(B) of subsection (h), in-
23 cluding any alteration of such period in accordance
24 with paragraph (5) of that subsection).”.

25 (b) CONFORMING AMENDMENTS.—

1 (1) AMENDMENTS TO TITLE II.—

2 (A) Section 221(i) of the Social Security
3 Act (42 U.S.C. 421(i)) is amended by adding at
4 the end the following:

5 “(5) For suspension of reviews under this subsection
6 in the case of an individual using a ticket to work and
7 self-sufficiency, see section 1148(i).”.

8 (B) Section 222(a) of the Social Security
9 Act (42 U.S.C. 422(a)) is repealed.

10 (C) Section 222(b) of the Social Security
11 Act (42 U.S.C. 422(b)) is repealed.

12 (D) Section 225(b)(1) of the Social Secu-
13 rity Act (42 U.S.C. 425(b)(1)) is amended by
14 striking “a program of vocational rehabilitation
15 services” and inserting “a program consisting
16 of the Ticket to Work and Self-Sufficiency Pro-
17 gram under section 1148 or another program of
18 vocational rehabilitation services, employment
19 services, or other support services”.

20 (2) AMENDMENTS TO TITLE XVI.—

21 (A) Section 1615(a) of the Social Security
22 Act (42 U.S.C. 1382d(a)) is amended to read
23 as follows:

24 “SEC. 1615. (a) In the case of any blind or disabled
25 individual who—

1 “(1) has not attained age 16, and

2 “(2) with respect to whom benefits are paid
3 under this title,

4 the Commissioner of Social Security shall make provision
5 for referral of such individual to the appropriate State
6 agency administering the State program under title V.”.

7 (B) Section 1615(c) of the Social Security
8 Act (42 U.S.C. 1382d(c)) is repealed.

9 (C) Section 1631(a)(6)(A) of the Social
10 Security Act (42 U.S.C. 1383(a)(6)(A)) is
11 amended by striking “a program of vocational
12 rehabilitation services” and inserting “a pro-
13 gram consisting of the Ticket to Work and Self-
14 Sufficiency Program under section 1148 or an-
15 other program of vocational rehabilitation serv-
16 ices, employment services, or other support
17 services”.

18 (D) Section 1633(c) of the Social Security
19 Act (42 U.S.C. 1383b(c)) is amended—

20 (i) by inserting “(1)” after “(c)”; and

21 (ii) by adding at the end the fol-

22 lowing:

23 “(2) For suspension of continuing disability reviews
24 and other reviews under this title similar to reviews under

1 section 221 in the case of an individual using a ticket to
2 work and self-sufficiency, see section 1148(i).”.

3 (c) EFFECTIVE DATE.—Subject to subsection (d),
4 the amendments made by subsections (a) and (b) shall
5 take effect with the first month following 1 year after the
6 date of enactment of this Act.

7 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

8 (1) IN GENERAL.—Not later than 1 year after
9 the date of enactment of this Act, the Commissioner
10 of Social Security shall commence implementation of
11 the amendments made by this section (other than
12 paragraphs (1)(C) and (2)(B) of subsection (b)) in
13 graduated phases at phase-in sites selected by the
14 Commissioner. Such phase-in sites shall be selected
15 so as to ensure, prior to full implementation of the
16 Ticket to Work and Self-Sufficiency Program, the
17 development and refinement of referral processes,
18 payment systems, computer linkages, management
19 information systems, and administrative processes
20 necessary to provide for full implementation of such
21 amendments. Subsection (c) shall apply with respect
22 to paragraphs (1)(C) and (2)(B) of subsection (b)
23 without regard to this subsection.

24 (2) REQUIREMENTS.—Implementation of the
25 Program at each phase-in site shall be carried out

1 on a wide enough scale to permit a thorough evalua-
2 tion of the alternative methods under consideration,
3 so as to ensure that the most efficacious methods
4 are determined and in place for full implementation
5 of the Program on a timely basis.

6 (3) FULL IMPLEMENTATION.—The Commis-
7 sioner shall ensure that the ability to provide tickets
8 and services to individuals under the Program exists
9 in every State as soon as practicable on or after the
10 effective date specified in subsection (c) but not later
11 than 3 years after such date.

12 (4) ONGOING EVALUATION OF PROGRAM.—

13 (A) IN GENERAL.—The Commissioner
14 shall design and conduct a series of evaluations
15 to assess the cost-effectiveness of activities car-
16 ried out under this section and the amendments
17 made thereby, as well as the effects of this sec-
18 tion and the amendments made thereby on
19 work outcomes for beneficiaries receiving tickets
20 to work and self-sufficiency under the Program.

21 (B) CONSULTATION.—The Commissioner
22 shall design and carry out the series of evalua-
23 tions after receiving relevant advice from ex-
24 perts in the fields of disability, vocational reha-
25 bilitation, and program evaluation and individ-

1 uals using tickets to work and self-sufficiency
2 under the Program and consulting with the
3 Work Incentives Advisory Panel established
4 under section 201(f), the Comptroller General
5 of the United States, other agencies of the Fed-
6 eral Government, and private organizations
7 with appropriate expertise.

8 (C) METHODOLOGY.—

9 (i) IMPLEMENTATION.—The Commis-
10 sioner, in consultation with the Work In-
11 centives Advisory Panel established under
12 section 201(f), shall ensure that plans for
13 evaluations and data collection methods
14 under the Program are appropriately de-
15 signed to obtain detailed employment infor-
16 mation.

17 (ii) SPECIFIC MATTERS TO BE AD-
18 DRESSED.—Each such evaluation shall ad-
19 dress (but is not limited to)—

20 (I) the annual cost (including net
21 cost) of the Program and the annual
22 cost (including net cost) that would
23 have been incurred in the absence of
24 the Program;

1 (II) the determinants of return to
2 work, including the characteristics of
3 beneficiaries in receipt of tickets
4 under the Program;

5 (III) the types of employment
6 services, vocational rehabilitation serv-
7 ices, and other support services fur-
8 nished to beneficiaries in receipt of
9 tickets under the Program who return
10 to work and to those who do not re-
11 turn to work;

12 (IV) the duration of employment
13 services, vocational rehabilitation serv-
14 ices, and other support services fur-
15 nished to beneficiaries in receipt of
16 tickets under the Program who return
17 to work and the duration of such serv-
18 ices furnished to those who do not re-
19 turn to work and the cost to employ-
20 ment networks of furnishing such
21 services;

22 (V) the employment outcomes,
23 including wages, occupations, benefits,
24 and hours worked, of beneficiaries
25 who return to work after receiving

1 tickets under the Program and those
2 who return to work without receiving
3 such tickets;

4 (VI) the characteristics of pro-
5 viders whose services are provided
6 within an employment network under
7 the Program;

8 (VII) the extent (if any) to which
9 employment networks display a great-
10 er willingness to provide services to
11 beneficiaries with a range of disabil-
12 ities;

13 (VIII) the characteristics (includ-
14 ing employment outcomes) of those
15 beneficiaries who receive services
16 under the outcome payment system
17 and of those beneficiaries who receive
18 services under the outcome-milestone
19 payment system;

20 (IX) measures of satisfaction
21 among beneficiaries in receipt of tick-
22 ets under the Program; and

23 (X) reasons for (including com-
24 ments solicited from beneficiaries re-
25 garding) their choice not to use their

1 tickets or their inability to return to
2 work despite the use of their tickets.

3 (D) PERIODIC EVALUATION REPORTS.—

4 Following the close of the third and fifth fiscal
5 years ending after the effective date under sub-
6 section (c), and prior to the close of the seventh
7 fiscal year ending after such date, the Commis-
8 sioner shall transmit to the Committee on Ways
9 and Means of the House of Representatives and
10 the Committee on Finance of the Senate a re-
11 port containing the Commissioner's evaluation
12 of the progress of activities conducted under the
13 provisions of this section and the amendments
14 made thereby. Each such report shall set forth
15 the Commissioner's evaluation of the extent to
16 which the Program has been successful and the
17 Commissioner's conclusions on whether or how
18 the Program should be modified. Each such re-
19 port shall include such data, findings, materials,
20 and recommendations as the Commissioner may
21 consider appropriate.

22 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
23 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
24 AMENDMENTS IN SUCH STATE.—

1 (A) IN GENERAL.—In the case of any
2 State in which the amendments made by sub-
3 section (a) have not been fully implemented
4 pursuant to this subsection, the Commissioner
5 shall determine by regulation the extent to
6 which—

7 (i) the requirement under section
8 222(a) of the Social Security Act for
9 prompt referrals to a State agency, and

10 (ii) the authority of the Commissioner
11 under section 222(d)(2) of the Social Secu-
12 rity Act to provide vocational rehabilitation
13 services in such State by agreement or
14 contract with other public or private agen-
15 cies, organizations, institutions, or individ-
16 uals,

17 shall apply in such State.

18 (B) EXISTING AGREEMENTS.—Nothing in
19 subparagraph (A) or the amendments made by
20 subsection (a) shall be construed to limit, im-
21 pede, or otherwise affect any agreement entered
22 into pursuant to section 222(d)(2) of the Social
23 Security Act before the date of enactment of
24 this Act with respect to services provided pursu-
25 ant to such agreement to beneficiaries receiving

1 services under such agreement as of such date,
2 except with respect to services (if any) to be
3 provided after 3 years after the effective date
4 provided in subsection (c).

5 (e) SPECIFIC REGULATIONS REQUIRED.—

6 (1) IN GENERAL.—The Commissioner of Social
7 Security shall prescribe such regulations as are nec-
8 essary to implement the amendments made by this
9 section.

10 (2) SPECIFIC MATTERS TO BE INCLUDED IN
11 REGULATIONS.—The matters which shall be ad-
12 dressed in such regulations shall include—

13 (A) the form and manner in which tickets
14 to work and self-sufficiency may be distributed
15 to beneficiaries pursuant to section 1148(b)(1)
16 of the Social Security Act;

17 (B) the format and wording of such tick-
18 ets, which shall incorporate by reference any
19 contractual terms governing service by employ-
20 ment networks under the Program;

21 (C) the form and manner in which State
22 agencies may elect participation in the Ticket to
23 Work and Self-Sufficiency Program (and revoke
24 such an election) pursuant to section
25 1148(c)(1) of the Social Security Act and provi-

1 sion for periodic opportunities for exercising
2 such elections (and revocations);

3 (D) the status of State agencies under sec-
4 tion 1148(c)(1) at the time that State agencies
5 exercise elections (and revocations) under that
6 section;

7 (E) the terms of agreements to be entered
8 into with program managers pursuant to sec-
9 tion 1148(d) of the Social Security Act,
10 including—

11 (i) the terms by which program man-
12 agers are precluded from direct participa-
13 tion in the delivery of services pursuant to
14 section 1148(d)(3) of the Social Security
15 Act;

16 (ii) standards which must be met by
17 quality assurance measures referred to in
18 paragraph (6) of section 1148(d) and
19 methods of recruitment of employment net-
20 works utilized pursuant to paragraph (2)
21 of section 1148(e); and

22 (iii) the format under which dispute
23 resolution will operate under section
24 1148(d)(7);

1 (F) the terms of agreements to be entered
2 into with employment networks pursuant to sec-
3 tion 1148(d)(4) of the Social Security Act,
4 including—

5 (i) the manner in which service areas
6 are specified pursuant to section
7 1148(f)(2)(A) of the Social Security Act;

8 (ii) the general selection criteria and
9 the specific selection criteria which are ap-
10 plicable to employment networks under
11 section 1148(f)(1)(C) of the Social Secu-
12 rity Act in selecting service providers;

13 (iii) specific requirements relating to
14 annual financial reporting by employment
15 networks pursuant to section 1148(f)(3) of
16 the Social Security Act; and

17 (iv) the national model to which peri-
18 odic outcomes reporting by employment
19 networks must conform under section
20 1148(f)(4) of the Social Security Act;

21 (G) standards which must be met by indi-
22 vidual work plans pursuant to section 1148(g)
23 of the Social Security Act;

1 (H) standards which must be met by pay-
2 ment systems required under section 1148(h) of
3 the Social Security Act, including—

4 (i) the form and manner in which
5 elections by employment networks of pay-
6 ment systems are to be exercised pursuant
7 to section 1148(h)(1)(A);

8 (ii) the terms which must be met by
9 an outcome payment system under section
10 1148(h)(2);

11 (iii) the terms which must be met by
12 an outcome-milestone payment system
13 under section 1148(h)(3);

14 (iv) any revision of the percentage
15 specified in paragraph (2)(C) of section
16 1148(h) of the Social Security Act or the
17 period of time specified in paragraph
18 (4)(B) of such section 1148(h); and

19 (v) annual oversight procedures for
20 such systems; and

21 (I) procedures for effective oversight of the
22 Program by the Commissioner of Social Secu-
23 rity, including periodic reviews and reporting
24 requirements.

25 (f) WORK INCENTIVES ADVISORY PANEL.—

1 (1) ESTABLISHMENT.—There is established
2 within the Social Security Administration a panel to
3 be known as the “Work Incentives Advisory Panel”
4 (in this subsection referred to as the “Panel”).

5 (2) DUTIES OF PANEL.—It shall be the duty of
6 the Panel to—

7 (A) advise the Secretary of Health and
8 Human Services, the Secretary of Labor, the
9 Secretary of Education, and the Commissioner
10 of Social Security on issues related to work in-
11 centives programs, planning, and assistance for
12 individuals with disabilities, including work in-
13 centive provisions under titles II, XI, XVI,
14 XVIII, and XIX of the Social Security Act (42
15 U.S.C. 401 et seq., 1301 et seq., 1381 et seq.,
16 1395 et seq., 1396 et seq.); and

17 (B) with respect to the Ticket to Work and
18 Self-Sufficiency Program established under sec-
19 tion 1148 of the Social Security Act—

20 (i) advise the Commissioner of Social
21 Security with respect to establishing phase-
22 in sites for such Program and fully imple-
23 menting the Program thereafter, the re-
24 finement of access of disabled beneficiaries
25 to employment networks, payment systems,

1 and management information systems, and
2 advise the Commissioner whether such
3 measures are being taken to the extent
4 necessary to ensure the success of the Pro-
5 gram;

6 (ii) advise the Commissioner regard-
7 ing the most effective designs for research
8 and demonstration projects associated with
9 the Program or conducted pursuant to sec-
10 tion 302;

11 (iii) advise the Commissioner on the
12 development of performance measurements
13 relating to quality assurance under section
14 1148(d)(6) of the Social Security Act; and

15 (iv) furnish progress reports on the
16 Program to the Commissioner and each
17 House of Congress.

18 (3) MEMBERSHIP.—

19 (A) NUMBER AND APPOINTMENT.—The
20 Panel shall be composed of 12 members ap-
21 pointed by the Commissioner of Social Security
22 in consultation with the Speaker of the House
23 of Representatives, the Minority Leader of the
24 House of Representatives, the Majority Leader

1 of the Senate, and the Minority Leader of the
2 Senate.

3 (B) REPRESENTATION.—All members ap-
4 pointed to the Panel shall have experience or
5 expert knowledge in the fields of, or related to,
6 work incentive programs, employment services,
7 vocational rehabilitation services, health care
8 services, and other support services for individ-
9 uals with disabilities. At least 7 members of the
10 Panel shall be individuals with disabilities or
11 representatives of individuals with disabilities,
12 except that, of those 7 members, at least 5
13 members shall be current or former title II dis-
14 ability beneficiaries or title XVI disability bene-
15 ficiaries (as such terms are defined in section
16 1148(k) of the Social Security Act (as added by
17 subsection (a))).

18 (C) TERMS.—

19 (i) IN GENERAL.—Each member shall
20 be appointed for a term of 4 years (or, if
21 less, for the remaining life of the Panel),
22 except as provided in clauses (ii) and (iii).
23 The initial members shall be appointed not
24 later than 90 days after the date of enact-
25 ment of this Act.

1 (ii) TERMS OF INITIAL AP-
2 POINTEES.—As designated by the Commis-
3 sioner at the time of appointment, of the
4 members first appointed—

5 (I) 6 of the members appointed
6 under subparagraph (A) shall be ap-
7 pointed for a term of 2 years; and

8 (II) 6 of the members appointed
9 under subparagraph (A) shall be ap-
10 pointed for a term of 4 years.

11 (iii) VACANCIES.—Any member ap-
12 pointed to fill a vacancy occurring before
13 the expiration of the term for which the
14 member's predecessor was appointed shall
15 be appointed only for the remainder of that
16 term. A member may serve after the expi-
17 ration of that member's term until a suc-
18 cessor has taken office. A vacancy in the
19 Panel shall be filled in the manner in
20 which the original appointment was made.

21 (D) BASIC PAY.—Members shall each be
22 paid at a rate, and in a manner, that is con-
23 sistent with guidelines established under section
24 7 of the Federal Advisory Committee Act (5
25 U.S.C. App.).

1 (E) TRAVEL EXPENSES.—Each member
2 shall receive travel expenses, including per diem
3 in lieu of subsistence, in accordance with sec-
4 tions 5702 and 5703 of title 5, United States
5 Code.

6 (F) QUORUM.—Eight members of the
7 Panel shall constitute a quorum but a lesser
8 number may hold hearings.

9 (G) CHAIRPERSON.—The Chairperson of
10 the Panel shall be designated by the Commis-
11 sioner. The term of office of the Chairperson
12 shall be 4 years.

13 (H) MEETINGS.—The Panel shall meet at
14 least quarterly and at other times at the call of
15 the Chairperson or a majority of its members.

16 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
17 AND CONSULTANTS.—

18 (A) DIRECTOR.—The Panel shall have a
19 Director who shall be appointed by the Commis-
20 sioner and paid at a rate, and in a manner,
21 that is consistent with guidelines established
22 under section 7 of the Federal Advisory Com-
23 mittee Act (5 U.S.C. App.).

24 (B) STAFF.—Subject to rules prescribed
25 by the Commissioner, the Director may appoint

1 and fix the pay of additional personnel as the
2 Director considers appropriate.

3 (C) EXPERTS AND CONSULTANTS.—Sub-
4 ject to rules prescribed by the Commissioner,
5 the Director may procure temporary and inter-
6 mittent services under section 3109(b) of title
7 5, United States Code.

8 (D) STAFF OF FEDERAL AGENCIES.—
9 Upon request of the Panel, the head of any
10 Federal department or agency may detail, on a
11 reimbursable basis, any of the personnel of that
12 department or agency to the Panel to assist it
13 in carrying out its duties under this subsection.

14 (5) POWERS OF PANEL.—

15 (A) HEARINGS AND SESSIONS.—The Panel
16 may, for the purpose of carrying out its duties
17 under this subsection, hold such hearings, sit
18 and act at such times and places, and take such
19 testimony and evidence as the Panel considers
20 appropriate.

21 (B) POWERS OF MEMBERS AND AGENTS.—
22 Any member or agent of the Panel may, if au-
23 thorized by the Panel, take any action which
24 the Panel is authorized to take by this sub-
25 section.

1 (C) **MAILS.**—The Panel may use the
2 United States mails in the same manner and
3 under the same conditions as other departments
4 and agencies of the United States.

5 (6) **REPORTS.**—

6 (A) **INTERIM REPORTS.**—The Panel shall
7 submit to the President and Congress interim
8 reports at least annually.

9 (B) **FINAL REPORT.**—The Panel shall
10 transmit a final report to the President and
11 Congress not later than 8 years after the date
12 of enactment of this Act. The final report shall
13 contain a detailed statement of the findings and
14 conclusions of the Panel, together with its rec-
15 ommendations for legislation and administrative
16 actions which the Panel considers appropriate.

17 (7) **TERMINATION.**—The Panel shall terminate
18 30 days after the date of the submission of its final
19 report under paragraph (6)(B).

20 (8) **ALLOCATION OF COSTS.**—The costs of car-
21 rying out this subsection shall be paid from amounts
22 made available for the administration of title II of
23 the Social Security Act (42 U.S.C. 401 et seq.) and
24 amounts made available for the administration of
25 title XVI of that Act (42 U.S.C. 1381 et seq.), and

1 shall be allocated among those amounts as appro-
2 priate.

3 **Subtitle B—Elimination of Work**
4 **Disincentives**

5 **SEC. 211. WORK ACTIVITY STANDARD AS A BASIS FOR RE-**
6 **VIEW OF AN INDIVIDUAL'S DISABLED STATUS.**

7 Section 221 of the Social Security Act (42 U.S.C.
8 421) is amended by adding at the end the following:

9 “(m)(1) In any case where an individual entitled to
10 disability insurance benefits under section 223 or to
11 monthly insurance benefits under section 202 based on
12 such individual's disability (as defined in section 223(d))
13 has received such benefits for at least 24 months—

14 “(A) no continuing disability review conducted
15 by the Commissioner may be scheduled for the indi-
16 vidual solely as a result of the individual's work ac-
17 tivity;

18 “(B) no work activity engaged in by the indi-
19 vidual may be used as evidence that the individual
20 is no longer disabled; and

21 “(C) no cessation of work activity by the indi-
22 vidual may give rise to a presumption that the indi-
23 vidual is unable to engage in work.

24 “(2) An individual to which paragraph (1) applies
25 shall continue to be subject to—

1 “(A) continuing disability reviews on a regularly
2 scheduled basis that is not triggered by work; and

3 “(B) termination of benefits under this title in
4 the event that the individual has earnings that ex-
5 ceed the level of earnings established by the Com-
6 missioner to represent substantial gainful activity.”.

7 **SEC. 212. EXPEDITED REINSTATEMENT OF DISABILITY**
8 **BENEFITS.**

9 (a) OASDI BENEFITS.—Section 223 of the Social
10 Security Act (42 U.S.C. 423) is amended—

11 (1) by redesignating subsection (i) as subsection
12 (j); and

13 (2) by inserting after subsection (h) the fol-
14 lowing:

15 “Reinstatement of Entitlement

16 “(i)(1)(A) Entitlement to benefits described in sub-
17 paragraph (B)(i)(I) shall be reinstated in any case where
18 the Commissioner determines that an individual described
19 in subparagraph (B) has filed a request for reinstatement
20 meeting the requirements of paragraph (2)(A) during the
21 period prescribed in subparagraph (C). Reinstatement of
22 such entitlement shall be in accordance with the terms of
23 this subsection.

24 “(B) An individual is described in this subparagraph
25 if—

1 “(i) prior to the month in which the individual
2 files a request for reinstatement—

3 “(I) the individual was entitled to benefits
4 under this section or section 202 on the basis
5 of disability pursuant to an application filed
6 therefore; and

7 “(II) such entitlement terminated due to
8 the performance of substantial gainful activity;

9 “(ii) the individual is under a disability and the
10 physical or mental impairment that is the basis for
11 the finding of disability is the same as (or related
12 to) the physical or mental impairment that was the
13 basis for the finding of disability that gave rise to
14 the entitlement described in clause (i); and

15 “(iii) the individual’s disability renders the indi-
16 vidual unable to perform substantial gainful activity.

17 “(C)(i) Except as provided in clause (ii), the period
18 prescribed in this subparagraph with respect to an indi-
19 vidual is 60 consecutive months beginning with the month
20 following the most recent month for which the individual
21 was entitled to a benefit described in subparagraph
22 (B)(i)(I) prior to the entitlement termination described in
23 subparagraph (B)(i)(II).

24 “(ii) In the case of an individual who fails to file a
25 reinstatement request within the period prescribed in

1 clause (i), the Commissioner may extend the period if the
2 Commissioner determines that the individual had good
3 cause for the failure to so file.

4 “(2)(A)(i) A request for reinstatement shall be filed
5 in such form, and containing such information, as the
6 Commissioner may prescribe.

7 “(ii) A request for reinstatement shall include express
8 declarations by the individual that the individual meets the
9 requirements specified in clauses (ii) and (iii) of para-
10 graph (1)(B).

11 “(B) A request for reinstatement filed in accordance
12 with subparagraph (A) may constitute an application for
13 benefits in the case of any individual who the Commis-
14 sioner determines is not entitled to reinstated benefits
15 under this subsection.

16 “(3) In determining whether an individual meets the
17 requirements of paragraph (1)(B)(ii), the provisions of
18 subsection (f) shall apply.

19 “(4)(A)(i) Subject to clause (ii), entitlement to bene-
20 fits reinstated under this subsection shall commence with
21 the benefit payable for the month in which a request for
22 reinstatement is filed.

23 “(ii) An individual whose entitlement to a benefit for
24 any month would have been reinstated under this sub-
25 section had the individual filed a request for reinstatement

1 before the end of such month shall be entitled to such ben-
2 efit for such month if such request for reinstatement is
3 filed before the end of the twelfth month immediately suc-
4 ceeding such month.

5 “(B)(i) Subject to clauses (ii) and (iii), the amount
6 of the benefit payable for any month pursuant to the rein-
7 statement of entitlement under this subsection shall be de-
8 termined in accordance with the provisions of this title.

9 “(ii) For purposes of computing the primary insur-
10 ance amount of an individual whose entitlement to benefits
11 under this section is reinstated under this subsection, the
12 date of onset of the individual’s disability shall be the date
13 of onset used in determining the individual’s most recent
14 period of disability arising in connection with such benefits
15 payable on the basis of an application.

16 “(iii) Benefits under this section or section 202 pay-
17 able for any month pursuant to a request for reinstatement
18 filed in accordance with paragraph (2) shall be re-
19 duced by the amount of any provisional benefit paid to
20 such individual for such month under paragraph (7).

21 “(C) No benefit shall be payable pursuant to an enti-
22 tlement reinstated under this subsection to an individual
23 for any month in which the individual engages in substan-
24 tial gainful activity.

1 “(D) The entitlement of any individual that is rein-
2 stated under this subsection shall end with the benefits
3 payable for the month preceding whichever of the following
4 months is the earliest:

5 “(i) The month in which the individual dies.

6 “(ii) The month in which the individual attains
7 retirement age.

8 “(iii) The third month following the month in
9 which the individual’s disability ceases.

10 “(5) Whenever an individual’s entitlement to benefits
11 under this section is reinstated under this subsection, enti-
12 tlement to benefits payable on the basis of such individ-
13 ual’s wages and self-employment income may be reinstated
14 with respect to any person previously entitled to such ben-
15 efits on the basis of an application if the Commissioner
16 determines that such person satisfies all the requirements
17 for entitlement to such benefits except requirements re-
18 lated to the filing of an application. The provisions of
19 paragraph (4) shall apply to the reinstated entitlement of
20 any such person to the same extent that they apply to
21 the reinstated entitlement of such individual.

22 “(6) An individual to whom benefits are payable
23 under this section or section 202 pursuant to a reinstate-
24 ment of entitlement under this subsection for 24 months
25 (whether or not consecutive) shall, with respect to benefits

1 so payable after such twenty-fourth month, be deemed for
2 purposes of paragraph (1)(B)(i)(I) and the determination,
3 if appropriate, of the termination month in accordance
4 with subsection (a)(1) of this section, or subsection (d)(1),
5 (e)(1), or (f)(1) of section 202, to be entitled to such bene-
6 fits on the basis of an application filed therefore.

7 “(7)(A) An individual described in paragraph (1)(B)
8 who files a request for reinstatement in accordance with
9 the provisions of paragraph (2)(A) shall be entitled to pro-
10 visional benefits payable in accordance with this para-
11 graph, unless the Commissioner determines that the indi-
12 vidual does not meet the requirements of paragraph
13 (1)(B)(i) or that the individual’s declaration under para-
14 graph (2)(A)(ii) is false. Any such determination by the
15 Commissioner shall be final and not subject to review
16 under subsection (b) or (g) of section 205.

17 “(B) The amount of a provisional benefit for a month
18 shall equal the amount of the last monthly benefit payable
19 to the individual under this title on the basis of an applica-
20 tion increased by an amount equal to the amount, if any,
21 by which such last monthly benefit would have been in-
22 creased as a result of the operation of section 215(i).

23 “(C)(i) Provisional benefits shall begin with the
24 month in which a request for reinstatement is filed in ac-
25 cordance with paragraph (2)(A).

1 “(ii) Provisional benefits shall end with the earliest
2 of—

3 “(I) the month in which the Commissioner
4 makes a determination regarding the individual’s en-
5 titlement to reinstated benefits;

6 “(II) the fifth month following the month de-
7 scribed in clause (i);

8 “(III) the month in which the individual per-
9 forms substantial gainful activity; or

10 “(IV) the month in which the Commissioner de-
11 termines that the individual does not meet the re-
12 quirements of paragraph (1)(B)(i) or that the indi-
13 vidual’s declaration made in accordance with para-
14 graph (2)(A)(ii) is false.

15 “(D) In any case in which the Commissioner deter-
16 mines that an individual is not entitled to reinstated bene-
17 fits, any provisional benefits paid to the individual under
18 this paragraph shall not be subject to recovery as an over-
19 payment unless the Commissioner determines that the in-
20 dividual knew or should have known that the individual
21 did not meet the requirements of paragraph (1)(B).”.

22 (b) SSI BENEFITS.—

23 (1) IN GENERAL.—Section 1631 of the Social
24 Security Act (42 U.S.C. 1383) is amended by add-
25 ing at the end the following:

1 “Reinstatement of Eligibility on the Basis of Blindness
2 or Disability

3 “(p)(1)(A) Eligibility for benefits under this title
4 shall be reinstated in any case where the Commissioner
5 determines that an individual described in subparagraph
6 (B) has filed a request for reinstatement meeting the re-
7 quirements of paragraph (2)(A) during the period pre-
8 scribed in subparagraph (C). Reinstatement of eligibility
9 shall be in accordance with the terms of this subsection.

10 “(B) An individual is described in this subparagraph
11 if—

12 “(i) prior to the month in which the individual
13 files a request for reinstatement—

14 “(I) the individual was eligible for benefits
15 under this title on the basis of blindness or dis-
16 ability pursuant to an application filed there-
17 fore; and

18 “(II) the individual thereafter was ineli-
19 gible for such benefits due to earned income (or
20 earned and unearned income) for a period of 12
21 or more consecutive months;

22 “(ii) the individual is blind or disabled and the
23 physical or mental impairment that is the basis for
24 the finding of blindness or disability is the same as
25 (or related to) the physical or mental impairment

1 that was the basis for the finding of blindness or
2 disability that gave rise to the eligibility described in
3 clause (i);

4 “(iii) the individual’s blindness or disability ren-
5 ders the individual unable to perform substantial
6 gainful activity; and

7 “(iv) the individual satisfies the nonmedical re-
8 quirements for eligibility for benefits under this title.

9 “(C)(i) Except as provided in clause (ii), the period
10 prescribed in this subparagraph with respect to an indi-
11 vidual is 60 consecutive months beginning with the month
12 following the most recent month for which the individual
13 was eligible for a benefit under this title (including section
14 1619) prior to the period of ineligibility described in sub-
15 paragraph (B)(i)(II).

16 “(ii) In the case of an individual who fails to file a
17 reinstatement request within the period prescribed in
18 clause (i), the Commissioner may extend the period if the
19 Commissioner determines that the individual had good
20 cause for the failure to so file.

21 “(2)(A)(i) A request for reinstatement shall be filed
22 in such form, and containing such information, as the
23 Commissioner may prescribe.

24 “(ii) A request for reinstatement shall include express
25 declarations by the individual that the individual meets the

1 requirements specified in clauses (ii) through (iv) of para-
2 graph (1)(B).

3 “(B) A request for reinstatement filed in accordance
4 with subparagraph (A) may constitute an application for
5 benefits in the case of any individual who the Commis-
6 sioner determines is not eligible for reinstated benefits
7 under this subsection.

8 “(3) In determining whether an individual meets the
9 requirements of paragraph (1)(B)(ii), the provisions of
10 section 1614(a)(4) shall apply.

11 “(4)(A) Eligibility for benefits reinstated under this
12 subsection shall commence with the benefit payable for the
13 month following the month in which a request for rein-
14 statement is filed.

15 “(B)(i) Subject to clause (ii), the amount of the ben-
16 efit payable for any month pursuant to the reinstatement
17 of eligibility under this subsection shall be determined in
18 accordance with the provisions of this title.

19 “(ii) The benefit under this title payable for any
20 month pursuant to a request for reinstatement filed in ac-
21 cordance with paragraph (2) shall be reduced by the
22 amount of any provisional benefit paid to such individual
23 for such month under paragraph (7).

24 “(C) Except as otherwise provided in this subsection,
25 eligibility for benefits under this title reinstated pursuant

1 to a request filed under paragraph (2) shall be subject
2 to the same terms and conditions as eligibility established
3 pursuant to an application filed therefore.

4 “(5) Whenever an individual’s eligibility for benefits
5 under this title is reinstated under this subsection, eligi-
6 bility for such benefits shall be reinstated with respect to
7 the individual’s spouse if such spouse was previously an
8 eligible spouse of the individual under this title and the
9 Commissioner determines that such spouse satisfies all the
10 requirements for eligibility for such benefits except re-
11 quirements related to the filing of an application. The pro-
12 visions of paragraph (4) shall apply to the reinstated eligi-
13 bility of the spouse to the same extent that they apply
14 to the reinstated eligibility of such individual.

15 “(6) An individual to whom benefits are payable
16 under this title pursuant to a reinstatement of eligibility
17 under this subsection for twenty-four months (whether or
18 not consecutive) shall, with respect to benefits so payable
19 after such twenty-fourth month, be deemed for purposes
20 of paragraph (1)(B)(i)(I) to be eligible for such benefits
21 on the basis of an application filed therefore.

22 “(7)(A) An individual described in paragraph (1)(B)
23 who files a request for reinstatement in accordance with
24 the provisions of paragraph (2)(A) shall be eligible for pro-
25 visional benefits payable in accordance with this para-

1 graph, unless the Commissioner determines that the indi-
2 vidual does not meet the requirements of paragraph
3 (1)(B)(i) or that the individual's declaration under para-
4 graph (2)(A)(ii) is false. Any such determination by the
5 Commissioner shall be final and not subject to review
6 under paragraph (1) or (3) of subsection (c).

7 “(B)(i) Except as otherwise provided in clause (ii),
8 the amount of a provisional benefit for a month shall equal
9 the amount of the monthly benefit that would be payable
10 to an eligible individual under this title with the same kind
11 and amount of income.

12 “(ii) If the individual has a spouse who was pre-
13 viously an eligible spouse of the individual under this title
14 and the Commissioner determines that such spouse satis-
15 fies all the requirements of section 1614(b) except require-
16 ments related to the filing of an application, the amount
17 of a provisional benefit for a month shall equal the amount
18 of the month benefit that would be payable to an eligible
19 individual and eligible spouse under this title with the
20 same kind and amount of income.

21 “(C)(i) Provisional benefits shall begin with the
22 month following the month in which a request for rein-
23 statement is filed in accordance with paragraph (2)(A).

24 “(ii) Provisional benefits shall end with the earliest
25 of—

1 “(I) the month in which the Commissioner
2 makes a determination regarding the individual’s eli-
3 gibility for reinstated benefits;

4 “(II) the fifth month following the month for
5 which provisional benefits are first payable under
6 clause (i); or

7 “(III) the month in which the Commissioner de-
8 termines that the individual does not meet the re-
9 quirements of paragraph (1)(B)(i) or that the indi-
10 vidual’s declaration made in accordance with para-
11 graph (2)(A)(ii) is false.

12 “(D) In any case in which the Commissioner deter-
13 mines that an individual is not eligible for reinstated bene-
14 fits, any provisional benefits paid to the individual under
15 this paragraph shall not be subject to recovery as an over-
16 payment unless the Commissioner determines that the in-
17 dividual knew or should have known that the individual
18 did not meet the requirements of paragraph (1)(B).

19 “(8) For purposes of this subsection other than para-
20 graph (7), the term ‘benefits under this title’ includes
21 State supplementary payments made pursuant to an
22 agreement under section 1616(a) or section 212(b) of
23 Public Law 93–66.”.

24 (2) CONFORMING AMENDMENTS.—

1 (A) Section 1631(j)(1) of such Act (42
2 U.S.C. 1383(j)(1)) is amended by striking the
3 period and inserting “, or has filed a request
4 for reinstatement of eligibility under subsection
5 (p)(2) and been determined to be eligible for re-
6 instatement.”.

7 (B) Section 1631(j)(2)(A)(i)(I) of such Act
8 (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by
9 inserting “(other than pursuant to a request for
10 reinstatement under subsection (p))” after “eli-
11 gible”.

12 (c) EFFECTIVE DATE.—

13 (1) IN GENERAL.—The amendments made by
14 this section shall take effect on the first day of the
15 thirteenth month beginning after the date of enact-
16 ment of this Act.

17 (2) LIMITATION.—No benefit shall be payable
18 under title II or XVI of the Social Security Act on
19 the basis of a request for reinstatement filed under
20 section 223(i) or 1631(p) of such Act before the ef-
21 fective date described in paragraph (1).

1 **Subtitle C—Work Incentives**
2 **Planning, Assistance, and Outreach**

3 **SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.**

4 Part A of title XI of the Social Security Act (42
5 U.S.C. 1301 et seq.), as amended by section 201, is
6 amended by adding after section 1148 the following:

7 “WORK INCENTIVES OUTREACH PROGRAM

8 “SEC. 1149. (a) ESTABLISHMENT.—

9 “(1) IN GENERAL.—The Commissioner, in con-
10 sultation with the Work Incentives Advisory Panel
11 established under section 201(f) of the Work Incen-
12 tives Improvement Act of 1999, shall establish a
13 community-based work incentives planning and as-
14 sistance program for the purpose of disseminating
15 accurate information to disabled beneficiaries on
16 work incentives programs and issues related to such
17 programs.

18 “(2) GRANTS, COOPERATIVE AGREEMENTS,
19 CONTRACTS, AND OUTREACH.—Under the program
20 established under this section, the Commissioner
21 shall—

22 “(A) establish a competitive program of
23 grants, cooperative agreements, or contracts to
24 provide benefits planning and assistance, in-
25 cluding information on the availability of pro-

1 tection and advocacy services, to disabled bene-
2 ficiaries, including individuals participating in
3 the Ticket to Work and Self-Sufficiency Pro-
4 gram established under section 1148, the pro-
5 gram established under section 1619, and other
6 programs that are designed to encourage dis-
7 abled beneficiaries to work;

8 “(B) conduct directly, or through grants,
9 cooperative agreements, or contracts, ongoing
10 outreach efforts to disabled beneficiaries (and
11 to the families of such beneficiaries) who are
12 potentially eligible to participate in Federal or
13 State work incentive programs that are de-
14 signed to assist disabled beneficiaries to work,
15 including—

16 “(i) preparing and disseminating in-
17 formation explaining such programs; and

18 “(ii) working in cooperation with
19 other Federal, State, and private agencies
20 and nonprofit organizations that serve dis-
21 abled beneficiaries, and with agencies and
22 organizations that focus on vocational re-
23 habilitation and work-related training and
24 counseling;

1 “(C) establish a corps of trained, acces-
2 sible, and responsive work incentives specialists
3 within the Social Security Administration who
4 will specialize in disability work incentives
5 under titles II and XVI for the purpose of dis-
6 seminating accurate information with respect to
7 inquiries and issues relating to work incentives
8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
11 and XVI; and

12 “(iii) individuals or entities awarded
13 grants under subparagraphs (A) or (B);
14 and

15 “(D) provide—

16 “(i) training for work incentives spe-
17 cialists and individuals providing planning
18 assistance described in subparagraph (C);
19 and

20 “(ii) technical assistance to organiza-
21 tions and entities that are designed to en-
22 courage disabled beneficiaries to return to
23 work.

24 “(3) COORDINATION WITH OTHER PRO-
25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), a one-stop de-
15 livery system established under subtitle B of title I
16 of the Workforce Investment Act of 1998, and other
17 services.

18 “(b) CONDITIONS.—

19 “(1) SELECTION OF ENTITIES.—

20 “(A) APPLICATION.—An entity shall sub-
21 mit an application for a grant, cooperative
22 agreement, or contract to provide benefits plan-
23 ning and assistance to the Commissioner at
24 such time, in such manner, and containing such
25 information as the Commissioner may deter-

1 mine is necessary to meet the requirements of
2 this section.

3 “(B) STATEWIDENESS.—The Commis-
4 sioner shall ensure that the planning, assist-
5 ance, and information described in paragraph
6 (2) shall be available on a statewide basis.

7 “(C) ELIGIBILITY OF STATES AND PRI-
8 VATE ORGANIZATIONS.—

9 “(i) IN GENERAL.—The Commissioner
10 may award a grant, cooperative agreement,
11 or contract under this section to a State or
12 a private agency or organization (other
13 than Social Security Administration Field
14 Offices and the State agency administering
15 the State medicaid program under title
16 XIX, including any agency or entity de-
17 scribed in clause (ii), that the Commis-
18 sioner determines is qualified to provide
19 the planning, assistance, and information
20 described in paragraph (2)).

21 “(ii) AGENCIES AND ENTITIES DE-
22 SCRIBED.—The agencies and entities de-
23 scribed in this clause are the following:

24 “(I) Any public or private agency
25 or organization (including Centers for

1 Independent Living established under
2 title VII of the Rehabilitation Act of
3 1973, protection and advocacy organi-
4 zations, client assistance programs es-
5 tablished in accordance with section
6 112 of the Rehabilitation Act of 1973,
7 and State Developmental Disabilities
8 Councils established in accordance
9 with section 124 of the Developmental
10 Disabilities Assistance and Bill of
11 Rights Act (42 U.S.C. 6024)) that the
12 Commissioner determines satisfies the
13 requirements of this section.

14 “(II) The State agency admin-
15 istering the State program funded
16 under part A of title IV.

17 “(D) EXCLUSION FOR CONFLICT OF IN-
18 TEREST.—The Commissioner may not award a
19 grant, cooperative agreement, or contract under
20 this section to any entity that the Commissioner
21 determines would have a conflict of interest if
22 the entity were to receive a grant, cooperative
23 agreement, or contract under this section.

24 “(2) SERVICES PROVIDED.—A recipient of a
25 grant, cooperative agreement, or contract to provide

1 benefits planning and assistance shall select individ-
2 uals who will act as planners and provide informa-
3 tion, guidance, and planning to disabled beneficiaries
4 on the—

5 “(A) availability and interrelation of any
6 Federal or State work incentives programs de-
7 signed to assist disabled beneficiaries that the
8 individual may be eligible to participate in;

9 “(B) adequacy of any health benefits cov-
10 erage that may be offered by an employer of
11 the individual and the extent to which other
12 health benefits coverage may be available to the
13 individual; and

14 “(C) availability of protection and advo-
15 cacy services for disabled beneficiaries and how
16 to access such services.

17 “(3) AMOUNT OF GRANTS, COOPERATIVE
18 AGREEMENTS, OR CONTRACTS.—

19 “(A) BASED ON POPULATION OF DIS-
20 ABLED BENEFICIARIES.—Subject to subpara-
21 graph (B), the Commissioner shall award a
22 grant, cooperative agreement, or contract under
23 this section to an entity based on the percent-
24 age of the population of the State where the en-
25 tity is located who are disabled beneficiaries.

1 “(B) LIMITATIONS.—

2 “(i) PER GRANT.—No entity shall re-
3 ceive a grant, cooperative agreement, or
4 contract under this section for a fiscal year
5 that is less than \$50,000 or more than
6 \$300,000.

7 “(ii) TOTAL AMOUNT FOR ALL
8 GRANTS, COOPERATIVE AGREEMENTS, AND
9 CONTRACTS.—The total amount of all
10 grants, cooperative agreements, and con-
11 tracts awarded under this section for a fis-
12 cal year may not exceed \$23,000,000.

13 “(4) ALLOCATION OF COSTS.—The costs of car-
14 rying out this section shall be paid from amounts
15 made available for the administration of title II and
16 amounts made available for the administration of
17 title XVI, and shall be allocated among those
18 amounts as appropriate.

19 “(c) DEFINITIONS.—In this section:

20 “(1) COMMISSIONER.—The term ‘Commis-
21 sioner’ means the Commissioner of Social Security.

22 “(2) DISABLED BENEFICIARY.—The term ‘dis-
23 abled beneficiary’ has the meaning given that term
24 in section 1148(k)(2).”.

1 **SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSIST-**
2 **ANCE TO DISABLED BENEFICIARIES.**

3 Part A of title XI of the Social Security Act (42
4 U.S.C. 1301 et seq.), as amended by section 221, is
5 amended by adding after section 1149 the following:

6 “STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO
7 DISABLED BENEFICIARIES

8 “SEC. 1150. (a) IN GENERAL.—Subject to subsection
9 (c), the Commissioner may make payments in each State
10 to the protection and advocacy system established pursu-
11 ant to part C of title I of the Developmental Disabilities
12 Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.)
13 for the purpose of providing services to disabled bene-
14 ficiaries.

15 “(b) SERVICES PROVIDED.—Services provided to dis-
16 abled beneficiaries pursuant to a payment made under this
17 section may include—

18 “(1) information and advice about obtaining vo-
19 cational rehabilitation and employment services; and

20 “(2) advocacy or other services that a disabled
21 beneficiary may need to secure or regain gainful em-
22 ployment.

23 “(c) APPLICATION.—In order to receive payments
24 under this section, a protection and advocacy system shall
25 submit an application to the Commissioner, at such time,

1 in such form and manner, and accompanied by such infor-
2 mation and assurances as the Commissioner may require.

3 “(d) AMOUNT OF PAYMENTS.—

4 “(1) IN GENERAL.—Subject to the amount ap-
5 propriated for a fiscal year for making payments
6 under this section, a protection and advocacy system
7 shall not be paid an amount that is less than—

8 “(A) in the case of a protection and advo-
9 cacy system located in a State (including the
10 District of Columbia and Puerto Rico) other
11 than Guam, American Samoa, the United
12 States Virgin Islands, and the Commonwealth
13 of the Northern Mariana Islands, the greater
14 of—

15 “(i) \$100,000; or

16 “(ii) $\frac{1}{3}$ of 1 percent of the amount
17 available for payments under this section;
18 and

19 “(B) in the case of a protection and advo-
20 cacy system located in Guam, American Samoa,
21 the United States Virgin Islands, and the Com-
22 monwealth of the Northern Mariana Islands,
23 \$50,000.

24 “(2) INFLATION ADJUSTMENT.—For each fiscal
25 year in which the total amount appropriated to carry

1 out this section exceeds the total amount appro-
2 priated to carry out this section in the preceding fis-
3 cal year, the Commissioner shall increase each min-
4 imum payment under subparagraphs (A) and (B) of
5 paragraph (1) by a percentage equal to the percent-
6 age increase in the total amount appropriated to
7 carry out this section between the preceding fiscal
8 year and the fiscal year involved.

9 “(e) ANNUAL REPORT.—Each protection and advo-
10 cacy system that receives a payment under this section
11 shall submit an annual report to the Commissioner and
12 the Work Incentives Advisory Panel established under sec-
13 tion 201(f) of the Work Incentives Improvement Act of
14 1999 on the services provided to individuals by the system.

15 “(f) FUNDING.—

16 “(1) ALLOCATION OF PAYMENTS.—

17 “(A) IN GENERAL.—Subject to subpara-
18 graph (B), payments under this section shall be
19 made from amounts made available for the ad-
20 ministration of title II and amounts made avail-
21 able for the administration of title XVI, and
22 shall be allocated among those amounts as ap-
23 propriate.

24 “(B) LIMITATION.—Payments under this
25 section shall not exceed \$7,000,000 for fiscal

1 year 2000, and such sums as may be necessary
2 for any fiscal year thereafter.

3 “(2) CARRYOVER.—Any amounts allotted for
4 payment to a protection and advocacy system under
5 this section for a fiscal year shall remain available
6 for payment to or on behalf of the protection and
7 advocacy system until the end of the succeeding fis-
8 cal year.

9 “(g) DEFINITIONS.—In this section:

10 “(1) COMMISSIONER.—The term ‘Commis-
11 sioner’ means the Commissioner of Social Security.

12 “(2) DISABLED BENEFICIARY.—The term ‘dis-
13 abled beneficiary’ has the meaning given that term
14 in section 1148(k)(2).

15 “(3) PROTECTION AND ADVOCACY SYSTEM.—
16 The term ‘protection and advocacy system’ means a
17 protection and advocacy system established pursuant
18 to part C of title I of the Developmental Disabilities
19 Assistance and Bill of Rights Act (42 U.S.C. 6041
20 et seq.).”.

1 **TITLE III—DEMONSTRATION**
2 **PROJECTS AND STUDIES**

3 **SEC. 301. PERMANENT EXTENSION OF DISABILITY INSUR-**
4 **ANCE PROGRAM DEMONSTRATION PROJECT**
5 **AUTHORITY.**

6 (a) PERMANENT EXTENSION OF AUTHORITY.—Title
7 II of the Social Security Act (42 U.S.C. 401 et seq.) is
8 amended by adding at the end the following:

9 “DEMONSTRATION PROJECT AUTHORITY

10 “SEC. 234. (a) AUTHORITY.—

11 “(1) IN GENERAL.—The Commissioner of So-
12 cial Security (in this section referred to as the ‘Com-
13 missioner’) shall develop and carry out experiments
14 and demonstration projects designed to determine
15 the relative advantages and disadvantages of—

16 “(A) various alternative methods of treat-
17 ing the work activity of individuals entitled to
18 disability insurance benefits under section 223
19 or to monthly insurance benefits under section
20 202 based on such individual’s disability (as de-
21 fined in section 223(d)), including such meth-
22 ods as a reduction in benefits based on earn-
23 ings, designed to encourage the return to work
24 of such individuals;

1 “(B) altering other limitations and condi-
2 tions applicable to such individuals (including
3 lengthening the trial work period (as defined in
4 section 222(c)), altering the 24-month waiting
5 period for hospital insurance benefits under sec-
6 tion 226, altering the manner in which the pro-
7 gram under this title is administered, earlier re-
8 ferral of such individuals for rehabilitation, and
9 greater use of employers and others to develop,
10 perform, and otherwise stimulate new forms of
11 rehabilitation); and

12 “(C) implementing sliding scale benefit off-
13 sets using variations in—

14 “(i) the amount of the offset as a pro-
15 portion of earned income;

16 “(ii) the duration of the offset period;
17 and

18 “(iii) the method of determining the
19 amount of income earned by such individ-
20 uals,

21 to the end that savings will accrue to the Trust
22 Funds, or to otherwise promote the objectives or fa-
23 cilitate the administration of this title.

24 “(2) AUTHORITY FOR EXPANSION OF SCOPE.—

25 The Commissioner may expand the scope of any

1 such experiment or demonstration project to include
2 any group of applicants for benefits under the pro-
3 gram established under this title with impairments
4 that reasonably may be presumed to be disabling for
5 purposes of such demonstration project, and may
6 limit any such demonstration project to any such
7 group of applicants, subject to the terms of such
8 demonstration project which shall define the extent
9 of any such presumption.

10 “(b) REQUIREMENTS.—The experiments and dem-
11 onstration projects developed under subsection (a) shall be
12 of sufficient scope and shall be carried out on a wide
13 enough scale to permit a thorough evaluation of the alter-
14 native methods under consideration while giving assurance
15 that the results derived from the experiments and projects
16 will obtain generally in the operation of the disability in-
17 surance program under this title without committing such
18 program to the adoption of any particular system either
19 locally or nationally.

20 “(c) AUTHORITY TO WAIVE COMPLIANCE WITH
21 BENEFITS REQUIREMENTS.—In the case of any experi-
22 ment or demonstration project conducted under subsection
23 (a), the Commissioner may waive compliance with the ben-
24 efit requirements of this title, and the Secretary may
25 (upon the request of the Commissioner) waive compliance

1 with the benefits requirements of title XVIII, insofar as
2 is necessary for a thorough evaluation of the alternative
3 methods under consideration. No such experiment or
4 project shall be actually placed in operation unless at least
5 90 days prior thereto a written report, prepared for pur-
6 poses of notification and information only and containing
7 a full and complete description thereof, has been trans-
8 mitted by the Commissioner to the Committee on Ways
9 and Means of the House of Representatives and to the
10 Committee on Finance of the Senate. Periodic reports on
11 the progress of such experiments and demonstration
12 projects shall be submitted by the Commissioner to such
13 committees. When appropriate, such reports shall include
14 detailed recommendations for changes in administration
15 or law, or both, to carry out the objectives stated in sub-
16 section (a).

17 “(d) REPORTS.—

18 “(1) INTERIM REPORTS.—On or before June 9
19 of each year, the Commissioner shall submit to the
20 Committee on Ways and Means of the House of
21 Representatives and to the Committee on Finance of
22 the Senate an interim report on the progress of the
23 experiments and demonstration projects carried out
24 under this subsection together with any related data

1 and materials that the Commissioner may consider
2 appropriate.

3 “(2) FINAL REPORTS.—Not later than 90 days
4 after the termination of any experiment or dem-
5 onstration project carried out under this section, the
6 Commissioner shall submit to the Committee on
7 Ways and Means of the House of Representatives
8 and to the Committee on Finance of the Senate a
9 final report with respect to that experiment and
10 demonstration project.”.

11 (b) CONFORMING AMENDMENTS; TRANSFER OF
12 PRIOR AUTHORITY.—

13 (1) CONFORMING AMENDMENTS.—

14 (A) REPEAL OF PRIOR AUTHORITY.—Para-
15 graphs (1) through (4) of subsection (a) and
16 subsection (c) of section 505 of the Social Secu-
17 rity Disability Amendments of 1980 (42 U.S.C.
18 1310 note) are repealed.

19 (B) CONFORMING AMENDMENT REGARD-
20 ING FUNDING.—Section 201(k) of the Social
21 Security Act (42 U.S.C. 401(k)) is amended by
22 striking “section 505(a) of the Social Security
23 Disability Amendments of 1980” and inserting
24 “section 234”.

1 (2) TRANSFER OF PRIOR AUTHORITY.—With
2 respect to any experiment or demonstration project
3 being conducted under section 505(a) of the Social
4 Security Disability Amendments of 1980 (42 U.S.C.
5 1310 note) as of the date of enactment of this Act,
6 the authority to conduct such experiment or dem-
7 onstration project (including the terms and condi-
8 tions applicable to the experiment or demonstration
9 project) shall be treated as if that authority (and
10 such terms and conditions) had been established
11 under section 234 of the Social Security Act, as
12 added by subsection (a).

13 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
14 **DUCTIONS IN DISABILITY INSURANCE BENE-**
15 **FITS BASED ON EARNINGS.**

16 (a) AUTHORITY.—The Commissioner of Social Secu-
17 rity shall conduct demonstration projects for the purpose
18 of evaluating, through the collection of data, a program
19 for title II disability beneficiaries (as defined in section
20 1148(k)(3) of the Social Security Act) under which each
21 \$1 of benefits payable under section 223, or under section
22 202 based on the beneficiary's disability, is reduced for
23 each \$2 of such beneficiary's earnings that is above a level
24 to be determined by the Commissioner. Such projects shall
25 be conducted at a number of localities which the Commis-

1 sioner shall determine is sufficient to adequately evaluate
2 the appropriateness of national implementation of such a
3 program. Such projects shall identify reductions in Fed-
4 eral expenditures that may result from the permanent im-
5 plementation of such a program.

6 (b) SCOPE AND SCALE AND MATTERS TO BE DETER-
7 MINED.—

8 (1) IN GENERAL.—The demonstration projects
9 developed under subsection (a) shall be of sufficient
10 duration, shall be of sufficient scope, and shall be
11 carried out on a wide enough scale to permit a thor-
12 ough evaluation of the project to determine—

13 (A) the effects, if any, of induced entry
14 into the project and reduced exit from the
15 project;

16 (B) the extent, if any, to which the project
17 being tested is affected by whether it is in oper-
18 ation in a locality within an area under the ad-
19 ministration of the Ticket to Work and Self-
20 Sufficiency Program established under section
21 1148 of the Social Security Act; and

22 (C) the savings that accrue to the Federal
23 Old-Age and Survivors Insurance Trust Fund,
24 the Federal Disability Insurance Trust Fund,

1 and other Federal programs under the project
2 being tested.

3 The Commissioner shall take into account advice
4 provided by the Work Incentives Advisory Panel pur-
5 suant to section 201(f)(2)(B)(ii).

6 (2) ADDITIONAL MATTERS.—The Commissioner
7 shall also determine with respect to each project—

8 (A) the annual cost (including net cost) of
9 the project and the annual cost (including net
10 cost) that would have been incurred in the ab-
11 sence of the project;

12 (B) the determinants of return to work, in-
13 cluding the characteristics of the beneficiaries
14 who participate in the project; and

15 (C) the employment outcomes, including
16 wages, occupations, benefits, and hours worked,
17 of beneficiaries who return to work as a result
18 of participation in the project.

19 The Commissioner may include within the matters
20 evaluated under the project the merits of trial work
21 periods and periods of extended eligibility.

22 (c) WAIVERS.—The Commissioner may waive compli-
23 ance with the benefit provisions of title II of the Social
24 Security Act, and the Secretary of Health and Human
25 Services may waive compliance with the benefit require-

1 ments of title XVIII of that Act, insofar as is necessary
2 for a thorough evaluation of the alternative methods under
3 consideration. No such project shall be actually placed in
4 operation unless at least 90 days prior thereto a written
5 report, prepared for purposes of notification and informa-
6 tion only and containing a full and complete description
7 thereof, has been transmitted by the Commissioner to the
8 Committee on Ways and Means of the House of Rep-
9 resentatives and to the Committee on Finance of the Sen-
10 ate. Periodic reports on the progress of such projects shall
11 be submitted by the Commissioner to such committees.
12 When appropriate, such reports shall include detailed rec-
13 ommendations for changes in administration or law, or
14 both, to carry out the objectives stated in subsection (a).

15 (d) INTERIM REPORTS.—Not later than 2 years after
16 the date of enactment of this Act, and annually thereafter,
17 the Commissioner of Social Security shall submit to Con-
18 gress an interim report on the progress of the demonstra-
19 tion projects carried out under this subsection together
20 with any related data and materials that the Commis-
21 sioner of Social Security may consider appropriate.

22 (e) FINAL REPORT.—The Commissioner of Social Se-
23 curity shall submit to Congress a final report with respect
24 to all demonstration projects carried out under this section
25 not later than 1 year after their completion.

1 (f) EXPENDITURES.—Expenditures made for dem-
2 onstration projects under this section shall be made from
3 the Federal Disability Insurance Trust Fund and the Fed-
4 eral Old-Age and Survivors Insurance Trust Fund, as de-
5 termined appropriate by the Commissioner of Social Secu-
6 rity, and from the Federal Hospital Insurance Trust Fund
7 and the Federal Supplementary Medical Insurance Trust
8 Fund, as determined appropriate by the Secretary of
9 Health and Human Services, to the extent provided in ad-
10 vance in appropriation Acts.

11 **SEC. 303. STUDIES AND REPORTS.**

12 (a) STUDY BY GENERAL ACCOUNTING OFFICE OF
13 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
14 TIVES.—

15 (1) STUDY.—As soon as practicable after the
16 date of enactment of this Act, the Comptroller Gen-
17 eral of the United States shall undertake a study to
18 assess existing tax credits and other disability-re-
19 lated employment incentives under the Americans
20 with Disabilities Act of 1990 and other Federal
21 laws. In such study, the Comptroller General shall
22 specifically address the extent to which such credits
23 and other incentives would encourage employers to
24 hire and retain individuals with disabilities.

1 (2) REPORT.—Not later than 3 years after the
2 date of enactment of this Act, the Comptroller Gen-
3 eral shall transmit to the Committee on Ways and
4 Means of the House of Representatives and the
5 Committee on Finance of the Senate a written re-
6 port presenting the results of the Comptroller Gen-
7 eral’s study conducted pursuant to this subsection,
8 together with such recommendations for legislative
9 or administrative changes as the Comptroller Gen-
10 eral determines are appropriate.

11 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
12 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
13 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
14 ING CONCURRENT ENTITLEMENT.—

15 (1) STUDY.—As soon as practicable after the
16 date of enactment of this Act, the Comptroller Gen-
17 eral of the United States shall undertake a study to
18 evaluate the coordination under current law of the
19 disability insurance program under title II of the So-
20 cial Security Act and the supplemental security in-
21 come program under title XVI of that Act, as such
22 programs relate to individuals entering or leaving
23 concurrent entitlement under such programs. In
24 such study, the Comptroller General shall specifically
25 address the effectiveness of work incentives under

1 such programs with respect to such individuals and
2 the effectiveness of coverage of such individuals
3 under titles XVIII and XIX of the Social Security
4 Act.

5 (2) REPORT.—Not later than 3 years after the
6 date of enactment of this Act, the Comptroller Gen-
7 eral shall transmit to the Committee on Ways and
8 Means of the House of Representatives and the
9 Committee on Finance of the Senate a written re-
10 port presenting the results of the Comptroller Gen-
11 eral’s study conducted pursuant to this subsection,
12 together with such recommendations for legislative
13 or administrative changes as the Comptroller Gen-
14 eral determines are appropriate.

15 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
16 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
17 LIMIT ON RETURN TO WORK.—

18 (1) STUDY.—As soon as practicable after the
19 date of enactment of this Act, the Comptroller Gen-
20 eral of the United States shall undertake a study of
21 the substantial gainful activity level applicable as of
22 that date to recipients of benefits under section 223
23 of the Social Security Act (42 U.S.C. 423) and
24 under section 202 of that Act (42 U.S.C. 402) on
25 the basis of a recipient having a disability, and the

1 effect of such level as a disincentive for those recipi-
2 ents to return to work. In the study, the Comptroller
3 General also shall address the merits of increasing
4 the substantial gainful activity level applicable to
5 such recipients of benefits and the rationale for not
6 yearly indexing that level to inflation.

7 (2) REPORT.—Not later than 2 years after the
8 date of enactment of this Act, the Comptroller Gen-
9 eral shall transmit to the Committee on Ways and
10 Means of the House of Representatives and the
11 Committee on Finance of the Senate a written re-
12 port presenting the results of the Comptroller Gen-
13 eral’s study conducted pursuant to this subsection,
14 together with such recommendations for legislative
15 or administrative changes as the Comptroller Gen-
16 eral determines are appropriate.

17 (d) REPORT ON DISREGARDS UNDER THE DI AND
18 SSI PROGRAMS.—Not later than 90 days after the date
19 of enactment of this Act, the Commissioner of Social Secu-
20 rity shall submit to the Committee on Ways and Means
21 of the House of Representatives and the Committee on
22 Finance of the Senate a report that—

23 (1) identifies all income, assets, and resource
24 disregards (imposed under statutory or regulatory
25 authority) that are applicable to individuals receiving

1 benefits under title II or XVI of the Social Security
2 Act (42 U.S.C. 401 et seq., 1381 et seq.);

3 (2) with respect to each such disregard—

4 (A) specifies the most recent statutory or
5 regulatory modification of the disregard; and

6 (B) recommends whether further statutory
7 or regulatory modification of the disregard
8 would be appropriate; and

9 (3) with respect to the disregard described in
10 section 1612(b)(7) of the Social Security Act (42
11 U.S.C. 1382a(b)(7)) (relating to grants, scholar-
12 ships, or fellowships received for use in paying the
13 cost of tuition and fees at any educational (including
14 technical or vocational education) institution)—

15 (A) identifies the number of individuals re-
16 ceiving benefits under title XVI of such Act (42
17 U.S.C. 1381 et seq.) who have attained age 22
18 and have not had any portion of any grant,
19 scholarship, or fellowship received for use in
20 paying the cost of tuition and fees at any edu-
21 cational (including technical or vocational edu-
22 cation) institution excluded from their income
23 in accordance with that section;

24 (B) recommends whether the age at which
25 such grants, scholarships, or fellowships are ex-

1 cluded from income for purposes of determining
2 eligibility under title XVI of the Social Security
3 Act should be increased to age 25; and

4 (C) recommends whether such disregard
5 should be expanded to include any such grant,
6 scholarship, or fellowship received for use in
7 paying the cost of room and board at any such
8 institution.

9 **TITLE IV—TECHNICAL** 10 **AMENDMENTS**

11 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG** 12 **ADDICTS AND ALCOHOLICS.**

13 (a) CLARIFICATION RELATING TO THE EFFECTIVE
14 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
15 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
16 tion 105(a)(5) of the Contract with America Advancement
17 Act of 1996 (Public Law 104–121; 110 Stat. 853) is
18 amended—

19 (1) in subparagraph (A), by striking “by the
20 Commissioner of Social Security” and “by the Com-
21 missioner”; and

22 (2) by adding at the end the following:

23 “(D) For purposes of this paragraph, an
24 individual’s claim, with respect to benefits
25 under title II of the Social Security Act based

1 on disability, which has been denied in whole
2 before the date of enactment of this Act, may
3 not be considered to be finally adjudicated be-
4 fore such date if, on or after such date—

5 “(i) there is pending a request for ei-
6 ther administrative or judicial review with
7 respect to such claim, or

8 “(ii) there is pending, with respect to
9 such claim, a readjudication by the Com-
10 missioner of Social Security pursuant to
11 relief in a class action or implementation
12 by the Commissioner of a court remand
13 order.

14 “(E) Notwithstanding the provisions of
15 this paragraph, with respect to any individual
16 for whom the Commissioner of Social Security
17 does not perform the entitlement redetermina-
18 tion before the date prescribed in subparagraph
19 (C), the Commissioner shall perform such enti-
20 tlement redetermination in lieu of a continuing
21 disability review whenever the Commissioner de-
22 termines that the individual’s entitlement is
23 subject to redetermination based on the pre-
24 ceding provisions of this paragraph, and the
25 provisions of section 223(f) of the Social Secu-

1 rity Act shall not apply to such redetermina-
2 tion.”.

3 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
4 SIONS CONCERNING REPRESENTATIVE PAYEES AND
5 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
6 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
7 Section 105(a)(5)(B) of the Contract with America Ad-
8 vancement Act of 1996 (42 U.S.C. 405 note) is amended
9 to read as follows:

10 “(B) The amendments made by para-
11 graphs (2) and (3) shall take effect on July 1,
12 1996, with respect to any individual—

13 “(i) whose claim for benefits is finally
14 adjudicated on or after the date of enact-
15 ment of this Act; or

16 “(ii) whose entitlement to benefits is
17 based on an entitlement redetermination
18 made pursuant to subparagraph (C).”.

19 (c) EFFECTIVE DATES.—The amendments made by
20 this section shall take effect as if included in the enact-
21 ment of section 105 of the Contract with America Ad-
22 vancement Act of 1996 (Public Law 104–121; 110 Stat.
23 852 et seq.).

1 **SEC. 402. TREATMENT OF PRISONERS.**

2 (a) IMPLEMENTATION OF PROHIBITION AGAINST
3 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

4 (1) IN GENERAL.—Section 202(x)(3) of the So-
5 cial Security Act (42 U.S.C. 402(x)(3)) is
6 amended—

7 (A) by inserting “(A)” after “(3)”; and

8 (B) by adding at the end the following:

9 “(B)(i) The Commissioner shall enter into an agree-
10 ment under this subparagraph with any interested State
11 or local institution comprising a jail, prison, penal institu-
12 tion, or correctional facility, or comprising any other insti-
13 tution a purpose of which is to confine individuals as de-
14 scribed in paragraph (1)(A)(ii). Under such agreement—

15 “(I) the institution shall provide to the Com-
16 missioner, on a monthly basis and in a manner spec-
17 ified by the Commissioner, the names, Social Secu-
18 rity account numbers, dates of birth, confinement
19 commencement dates, and, to the extent available to
20 the institution, such other identifying information
21 concerning the individuals confined in the institution
22 as the Commissioner may require for the purpose of
23 carrying out paragraph (1); and

24 “(II) the Commissioner shall pay to the institu-
25 tion, with respect to information described in sub-
26 clause (I) concerning each individual who is confined

1 therein as described in paragraph (1)(A), who re-
2 ceives a benefit under this title for the month pre-
3 ceding the first month of such confinement, and
4 whose benefit under this title is determined by the
5 Commissioner to be not payable by reason of con-
6 finement based on the information provided by the
7 institution, \$400 (subject to reduction under clause
8 (ii)) if the institution furnishes the information to
9 the Commissioner within 30 days after the date such
10 individual's confinement in such institution begins,
11 or \$200 (subject to reduction under clause (ii)) if
12 the institution furnishes the information after 30
13 days after such date but within 90 days after such
14 date.

15 “(ii) The dollar amounts specified in clause (i)(II)
16 shall be reduced by 50 percent if the Commissioner is also
17 required to make a payment to the institution with respect
18 to the same individual under an agreement entered into
19 under section 1611(e)(1)(I).

20 “(iii) There is authorized to be transferred from the
21 Federal Old-Age and Survivors Insurance Trust Fund and
22 the Federal Disability Insurance Trust Fund, as appro-
23 priate, such sums as may be necessary to enable the Com-
24 missioner to make payments to institutions required by
25 clause (i)(II).

1 “(iv) The Commissioner is authorized to provide, on
2 a reimbursable basis, information obtained pursuant to
3 agreements entered into under clause (i) to any agency
4 administering a Federal or federally assisted cash, food,
5 or medical assistance program for eligibility purposes.”.

6 (2) CONFORMING AMENDMENT TO THE PRI-
7 VACY ACT.—Section 552a(a)(8)(B) of title 5, United
8 States Code, is amended—

9 (A) in clause (vi), by striking “or” at the
10 end;

11 (B) in clause (vii), by adding “or” at the
12 end; and

13 (C) by adding at the end the following:

14 “(viii) matches performed pursuant to
15 section 202(x)(3)(B) or 1611(e)(1)(I) of
16 the Social Security Act (42 U.S.C.
17 402(x)(3)(B), 1382(e)(1)(I));”.

18 (3) EFFECTIVE DATE.—The amendments made
19 by this subsection shall apply to individuals whose
20 period of confinement in an institution commences
21 on or after the first day of the fourth month begin-
22 ning after the month in which this Act is enacted.

23 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
24 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
25 PRISONMENT FOR MORE THAN 1 YEAR.—

1 (1) IN GENERAL.—Section 202(x)(1)(A) of the
2 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
3 amended—

4 (A) in the matter preceding clause (i), by
5 striking “during” and inserting “throughout”;

6 (B) in clause (i), by striking “an offense
7 punishable by imprisonment for more than 1
8 year (regardless of the actual sentence im-
9 posed)” and inserting “a criminal offense”; and

10 (C) in clause (ii)(I), by striking “an of-
11 fense punishable by imprisonment for more
12 than 1 year” and inserting “a criminal of-
13 fense”.

14 (2) EFFECTIVE DATE.—The amendments made
15 by this subsection shall apply to individuals whose
16 period of confinement in an institution commences
17 on or after the first day of the fourth month begin-
18 ning after the month in which this Act is enacted.

19 (c) CONFORMING TITLE XVI AMENDMENTS.—

20 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
21 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
22 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
23 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

1 (A) in clause (i)(II), by inserting “(subject
2 to reduction under clause (ii))” after “\$400”
3 and after “\$200”;

4 (B) by redesignating clauses (ii) and (iii)
5 as clauses (iii) and (iv), respectively; and

6 (C) by inserting after clause (i) the fol-
7 lowing:

8 “(ii) The dollar amounts specified in clause (i)(II)
9 shall be reduced by 50 percent if the Commissioner is also
10 required to make a payment to the institution with respect
11 to the same individual under an agreement entered into
12 under section 202(x)(3)(B).”.

13 (2) EXPANSION OF CATEGORIES OF INSTITU-
14 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
15 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
16 the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i))
17 is amended in the matter preceding subclause (I) by
18 striking “institution” and all that follows through
19 “section 202(x)(1)(A),” and inserting “institution
20 comprising a jail, prison, penal institution, or correc-
21 tional facility, or with any other interested State or
22 local institution a purpose of which is to confine in-
23 dividuals as described in section 202(x)(1)(A)(ii),”.

24 (3) ELIMINATION OF OVERLY BROAD EXEMP-
25 TION.—Section 1611(e)(1)(I)(iii) of such Act (42

1 U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by para-
2 graph (1)(B), is amended by striking “(I) The provi-
3 sions” and all that follows through “(II)”.

4 (4) EFFECTIVE DATE.—The amendments made
5 by this subsection shall take effect as if included in
6 the enactment of section 203(a) of the Personal Re-
7 sponsibility and Work Opportunity Reconciliation
8 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
9 The reference to section 202(x)(1)(A)(ii) of the So-
10 cial Security Act in section 1611(e)(1)(I)(i) of the
11 Social Security Act as amended by paragraph (2)
12 shall be deemed a reference to such section
13 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

14 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
15 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
16 TIONS UPON COMPLETION OF PRISON TERM.—

17 (1) IN GENERAL.—Section 202(x)(1)(A) of the
18 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
19 amended—

20 (A) in clause (i), by striking “or” at the
21 end;

22 (B) in clause (ii)(IV), by striking the pe-
23 riod and inserting “, or”; and

24 (C) by adding at the end the following:

1 “(iii) immediately upon completion of confine-
2 ment as described in clause (i) pursuant to convic-
3 tion of a criminal offense an element of which is sex-
4 ual activity, is confined by court order in an institu-
5 tion at public expense pursuant to a finding that the
6 individual is a sexually dangerous person or a sexual
7 predator or a similar finding.”.

8 (2) CONFORMING AMENDMENT.—Section
9 202(x)(1)(B)(ii) of the Social Security Act (42
10 U.S.C. 402(x)(1)(B)(ii)) is amended by striking
11 “clause (ii)” and inserting “clauses (ii) and (iii)”.

12 (3) EFFECTIVE DATE.—The amendments made
13 by this subsection shall apply with respect to bene-
14 fits for months ending after the date of enactment
15 of this Act.

16 **SEC 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
17 **EXEMPTION FROM SOCIAL SECURITY COV-**
18 **ERAGE.**

19 (a) IN GENERAL.—Notwithstanding section
20 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
21 emption which has been received under section 1402(e)(1)
22 of such Code by a duly ordained, commissioned, or li-
23 censed minister of a church, a member of a religious order,
24 or a Christian Science practitioner, and which is effective
25 for the taxable year in which this Act is enacted, may be

1 revoked by filing an application therefore (in such form
2 and manner, and with such official, as may be prescribed
3 by the Commissioner of the Internal Revenue Service), if
4 such application is filed no later than the due date of the
5 Federal income tax return (including any extension there-
6 of) for the applicant's second taxable year beginning after
7 December 31, 1999. Any such revocation shall be effective
8 (for purposes of chapter 2 of the Internal Revenue Code
9 of 1986 and title II of the Social Security Act), as speci-
10 fied in the application, either with respect to the appli-
11 cant's first taxable year beginning after December 31,
12 1999, or with respect to the applicant's second taxable
13 year beginning after such date, and for all succeeding tax-
14 able years; and the applicant for any such revocation may
15 not thereafter again file application for an exemption
16 under such section 1402(e)(1). If the application is filed
17 after the due date of the applicant's Federal income tax
18 return for a taxable year and is effective with respect to
19 that taxable year, it shall include or be accompanied by
20 payment in full of an amount equal to the total of the
21 taxes that would have been imposed by section 1401 of
22 the Internal Revenue Code of 1986 with respect to all of
23 the applicant's income derived in that taxable year which
24 would have constituted net earnings from self-employment
25 for purposes of chapter 2 of such Code (notwithstanding

1 paragraph (4) or (5) of section 1402(c) of such Code) ex-
2 cept for the exemption under section 1402(e)(1) of such
3 Code.

4 (b) EFFECTIVE DATE.—Subsection (a) shall apply
5 with respect to service performed (to the extent specified
6 in such subsection) in taxable years beginning after De-
7 cember 31, 1999, and with respect to monthly insurance
8 benefits payable under title II of the Social Security Act
9 on the basis of the wages and self-employment income of
10 any individual for months in or after the calendar year
11 in which such individual’s application for revocation (as
12 described in such subsection) is effective (and lump-sum
13 death payments payable under such title on the basis of
14 such wages and self-employment income in the case of
15 deaths occurring in or after such calendar year).

16 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
17 **TO COOPERATIVE RESEARCH OR DEM-**
18 **ONSTRATION PROJECTS UNDER TITLES II**
19 **AND XVI.**

20 (a) IN GENERAL.—Section 1110(a)(3) of the Social
21 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
22 ing “title XVI” and inserting “title II or XVI”.

23 (b) EFFECTIVE DATE.—The amendment made by
24 subsection (a) shall take effect as if included in the enact-
25 ment of the Social Security Independence and Program

1 Improvements Act of 1994 (Public Law 103–296; 108
2 Stat. 1464).

3 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
4 **WAGE REPORTS.**

5 (a) IN GENERAL.—Section 1137(a)(3) of the Social
6 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
7 inserting before the semicolon the following: “, and except
8 that in the case of wage reports with respect to domestic
9 service employment, a State may permit employers (as so
10 defined) that make returns with respect to such employ-
11 ment on a calendar year basis pursuant to section 3510
12 of the Internal Revenue Code of 1986 to make such re-
13 ports on an annual basis”.

14 (b) TECHNICAL AMENDMENTS.—Section 1137(a)(3)
15 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
16 amended—

17 (1) by striking “(as defined in section
18 453A(a)(2)(B)(iii))”; and

19 (2) by inserting “(as defined in section
20 453A(a)(2)(B))” after “employers” .

21 (c) EFFECTIVE DATE.—The amendments made by
22 this section shall apply to wage reports required to be sub-
23 mitted on and after the date of enactment of this Act.

○

WORK INCENTIVES IMPROVEMENT ACT OF 1999

JULY 1, 1999.—Ordered to be printed

Mr. BLILEY, from the Committee on Commerce,
submitted the following

R E P O R T

[To accompany H.R. 1180]

[Including cost estimate of the Congressional Budget Office]

The Committee on Commerce, to whom was referred the bill (H.R. 1180) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes, having considered the same, report favorably thereon with amendments and recommend that the bill as amended do pass.

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AMENDMENT

The amendments (stated in terms of the page and line numbers of the introduced bill) are as follows:

Page 6, line 22, insert “, who is at least 16, but less than 65, years of age,” after “income”.

Page 11, line 19, insert a comma after “(XVI)”.

Page 25, after line 20, insert the following new section (and conform the table of contents accordingly):

SEC. 105. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) IN GENERAL.—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting “or paragraph (6)” after “this paragraph”; and

(2) by adding at the end the following new paragraph:

“(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss.”.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

PURPOSE AND SUMMARY

H.R. 1180, the Work Incentives Improvement Act of 1999, as reported by the Committee on Commerce, provides States the option to expand the Medicaid program for workers with disabilities, continues Medicare coverage for working individuals with disabilities, and establishes a Ticket to Work and Self-Sufficiency Program for the purpose of helping individuals with disabilities go to work if they so choose.

BACKGROUND AND NEED FOR LEGISLATION

Many persons with disabilities who currently receive Federal disability benefits, such as Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI), want to work. Less than one half of one percent of SSDI beneficiaries and approximately one percent of SSI beneficiaries successfully forego disability benefits and become self-sufficient. If disabled individuals try to work and increase their income, they lose their disability cash benefits and, subsequently lose their health care coverage. The threat of losing

health benefits is a powerful disincentive for disabled beneficiaries who want to work.

The unemployment rate among working-age adults with disabilities is nearly 75 percent. Today, more than 7.5 million disabled Americans receive cash benefits from SSI and SSDI. Disability benefit spending for SSI and SSDI total \$73 billion a year, making these disability programs the fourth largest entitlement expenditure in the Federal government. If only one percent—or 75,000—of the 7.5 million disabled adults were to become employed, Federal savings in disability benefits would total \$3.5 billion over the lifetime of the beneficiaries. Removing barriers to work is a major benefit to disabled Americans in their pursuit of self-sufficiency, and it also contributes to preserving the Social Security Trust Fund.

Both SSDI and SSI are administered by the Social Security Administration (SSA). SSDI is an insurance program that provides disability benefits based on previous employment. SSDI coverage and benefit levels for disabled workers (and their dependents) are based on a worker's earnings record in jobs covered by the Social Security tax. It is financed out of a portion of Social Security payroll taxes, which are accounted for through a separate disability insurance (DI) trust fund. Generally, workers are insured for SSDI benefits if they have a total of at least 20 quarters of coverage during the 40-quarter period ending with the quarter in which they became disabled. In addition, an initial 5-month "waiting period" is required before SSDI benefits are paid. The cost of the SSDI program for FY 1998 was estimated at \$47.7 billion.

The SSI program is a means-tested (welfare) program intended to assure a minimum monthly cash income to low-income aged, blind, or disabled individuals with limited resources. There is no "waiting period" for SSI benefits. The SSI program is funded from general revenues of the Treasury. The cost of the SSI program for disabled adults was estimated at \$18.7 billion for FY 1998.

The definition of disability is identical under the two programs. Disability is defined as the inability to engage in any "substantial gainful activity" by reason of a medically determinable physical or mental impairment that is expected to last for not less than 12 months, or to result in death. (Both programs have separate definitions and requirements for persons who are blind.)

Most SSDI and SSI recipients also are entitled to health insurance coverage through Medicare (Title XVIII) and Medicaid (Title XIX), respectively. People qualify for Social Security and Medicare by virtue of having paid payroll taxes while employed. Medicare, Part A (i.e., hospital insurance), provides coverage to almost all persons age 65 or over who are entitled to benefits under the Old-Age and Survivors Insurance (OASI) program. In addition, it provides coverage, after a 24-month waiting period, for persons under age 65 who are receiving Social Security cash benefits on the basis of disability. In FY 1998, total outlays of the Medicare program were \$190.9 billion.

The Medicaid program, which is a Federal-State matching entitlement program, provides medical assistance to low-income individuals who are aged, blind, disabled, members of families with dependent children, and certain other pregnant women and children. Medicaid does not provide medical assistance to all poor persons.

States are required to serve some population groups and are permitted to serve others. In FY 1998, total outlays of the Medicaid program were \$101.2 billion.

Work incentives and disincentives

Current law provides a number of incentives to permit or encourage disabled SSI beneficiaries to work. In the SSI program, beneficiaries who return to work despite having severe impairments continue to receive cash benefits (under a program established by Section 1619(a) of the Social Security Act) as long as they meet the SSI income standards. Under the income disregard formula in the SSI program, the amount of the recipient's monthly cash benefit is gradually reduced as his or her earnings increase until the recipient's earnings reduce the SSI benefit to zero. At this income level (known as the "breakeven point," i.e., \$1,085 per month in calendar year 1999), the person would no longer be eligible for SSI benefits.

Disabled SSI beneficiaries may retain their Medicaid eligibility as long as they meet specified requirements (pursuant to Section 1619(b)). Eligible persons with annual earnings below the State "threshold" amounts are guaranteed continued Medicaid coverage. Since January 1, 1996, the "threshold" amount has ranged from a low of \$12,300 in Arizona and the Northern Mariana Islands to a high of \$32,643 in Alaska. Further, if the individual's earnings exceed the threshold, SSA can calculate an individualized threshold if the person has: impairment-related work expenses, a plan to achieve self-support, publicly funded attendant or personal care, or Medicaid expenses above the State per capita amount. In effect, Medicaid eligibility for a working disabled recipient continues until the individual's earnings reach a higher plateau which takes into account the person's ability to afford medical care as well as normal living expenses.

In addition, the SSI program does not count certain income in determining eligibility and benefits, including a portion of earned income for recipients, and excludes income and resources for SSI recipients who are participating in a plan for achieving self-support (PASS). Moreover, SSI provides continued payment of cash benefits while a beneficiary is enrolled in a vocational rehabilitation (VR) program.

The work disincentives in the SSI program are connected to the inability of SSI applicants to access the Section 1619 benefits mentioned above. Individuals are considered disabled for purposes of the SSI program if they are unable to engage in substantial gainful activity (SGA) due to a medically determinable physical or mental impairment which is expected to result in death, or which has lasted or can be expected to last for at least 12 months. Thus, SSI applicants who earn more than \$500 per month (i.e., the current substantial gainful activity limit) do not meet the program's definition of disability. Section 1619 benefits only apply to people actually receiving SSI benefits.

Under current law, disabled Social Security beneficiaries are provided a period of time during which they can test their ability to work without losing their entitlement to SSDI benefits and Medicare Part A benefits.

For SSDI benefits, this period is essentially limited to 12 months, consisting of (1) a trial work period during which disabled beneficiaries can work and continue to receive SSDI benefits for up to 9 months (within a 5-year period) with no effect on their SSDI benefits; followed by (2) a 3-month “grace” period, during which the disabled individual continues to receive SSDI benefits. After beneficiaries have completed the nine-month trial work period, they enter into a 36-month automatic extended period of eligibility. The first three months of the extended period of eligibility is often referred to as the SSDI “grace” period, mentioned above. During the last 33 months of the extended period of eligibility, an individual can be automatically reinstated for SSDI benefits for any month in which the person’s earnings drop below the substantial gainful activity limit. After the 36-month automatic extended period of eligibility, disabled persons who are no longer employed would have to reapply for SSDI benefits in order to have both SSDI and Medicare benefits reinstated.

For Medicare benefits, this period can be as long as 48 months but may end sooner if the beneficiary is determined to be no longer medically disabled. Individuals who work beyond the trial work period and three-month SSDI grace period and who are still medically disabled are entitled to Medicare coverage for an additional 36 months. At the end of this 48-month period, disabled individuals have two years during which they can reapply for SSDI and have their Medicare coverage reinstated without being subject to the five-month SSDI waiting period or the two-year Medicare waiting period.

Policymakers and advocates for the disabled have long argued that SSA’s work incentives are complex, difficult to understand, and poorly implemented. They contend that some of the reasons for the high rate of unemployment among disabled beneficiaries include confusing rules, arcane procedures, and disincentives built into the Social Security and SSI programs. They note surveys that show that most people with disabilities who are of working age want to work, and maintain that the numerous Federal regulations and program rules have the perverse effect of discouraging otherwise qualified and eager job seekers with disabilities from seeking employment.

According to the Social Security Administration (SSA), currently less than one-half of one percent of SSDI beneficiaries, and about one percent of SSI beneficiaries actually leave the disability rolls by returning to work. According to a 1998 report by the Social Security Advisory Board:

To a large extent, the small incidence of return to work on the part of disabled beneficiaries reflects the fact that eligibility is restricted to those with impairments which have been found to make them unable to engage in any substantial work activity. By definition, therefore, the disability population is composed of those who appear least capable of employment. Moreover, since eligibility depends upon proving the inability to work, attempted work activity represents a risk of losing both cash and medical benefits. While some of this risk has been moderated by the work incentive features adopted in recent years, it remains

true that the initial message the program presents is that the individual must prove that he or she cannot work in order to qualify for benefits. (Social Security Advisory Board, How SSA's Disability Programs Can Be Improved, August 1998, p. 37.)

Further, the availability of Federal income and health insurance benefits for disabled persons, in and of themselves, are often cited as a major disincentive to work because earnings from employment may mean eventual loss of these benefits. An ongoing Rehabilitation Services Administration (RSA)-supported longitudinal evaluation of the vocational rehabilitation (VR) program evaluated the interaction between these disincentives and employment. Former recipients of VR services who were not employed were asked what prevented them from working. Of those who were receiving SSDI or SSI benefits while receiving VR services, half indicated that they would be afraid of not being able to regain these income benefits if they got, and then lost, a job; almost half indicated that they were afraid of losing health care coverage.

In order to address some of the concerns about the lack of health care coverage for persons with disabilities who work, the Balanced Budget Act of 1997 (P.L. 105-33; BBA 97), allowed States to provide Medicaid coverage to individuals and families with income up to 250 percent of the Federal poverty level and who, except for earned income, would be eligible for SSI. Beneficiaries under this more liberal income limit may "buy into" Medicaid by paying premium or other cost-sharing charges on a sliding fee scale established by the State. This provision was intended to allow disabled persons with income from earnings to have access to health care through Medicaid, up to the specified income ceiling.

HEARINGS

The Subcommittee on Health and the Environment held a hearing on H.R. 1180 on March 23, 1999. The Subcommittee received testimony from: The Honorable Rick Lazio, U.S. House of Representatives, Second Congressional District, State of New York; The Honorable Henry A. Waxman, U.S. House of Representatives, 29th Congressional District, State of California; The Honorable Anthony A. Williams, Mayor, District of Columbia; Ms. Sally Richardson, Director, Center for Medicaid and State Operations, Health Care Financing Administration; Mr. Jeff Bangsberg, Interim Public Policy Director, Courage Center; Mr. Tom Deeley and Mr. Harold Deeley, private citizens; Ms. Mary Gennaro, Director of Federal-State Relations, National Association of Developmental Disabilities Councils; Mr. Alan Bergman, President & CEO, Brain Injury Association, Inc.; Mr. Steven R. Cooley, Fellow, American Board of Disability Analysts, representing the National Association of Rehabilitation Professionals in the Private Sector; Mr. Roger Auerbach, Administrator, Oregon Senior and Disabled Services; and Mr. Craig Gray, Director of Program Management, Services for Independent Living, UNUM Life Insurance Company of America.

COMMITTEE CONSIDERATION

On April 20, 1999, the Subcommittee on Health and Environment met in open markup session and approved H.R. 1180, the Work Incentives Improvement Act of 1999, for Full Committee consideration, amended, by a voice vote. On May 19, 1999, the Full Committee met in open markup session and ordered H.R. 1180 reported to the House, as amended, by a voice vote, a quorum being present.

ROLLCALL VOTES

Clause 3(b) of rule XIII of the Rules of the House requires the Committee to list the record votes on the motion to report legislation and amendments thereto. There were no record votes taken in connection with ordering H.R. 1180 reported. No amendments were offered to the bill during Full Committee consideration. A motion by Mr. Bliley to order H.R. 1180 reported to the House, amended, was agreed to by a voice vote, a quorum being present.

COMMITTEE OVERSIGHT FINDINGS

Pursuant to clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee held a legislative hearing and made findings that are reflected in this report.

COMMITTEE ON GOVERNMENT REFORM OVERSIGHT FINDINGS

Pursuant to clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, no oversight findings have been submitted to the Committee by the Committee on Government Reform.

NEW BUDGET AUTHORITY, ENTITLEMENT AUTHORITY, AND TAX EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee adopts as its own the estimates of budget authority, entitlement authority, tax expenditures, and revenues contained in the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

COMMITTEE COST ESTIMATE

The Committee adopts as its own the cost estimate prepared by the Director of the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974.

CONGRESSIONAL BUDGET OFFICE ESTIMATE

Pursuant to clause 3(c)(3) of rule XIII of the Rules of the House of Representatives, the following is the cost estimate provided by the Congressional Budget Office pursuant to section 402 of the Congressional Budget Act of 1974:

U.S. CONGRESS,
 CONGRESSIONAL BUDGET OFFICE,
 Washington, DC, June 22, 1999.

Hon. TOM BLILEY,
 Chairman, Committee on Commerce,
 House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 1180, the Work Incentives Improvement Act of 1999.

If you wish further details on this estimate, we will be pleased to provide them. The principal CBO staff contacts are Kathy Ruffing and Jeanne De Sa.

Sincerely,

BARRY B. ANDERSON
 (for Dan L. Crippen, Director).

Enclosure.

H.R. 1180—Work Incentives Improvement Act of 1999

Summary: H.R. 1180, the Work Incentives Improvement Act of 1999, would alter cash and health-care benefits for people with disabilities. Title I would provide states with options to extend Medicaid coverage to certain disabled workers, enhance Medicare for certain former recipients of Social Security Disability Insurance (DI), and establish grants and demonstration projects for states to assist disabled workers. Title II would revamp the system under which people collecting benefits for DI and Supplemental Security Income (SSI) receive vocational rehabilitation (VR) services and would make it easier for working beneficiaries to retain or regain cash benefits. Titles III and IV would require several demonstration projects, give certain members of the clergy another opportunity to enroll in the Social Security system, and tighten restrictions on the payment of Social Security benefits to prisoners. CBO estimates that the bill would reduce the total federal surplus by \$0.7 billion over the 2000–2004 period; of that amount \$0.1 billion would represent a reduction in the off-budget (Social Security) surplus.

Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance program under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the provisions of H.R. 1180 either fall within that exclusion or contain no intergovernmental mandates. Provisions of the bill that are not excluded from the application of UMRA contain one-private-sector mandate; CBO estimates that its cost would be well below the threshold specified in UMRA.

Estimated cost to the Federal Government: The estimated budgetary impact of H.R. 1180 on direct spending and revenues is summarized in Table 1. The costs of this legislation fall within budget functions 550 (Health), 570 (Medicare), 600 (Income Security), and 650 (Social Security).

Basis of estimate: For purposes of estimating the budgetary effects of H.R. 1180, CBO assumes enactment by September 1999.

Current law

About 8 million people between the ages of 18 and 64 now collect cash benefits under DI, SSI, or both. In both programs, applicants must show that they are incapable of substantial work in order to be awarded benefits. Nevertheless, the programs have several provisions that are meant to smooth beneficiaries' return to work. The law permits DI recipients to earn unlimited amounts for a nine-month period (known as the trial work period, or TWP) and a subsequent three-month grace period before suspending benefits. During the three years after the TWP—a period known as the extended period of eligibility, or EPE—those beneficiaries may automatically return to the DI rolls if their earnings sink below substantial gainful activity (SGA, now defined in regulation as \$700 per month). Furthermore, Medicare benefits (for which DI beneficiaries qualify after two years on the rolls) also continue for three years even if cash benefits are suspended. Medicare coverage then stops unless the worker pays a steep premium (up to \$309 a month in 1999).

The SSI disability program is restricted to people with low income and few resources. Although applicants for SSI benefits must meet the same disability criteria as in the DI program, the SSI program's subsequent treatment of earnings differs somewhat. SSI recipients who work get a reduced benefit (essentially, losing \$1 of benefits for each \$2 of earnings over \$85 a month) but do not give up their benefit entirely. If their earnings top SGA but they are still medically disabled, they move into section 1619(a) status (and still collect a small cash benefit). If their earnings rise further, they enter 1619(b) status (where they collect no cash benefit but retain Medicaid). If their incomes are too high even for the 1619(b) program, they may still enroll in Medicaid if their state offers a buy-in program permitted by the Balanced Budget Act of 1997 (BBA).

TABLE 1.—SUMMARY OF ESTIMATED BUDGETARY EFFECTS OF H.R. 1180

| | By fiscal years, in millions of dollars— | | | | | |
|--|--|---------|---------|---------|---------|---------|
| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 |
| DIRECT SPENDING | | | | | | |
| Spending Under Current Law: | | | | | | |
| Old-Age, Survivors, and Disability Insurance (OASDI) | 387,451 | 404,075 | 422,855 | 442,719 | 463,820 | 486,589 |
| Supplemental Security Income | 28,179 | 29,625 | 31,258 | 33,005 | 34,826 | 36,766 |
| Medicare ¹ | 191,815 | 205,707 | 219,269 | 227,239 | 247,888 | 265,755 |
| Medicaid | 107,484 | 116,578 | 124,841 | 134,927 | 146,073 | 159,094 |
| Other Health and Human Services | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 714,929 | 755,985 | 798,223 | 837,890 | 892,607 | 948,204 |
| Proposed Changes: | | | | | | |
| Old-Age, Survivors, and Disability Insurance (OASDI) | 0 | 7 | 15 | 26 | 32 | 29 |
| Supplemental Security Income | 0 | -1 | -6 | -7 | -7 | -11 |
| Medicare ¹ | 0 | 12 | 35 | 55 | 75 | 106 |
| Medicaid | 0 | 16 | 18 | 21 | 24 | 27 |
| Other Health and Human Services | 0 | 16 | 57 | 82 | 83 | 84 |
| Total | 0 | 50 | 119 | 177 | 207 | 235 |
| On-Budget | 0 | 43 | 104 | 151 | 175 | 206 |

TABLE 1.—SUMMARY OF ESTIMATED BUDGETARY EFFECTS OF H.R. 1180—Continued

| | By fiscal years, in millions of dollars— | | | | | |
|--|--|----------------|----------------|----------------|----------------|----------------|
| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 |
| Off-Budget (OASDI) | 0 | 7 | 15 | 26 | 32 | 29 |
| Proposed Spending Under H.R. 1180: | | | | | | |
| Old-Age, Survivors, and Disability Insurance (OASDI) | 387,451 | 404,082 | 422,870 | 442,745 | 463,582 | 486,618 |
| Supplemental Security Income | 28,179 | 29,624 | 31,252 | 32,998 | 34,819 | 36,755 |
| Medicare ¹ | 191,815 | 205,719 | 219,304 | 227,294 | 247,963 | 265,861 |
| Medicaid | 107,484 | 116,594 | 124,859 | 134,948 | 146,097 | 159,121 |
| Other Health and Human Services | 0 | 16 | 57 | 82 | 83 | 84 |
| Total | 714,929 | 756,035 | 798,342 | 838,067 | 892,814 | 948,439 |
| REVENUES | | | | | | |
| Proposed Changes: | | | | | | |
| On-Budget | 0 | 1 | 1 | 1 | 1 | 1 |
| Off-Budget (OASDI) | 0 | 2 | 7 | 9 | 9 | 9 |
| Total | 0 | 3 | 8 | 10 | 10 | 10 |
| SURPLUS² | | | | | | |
| Proposed Changes: | | | | | | |
| On-Budget | 0 | -42 | -103 | -150 | -174 | -205 |
| Off-Budget (OASDI) | 0 | -5 | -7 | -17 | -23 | -20 |
| Total | 0 | -47 | -110 | -167 | -197 | -225 |

¹ Medicare consists of outlays of the Hospital Insurance and Supplementary Medical Insurance trust fund, less premiums.

² A negative number means a reduction in the surplus or an increase in the deficit. A positive number means an increase in the surplus or a reduction in the deficit.

Note.—Components may not sum to totals due to rounding.

Both DI and SSI recipients are evaluated at the time of award for their potential to go back to work. Sketchy data suggest that a minority are referred to VR providers, chiefly state agencies, and only a minority of those referred are served. If the beneficiary successfully completes nine months of employment at SGA, the VR provider is reimbursed by the Social Security Administration (SSA). In 1996, SSA began recruiting alternate providers under the Referral System for Vocational Rehabilitation Providers (RSVP) program. Candidates for this program must first be referred to and rejected by the state VR agencies, and the alternate providers face the same reimbursement system (that is, a single payment after nine months of substantial work). Thus, VR for DI and SSI recipients remains fundamentally a state program.

In both the DI and SSI programs, recipients are reviewed periodically to verify that they are still disabled. These Continuing Disability Reviews (CDRs) are scheduled according to the recipient's perceived likelihood of improvement. If medical improvement is deemed possible, the cycle calls for a review every three years. (Those beneficiaries thought likely to improve are reviewed more often, and those unlikely to improve less often.) If the CDR results in a finding that the beneficiary is no longer disabled, cash and medical benefits stop. A CDR can also be triggered by a report of earnings.

Expanded availability of health care services (title I)

Title I of H.R. 1180 would increase federal spending by about \$0.7 billion over the 2000–2004 period and by about \$2 billion over

the 2000–2009 period through policies that would expand the availability of health care services. It would expand existing state options for covering the working disabled under Medicaid and would extend Medicare coverage for DI recipients who return to work. Title I would also provide states with grants to develop infrastructure to assist the working disabled and establish demonstration projects for states to provide Medicaid benefits to workers with severe impairments who are likely to become disabled.

State Option to Eliminate Income, Resource, and Asset Limitations for Medicaid Buy-In. Section 101 of H.R. 1180 would amend Medicaid law to allow states the option to raise certain income, asset, and resource limitations for workers with disabilities who buy into Medicaid. This policy, combined with the incentives created by grants and demonstration projects (discussed below), would induce some states to expand Medicaid to include the working disabled and would marginally increase enrollment in those states that would otherwise have expanded Medicaid to include this group, resulting in an increase in spending of about \$100 million over five years (see Table 2).

TABLE 2.—ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 1180, BY PROVISION

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|---|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| TITLE I | | | | | | | | | | |
| State Option to Eliminate Income, Resource and Asset Limitations for Medicaid Buy-in: Medicaid | 15 | 16 | 18 | 20 | 22 | 24 | 26 | 29 | 32 | 35 |
| State Option to Continue Medicaid Buy-in for Participants Whose DI or SSI Benefits Are Terminated After a CDR: Medicaid | 1 | 2 | 3 | 4 | 5 | 6 | 8 | 9 | 11 | 13 |
| Extension of Medicare with No HI Premium for Former DI Beneficiaries Who Exhaust Their Current-Law EPE: Medicare | 10 | 29 | 48 | 68 | 95 | 125 | 163 | 195 | 234 | 294 |
| Grants to states to Provide Infrastructure to Support Working Individuals with Disabilities: HHS outlays | 6 | 7 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| Demonstration Project for States Covering Workers with Potentially Severe Disabilities: HHS outlays | 10 | 50 | 75 | 75 | 75 | 15 | 0 | 0 | 0 | 0 |
| TITLE II | | | | | | | | | | |
| Establishment of the Ticket to Work and Self-Sufficiency Program: | | | | | | | | | | |
| Disability insurance | 1 | 2 | 3 | 5 | -3 | -18 | -48 | -77 | -33 | -37 |
| Medicare | (1) | (1) | (1) | (1) | 1 | 1 | 1 | -3 | -14 | -31 |
| Supplemental Security Income | (1) | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 |
| Subtotal (effect on outlays) | 1 | 3 | 4 | 7 | -3 | -23 | -63 | -110 | -57 | -79 |

TABLE 2.—ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 1180, BY PROVISION—
Continued

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|--|--|------------------|------------------|------------------|------------------|------------------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Bar on Work CDRs for Certain DI Beneficiaries With Earnings: | | | | | | | | | | |
| Disability Insurance | 5 | 15 | 20 | 20 | 20 | 25 | 25 | 25 | 25 | 25 |
| Medicare | 2 | 6 | 7 | 7 | 8 | 8 | 9 | 10 | 10 | 11 |
| Subtotal (effect on outlays) | 7 | 21 | 27 | 27 | 28 | 33 | 34 | 35 | 35 | 36 |
| Expedited Reinstatement of DI Benefits Within 60 Months of Termination: | | | | | | | | | | |
| Disability Insurance | 0 | 1 | 1 | 1 | 2 | 3 | 3 | 4 | 5 | 6 |
| Medicare | 0 | (¹) | (¹) | (¹) | 1 | 1 | 1 | 2 | 2 | 3 |
| Subtotal (effect on outlays) | 0 | 1 | 1 | 1 | 3 | 4 | 4 | 6 | 7 | 9 |
| TITLE III | | | | | | | | | | |
| Permanent Extension of DI Demonstration Project Authority: | | | | | | | | | | |
| Disability Insurance | 3 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| \$1-for \$2 Demonstration Projects: | | | | | | | | | | |
| Contractor Costs (DI) | 0 | (¹) | 4 | 5 | 6 | 6 | 4 | 4 | 4 | 4 |
| DI Benefit Costs | 0 | 0 | 3 | 8 | 13 | 18 | 19 | 18 | 18 | 18 |
| Medicare Costs | 0 | 0 | 0 | 0 | 2 | 4 | 7 | 9 | 9 | 9 |
| Subtotal (effect on outlays) | 0 | ¹ | 7 | 13 | 20 | 28 | 29 | 31 | 31 | 31 |
| Provisions Affecting Prisoners: | | | | | | | | | | |
| Payments to Prison Officials (OASDI) | 2 | 7 | 8 | 9 | 9 | 10 | 10 | 10 | 10 | 10 |
| Payments to Prison Officials (SSI) | (¹) | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Savings in Benefits (OASDI) | -3 | -15 | -18 | -20 | -23 | -25 | -25 | -25 | -25 | -25 |
| Savings in Benefits (SSI) | -2 | -7 | -8 | -9 | -11 | -11 | -11 | -11 | -11 | -11 |
| Subtotal (effect on outlays) | -3 | -15 | -17 | -20 | -24 | -25 | -25 | -25 | -25 | -25 |
| Open Season for Clergy to Enroll in Social Security: | | | | | | | | | | |
| Off-Budget (OASDI) Revenues | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| On-Budget (HI) Revenues | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| Other On-Budget Revenues | (¹) | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 |
| OASDI Benefits | (¹) | (¹) | (¹) | (¹) | (¹) | (¹) | 1 | 1 | 1 | 1 |
| Subtotal (effect on total surplus) | 3 | 8 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 11 |
| TOTAL | | | | | | | | | | |
| Outlays: | | | | | | | | | | |
| On-Budget | 43 | 104 | 151 | 175 | 206 | 178 | 199 | 222 | 277 | 327 |
| Off-Budget | 7 | 15 | 26 | 32 | 29 | 25 | -7 | -35 | 9 | 6 |
| Total | 50 | 119 | 177 | 207 | 235 | 203 | 192 | 187 | 287 | 334 |

TABLE 2.—ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 1180, BY PROVISION—
Continued

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|-----------------------|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Revenues: | | | | | | | | | | |
| On Budget | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Off-Budget | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| Total | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Surplus: ² | | | | | | | | | | |
| On-Budget | -42 | -103 | -150 | -174 | -205 | -177 | -198 | -221 | -276 | -326 |
| Off-Budget | -5 | -7 | -17 | -23 | -20 | -15 | 17 | 45 | 1 | 4 |
| Total | -47 | -110 | -167 | -197 | -225 | -192 | -181 | -176 | -275 | -322 |

¹ Less than \$500,000² A negative number means a reduction in the surplus or an increase in the deficit. A positive number means an increase in the surplus or a reduction in the deficit.

OASDI=Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, SSI=Supplemental Security Income, CDR=Continuing Disability Review, EPE=Extended Period of Eligibility, HI=Hospital Insurance (Medicare Part A), HHS=Department of Health and Human Services.

Notes.—Components may not sum to totals due to rounding.

Under current law, states have the option of extending Medicaid coverage to certain workers with disabilities with incomes under 250 percent of poverty. This option was created in the Balanced Budget Act of 1997, and to date only one state has an approved state plan amendment to implement it. Based on discussions with state officials, CBO assumes that states with one-quarter of eligible people will develop small expansion programs under this option over the next few years. Some of those states are likely to use current authority under the Medicaid program to disregard some income of people applying under this option, thus effectively enrolling persons with incomes slightly higher than 250 percent of poverty. Other states may develop income cut-offs at or below that level. Based on figures from SSA of the number of people who graduate from the 1619(b) program due to earnings, CBO calculates that about 1,000 working disabled will be enrolled in Medicaid on an average annual basis under current law.

Under H.R. 1180, CBO assumes that about half of the states adopting the current-law option would revise their plans to raise certain income, asset, and resource limitations beyond the 250 percent limit. Taking up the option would allow those states access to incentive grants and demonstration funds made available under the bill and would relieve states of administering complex eligibility determinations in instances where states would otherwise have disregarded income. A possible effect of H.R. 1180 in those states would be that more people would seek out the benefit if states made higher income limits explicit. As a result, there would be a small increase in the number of people enrolled under that option.

CBO also assumes that several additional states would exercise the option to buy-in the working disabled under H.R. 1180 to gain access to incentive grants and demonstration funds made available

under the bill. In total, CBO assumes that states with half the potential eligibles would pursue the option under H.R. 1180, increasing Medicaid enrollment by about 2,500 people on an average annual basis.

The estimated federal share of Medicaid benefits for the working disabled population is about \$6,500 per capita in fiscal year 2000 and about \$9,000 per capita in 2004. States would incur administrative costs for expanding the program to include the working disabled population. Beneficiaries would also pay cost-sharing amounting to an estimated 5 percent of the total cost of the benefits. The resulting net increase in federal spending attributable to this policy would be about \$100 million over five years and \$250 million over 10 years.

CBO's estimate takes into account a range of assumptions about state participation and about the eligibility limits that states would establish. Based on discussions with state officials developing or implementing policies in this area, CBO assumes that states would be likely to proceed cautiously, so as to limit financial exposure. If several large states were to participate in this program, new program enrollment could potentially be twice CBO's estimate; conversely, fewer participating states would decrease the estimate. If all states were to take up the option and have no ability to restrict or limit the benefits to all qualified working disabled people meeting the federal definition of disability regardless of any income, assets, and resources, federal costs could be substantially higher than the estimate. At the same time, states could maintain current limits or set eligibility limits to target a narrow subset of eligibles, thus resulting in a smaller increase in costs.

State Option to Continue Medicaid Buy-In for Participants Whose DI or SSI Benefits are Terminated After a CDR. Section 101 would also provide states the option to continue Medicaid coverage for persons enrolled under the buy-in option for the working disabled if those persons lose SSI or DI due to medical improvement, as established at a regularly scheduled CDR, yet still have conditions that qualify as a "severe medically determinable impairment." Under current law, an estimated 5 percent of the buy-in population will have medical improvements each year that will result in the loss of their disability status, and thus eligibility for the Medicaid buy-in. Continuing coverage for those people would raise federal Medicaid spending by \$15 million over five years and \$60 million over 10 years, assuming that most states choosing the Medicaid buy-in option under current-law would also take up this option.

Extension of Medicare with No HI Premium to Former DI Beneficiaries Who Exhaust Their Current-Law EPE. Section 102 of H.R. 1180 would allow graduates of the EPE in the next 10 years to continue to receive Medicare benefits indefinitely without having to pay any Part A premium. The federal cost of this provision is estimated at \$10 million in 2000 and about \$250 million over five years.

About 15,000 people start an EPE each year, and about 6,000 finish one. The bill would provide Medicare coverage to people who otherwise would have lost it at the end of the EPE. CBO estimates that an extra 27,000 people would continue to be eligible for Medicare in 2004, the fifth year of the provision, growing to 60,000 in

2009. CBO assumes that the per capita cost for those beneficiaries is about one-half the cost of the average disabled beneficiary, reflecting the likelihood that they are somewhat healthier than other disabled beneficiaries, and the possibility that some beneficiaries would gain employer-sponsored insurance and rely on Medicare as a secondary payor.

Grants to States to Provide Infrastructure to Support Working Individuals with Disabilities. To states that choose at least the first of the two Medicaid buy-in options, section 103 of the bill would make available grants to develop and establish state capacity for providing items and services to workers with disabilities. The bill would appropriate \$20 million in 2000, \$25 million in 2001, \$30 million in 2002, \$35 million in 2003, and \$40 million in 2004. The amount would be indexed to the consumer price index (CPI-U) through 2010. Each state's grant would be limited in each year to 15 percent of the estimated total federal and state spending on the more costly of the two state options in the bill. Based on CBO's estimate of the state option to expand the Medicaid buy-in, the limitation would hold spending levels to about \$10 million annually; five-year costs would be \$40 million and 10-year costs would be \$100 million. Funds not allocated would remain available for allocation to states in future years. Funds allocated to states would be available until expended.

Demonstration Project for States Covering Workers with Potentially Severe Disabilities. Under section 104 of H.R. 1180, states electing the first option under section 101 would also be eligible for grants to pay for demonstration projects that provide Medicaid to working persons with physical or mental impairments who could potentially become blind or disabled without Medicaid benefits. Those people would be ineligible for Medicaid benefits under current law because they do not have conditions that meet the DI or SSI definition of disability. The bill would appropriate \$70 million in 2000, \$73 million in 2001, \$77 million in 2002, and \$80 million in 2003. Funds would remain available until expended, except that no payment could be made by the federal government after fiscal year 2005. CBO estimates that the cost of the provision would total \$285 million over the 2000–2004 period.

Ticket to Work and Self-Sufficiency Program and related provisions (title II)

Ticket to Work and Self-Sufficiency Program. Title II would temporarily change the way that VR services are provided to recipients of DI and SSI benefits. The budgetary effects of the proposed tickets program comprise several components, which are detailed in Table 3.

TABLE 3.—ESTIMATED EFFECTS ON OUTLAYS OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|---------------------------------|--|------------------|------|------|------|------|------|------------------|------------------|------------------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| | DI BENEFICIARIES | | | | | | | | | |
| Payments to Program Manager ... | 1 | 2 | 1 | 2 | 3 | 3 | 1 | (¹) | 0 | 0 |
| Milestone Payments to Providers | 0 | (¹) | 1 | 6 | 14 | 22 | 26 | 11 | (¹) | (¹) |

TABLE 3.—ESTIMATED EFFECTS ON OUTLAYS OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM—Continued

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|-------------------------------------|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Incentive Payments to Providers | 0 | (¹) | (¹) | 3 | 15 | 33 | 59 | 81 | 62 | 49 |
| Partial Repeal of Current VR | | | | | | | | | | |
| System | 0 | (¹) | (¹) | -4 | -13 | -22 | -33 | -50 | (¹) | (¹) |
| Benefits Avoided | 0 | (¹) | (¹) | -5 | -25 | -59 | -104 | -122 | -98 | -89 |
| Extra Benefits Paid | 0 | (¹) | 1 | 2 | 3 | 5 | 5 | 3 | 3 | 3 |
| Subtotal, DI | 1 | 2 | 3 | 5 | -3 | -18 | -48 | -77 | -33 | -37 |
| Medicare Savings ² | 0 | 0 | (¹) | (¹) | 1 | 1 | 1 | -3 | -14 | -31 |
| Total | 1 | 2 | 3 | 5 | -2 | -16 | -46 | -79 | -47 | -68 |
| SSI BENEFICIARIES | | | | | | | | | | |
| Payments to Program Manager ... | (¹) | 1 | (¹) | 1 | 1 | 1 | (¹) | (¹) | (¹) | (¹) |
| Milestone Payments to Providers | 0 | (¹) | 1 | 3 | 7 | 11 | 13 | 6 | (¹) | (¹) |
| Incentive Payments to Providers | 0 | (¹) | (¹) | 1 | 4 | 9 | 15 | 21 | 16 | 13 |
| Partial Repeal of Current VR | | | | | | | | | | |
| System | 0 | (¹) | (¹) | -2 | -6 | -11 | -17 | -25 | (¹) | (¹) |
| Benefits Avoided | 0 | (¹) | (¹) | -1 | -7 | -16 | -27 | -32 | -26 | -23 |
| Extra Benefits Paid | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal, SSI | (¹) | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 |
| Medicaid Savings | (³) | (³) | (³) | (³) | (³) | (³) | (³) | (³) | (³) | (³) |
| Total | (¹) | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 |

¹ Less than \$500,000.

² These amounts are the Medicare savings that would occur under current law. Title I of the bill would extend Medicare for these beneficiaries.

³ CBO assumes that nearly all of the vocational rehabilitation recipients who leave the SSI rolls would continue to get Medicaid coverage through the 1619(b) program.

DI = Disability Insurance, SSI = Supplemental Security Income.

Notes.—Components may not sum to totals due to rounding.

The current VR program serves a fraction of DI and SSI recipients. Approximately 10 percent to 15 percent of new DI and SSI recipients are referred to state VR agencies; although SSA does not track what happens to them next, scattered clues suggest that about 10 percent of those referred are accepted. Recently, SSA has made approximately 650,000 DI awards a year; therefore, around 7,000 to 8,000 probably received VR services. SSA pays about 6,000 claims per year for VR services provided to DI recipients. SSA also pays about 6,000 claims for VR services to SSI recipients. Since about 3,000 claims are for people who collect benefits under both programs, total claims reimbursed are about 9,000 a year.

Some DI and SSI recipients return to work without the help of VR agencies. Research suggests that only 10 percent to 20 percent of DI recipients ever work after they start collecting benefits, and only 2 percent to 3 percent eventually have benefits withheld because of earnings. In contrast, SSA reimburses claims for VR services for about 1 percent of recipients. Thus, for each VR success, one or two other DI recipients go back to work and are suspended from the rolls without VR.

H.R. 1180 would revamp the VR system by permitting nearly any recipient who desires VR to receive it, by allowing clients to choose from a variety of providers in addition to state VR agencies, and by stretching out reimbursements to providers for up to five years, contingent on their clients' sustained absence from the rolls.

Under H.R. 1180, SSA would issue tickets to DI and SSI beneficiaries that they could assign to approved VR providers, whether state, private for-profit, or nonprofit. The bill would grant wide latitude to SSA in deciding the terms and conditions of the tickets; SSA tentatively plans to issue tickets to new beneficiaries at the time of award, unless they are deemed likely to recover, and to current beneficiaries after a CDR. By accepting a ticket, providers—labeled “networks” in the bill—would agree to supply services, such as training, assistive technology, physical therapy, or placement. A program manager, selected by SSA, would aid in recruiting providers and handling the nuts-and-bolts administration of the program.

Providers could choose between two forms of reimbursement from SSA. One system would be based solely on outcomes; the provider would receive 40 percent of the average DI or SSI benefit for up to five years, so long as the client stayed off the rolls. Some providers fear, though, that they would experience acute cash-flow problems under such a system. To address that concern, the bill also offers a blended system, dubbed the “milestone-outcome” system. Under that system, SSA would make some payments earlier, but would trim subsequent payments to ensure that the overall cost (calculated on a net present value basis) did not exceed the cost of a pure outcomes system.

The new program would be phased in gradually but last only five years. H.R. 1180 calls for it to start in selected areas a year after enactment, and to operate nationwide three years after that. The last tickets would be issued five years after the start of implementation. Because the program would then end unless reauthorized, potential providers may hesitate to enlarge their capacity to serve DI and SSI clients.

CBO estimates that about 7 percent of newly awarded beneficiaries would seek VR services if they were readily available, versus only about 1 percent who receive them under current law. Both the Transitional Employment Demonstration (TED, a demonstration conducted in the mid-1980s and confined to mentally retarded recipients) and Project Network (a demonstration begun in 1992 and open to both DI and SSI beneficiaries) suggested that about 5 percent of beneficiaries would enroll in VR if given the chance. CBO judged that the level of interest ultimately would slightly exceed 5 percent for two reasons. First, intake under Project Network developed bottlenecks, which may have discouraged some potential participants. Second, Project Network barred any recipients who were employed or self-employed from enrolling; no such bar would be in place under H.R. 1180, however, and those recipients would probably be interested in receiving services and would be attractive to providers.

Research suggests that getting VR raises the propensity to work, and thus the chances for an earnings-related suspension. But raw figures can easily exaggerate the effectiveness of VR. The handful of beneficiaries who would sign up for VR are probably the most motivated, and many would have worked anyway. In fact, CBO assumes that one effect of H.R. 1180 would be to enable providers to be reimbursed for providing services for many people who would have worked anyway.

These expected effects can be illustrated by following the experiences of one hypothetical cohort of 650,000 new DI beneficiaries. Under current law, about 7,800 might be served under the state VR programs; 6,100 of them would eventually generate a reimbursement by SSA and would be suspended for at least a month. Another 8,300 would be suspended due to earnings, for at least one month, without any reimbursement to VR. Thus, total suspensions would be about 14,400, or about 2 percent of the cohort, under current law. CBO estimates that, if those beneficiaries could freely enroll in VR using a “ticket,” about 7 percent or 47,000 would get VR services. Most of those VR clients would work, and many (about 13,400) would be suspended for at least one month, an increase of 7,300 in VR-reimbursed cases. However, CBO estimates that about 5,900 of those workers would have gone back to work unaided. Thus, for this cohort, net suspensions would be about 1,400 higher.

In estimating H.R. 1180, CBO adjusted those hypothetical figures for its caseload projections and timing factors. First, CBO projects that the volume of disabled-worker awards gradually climbs from 625,000 in 1999 to about 780,000 in 2005. That increase reflects the aging of the baby-boom generation into its high-disability years and the scheduled increases in Social Security’s normal retirement age. Second, CBO assumed that some extra rehabilitations would occur among the nearly 5 million people now on the DI rolls, not just among new awards, although current beneficiaries are generally poorer candidates for VR than new applicants with more recent work experience. Third, CBO adjusted the numbers for the gradual phase-in of the new system. Under the bill’s schedule, assuming enactment by September 1999, the first services would be rendered at a handful of sites in fiscal year 2001. If those clients engaged in trial work in 2002, the first extra suspensions would occur in 2003. The last tickets would be issued in 2005, and the last extra suspensions would occur in 2007.

Specifically, CBO estimates that the number of net additional suspensions in DI—that is, suspensions that would not occur in the absence of the new program—would equal 500 in 2003, 2,200 in 2004, and an average of 4,600 annually between 2005 and 2007. Gross suspensions that involve reimbursement to a VR provider would climb gradually from 6,000 to 8,000 a year under current law, but would be markedly higher—about 15,000 in 2007, almost double the current-law estimate—under the proposal. And the number of suspensions involving no reimbursement to VR would fall.

CBO also had to make assumptions about recidivism. Many studies have documented that DI recipients who leave the rolls often return. It is not clear whether recipients of VR services are more or less likely to return to the rolls than others; some evidence suggests that the extra boost provided by VR fades over time. Because H.R. 1180 proposes to pay providers for up to five years, but only if the recipient stays off the rolls, assumptions about recidivism are critical. Based on a variety of sources, CBO assumes that recipients suspended from the rolls have about a two-thirds chance of still being suspended one year later, about a one-half chance three years later (when, technically, their DI entitlement is terminated), and a 40 percent chance after five years.

Effects of the Tickets Program in DI. The budgetary consequences of H.R. 1180, from the standpoint of the DI program, would consist of seven effects:

- *Payments to the program manager.* SSA would hire a program manager to coordinate issuance of tickets, the recruitment of providers, and other tasks. Based on a similar arrangement in the RSVP program, CBO assumes that payments to the program manager would amount to just a few million dollars a year.

- *Milestone payments to providers.* As explained earlier, the bill would give providers a choice between a pure outcome-based system (in which providers would get periodic payments only during the period of suspension) and a blended outcome-milestone system (in which they could get some money earlier). CBO assumes that most providers would opt for the blended system, which CBO assumes to consist of a \$500 payment after several months of work and a \$1,000 bonus on the date of suspension. Placements would be considerably easier for providers to achieve than suspension. The first milestone payments would be made in 2002 but would be very small. They would peak at \$26 million in 2006; an estimated \$15 million for 30,000 gross placements, mostly from ticketholders served in 2005, and another \$11 million for 11,000 suspensions, mostly from ticketholders served in 2004 (and who spent 2005 in trial work).

- *Incentive payments to providers.* The incentive payments would occur over a period of up to five years if the beneficiary remained off the rolls. Therefore, they would continue throughout CBO's 10-year horizon even though the last tickets would be issued in 2005. In the pure outcomes system, incentive payments would be 40 percent of average benefits. CBO assumes that most providers would opt for the blended payment system, under which—in return for getting some earlier milestone payments—they would accept incentive payments of 30 percent. Again, outlays would be very small in the early years. Incentive payments would peak at \$81 million in 2007. That is the year in which the last batch of VR clients, who got their tickets in 2005, would be suspended (under the assumption that they got services in 2005 and engaged in trial work in 2006). By 2007, gross suspensions of ticketholders over the preceding five years are assumed to be about 35,000. Some of those would have returned to the rolls, but 25,000 would remain suspended. Incentive payments would equal 25,000 times 30 percent of the previous year's average DI benefit (about \$900 a month), or \$81 million. By 2009, under CBO's assumptions about recidivism, only 17,000 of those 25,000 would still be off the rolls, and the 2,000 who were first suspended in 2003 and 2004 would no longer be in the five-year period for incentive payments. Thus, incentive payments in that year would be \$49 million.

- *Partial repeal of current VR system.* CBO assumes that, under current law, the DI trust fund would reimburse about 6,000 claims for VR services at present (at an average cost of about \$11,000) and about 7,300 in 2007 (at an average cost of about \$14,000). The new program would partially displace the current system for five years. Specifically, if tickets were issued in 2001 through 2005, they would partially divert clients who would otherwise have generated reimbursements to VR providers (at the end of trial work) in 2003

through 2007. In 2007, \$50 million in reduced payments would result.

H.R. 1180 would grant state VR agencies the option of remaining in the current reimbursement system—that is, charging SSA for the full amount of costs incurred after the client has worked for nine months. Because the new program would expire after five years, many state agencies might choose not to undergo the disruption of a switch.

- *Benefits avoided.* The various payments to providers discussed above all depend on the number of gross rehabilitations. The savings in DI benefits, in contrast, depend on the number of net or extra rehabilitations. That distinction is important: when providers serve clients who would have worked and eventually been suspended anyway, they do not generate savings in DI benefits.

Over the 2003–2007 period, CBO estimates that there would be a total of 35,000 gross rehabilitations of ticket holders, of which only 17,000 would represent extra rehabilitations. Under CBO’s assumptions about recidivism, about 11,000 of those 17,000 would still be off the rolls in 2007; at an average monthly benefit of about \$900, \$122 million in savings would result. That year marks the peak savings, because no more tickets would be issued after 2005. By 2009, the 11,000 would have shrunk to 8,000, and \$89 million in benefit savings would be realized.

- *Extra benefits paid.* Some people might file for DI benefits in order to get VR services. They may even be encouraged to do so by prospective providers (for example, by an insurance company that helps to run their employer’s private disability or workers’ compensation coverage). For those induced filers, the entire benefit cost (for any time they spend on the rolls) and the VR cost (if they do eventually get suspended) would be a net cost to the DI program.

To some extent, SSA could minimize this problem by setting the terms and conditions under which it would issue tickets—for example, by denying them to beneficiaries who are expected to recover medically. But some such filers might still seep through. CBO assumes that a few hundred such filers would be attracted to DI during the five years of the tickets program, and some would remain on the rolls, leading to extra benefit costs of up to \$5 million annually.

- *Resulting Medicare savings.* DI recipients who return to work continue to receive Medicare coverage for three years after their suspension from DI. By leading to the rehabilitation and suspension of more DI recipients, the Ticket to Work Self-Sufficiency Act would generate some savings to Medicare. DI beneficiaries who are capable of working are probably healthier than other beneficiaries, and their per capita Medicare costs therefore less than average.

Under CBO’s assumption that the first services would be rendered in 2001 and the first resulting suspensions in 2003, small Medicare savings would begin in 2006. By 2009, 13,000 extra suspensions are assumed to have occurred over the 2003–2006 period (the group for whom the three-year EPE would have expired); 5,700 would still be off the rolls; and \$35 million in Medicare savings would result.

Although these Medicare savings would result if the Ticket to Work and Self-Sufficiency Act were enacted in isolation, elsewhere

H.R. 1180 proposes to give continued Medicare coverage to all beneficiaries who complete an EPE. Therefore, these Medicare savings would be rendered moot by the cost (shown in title I) of that proposal.

Small costs—estimated by CBO to be between \$1 million and \$4 million a year—would result from the induced filers who remain on DI long enough (two years) to qualify for Medicare.

Over the 1999–2003 period, CBO estimates a small net cost in the DI program from the proposed tickets, mainly because there would be few extra rehabilitations but there would be some startup costs and small payments to induce filers. Later, CBO foresees small net savings, chiefly because the DI benefit savings from extra suspensions slightly outweigh the costs of paying for VR services rendered by an expanded pool of providers.

Effects of the Tickets Program in SSI. H.R. 1180 would also bring SSI participation into the new tickets to work program. CBO estimated the effects on the SSI program in a manner similar to its estimates for DI. There are a few notable differences.

The number of SSI recipients affected by the bill is generally estimated to be only half as many as in DI. Under current law, SSA pays for about 9,000 rehabilitations a year—6,000 in DI and 6,000 in SSI, of which 3,000 are concurrent. Under the bill, services rendered by providers to concurrent beneficiaries would essentially be compensated under the DI rules. Thus, to avoid double-counting concurrent beneficiaries, CBO generally assumed only half as many cases in its SSI estimates as in the analogous DI estimates.

Average benefits for disabled SSI beneficiaries are also only about half as large as in the DI program—in 2003, for example, about \$425 in SSI versus \$825 in DI. Therefore, all payments under the proposed system that are pegged to the average benefit, such as the incentive payments to providers, would be smaller in SSI. In fact, that provision has aroused concern that providers would be less willing to provide services to the SSI population. CBO implicitly assumes that providers would serve this group, perhaps emphasizing cheaper services with repeated interventions if necessary.

Because SSI is limited to beneficiaries with low income and few resources, CBO assumed that there would be few induced filers. CBO also assumed that most SSI beneficiaries affected by the bill would retain Medicaid coverage through section 1619(b).

The upshot of HR. 1180 in the SSI program is a pattern that resembles that for DI: small early costs, giving way to small savings after 2003.

Ban on Work CDRs for Certain DI Beneficiaries With Earnings. The bill would bar so-called work CDRs if the beneficiary has been on the rolls for more than 24 months. Work CDRs are triggered by a report of earnings. Beneficiaries would still be subject to regularly-scheduled periodic CDRs.

SSA conducts approximately 80,000 work CDRs a year. CBO estimates that about 1,500 people whose entitlement would otherwise be terminated would benefit from this provision. Assuming that they are, on average, halfway between periodic CDRs scheduled at three-year intervals, they would get an extra 18 months of benefits.

When fully effective, the provision is expected to lead to annual DI costs of about \$25 million and Medicare costs of about \$10 million.

Expedited Reinstatement of DI Benefits Within 60 Months of Termination. The bill would provide for expedited reinstatement of benefits for former DI recipients whose benefits were terminated because of earnings in the last 60 months. Under current law, those beneficiaries have the usual five-month waiting period waived if they seek benefits; but their application is judged no differently from one filed by someone who has never been on the rolls. H.R. 1180 would alter that by stipulating that benefits must be awarded unless SSA can demonstrate that the applicant's medical condition has improved. H.R. 1180 would also provide for automatic payment of up to five months of provisional benefits while the request for reinstatement is under consideration. Generally, those provisional payments would not be subject to recoupment even if the request is ultimately denied. CBO estimates that these liberalized procedures would tip the balance in up to a hundred cases each year, ultimately costing about \$6 million in DI and \$3 million in Medicare by 2009.

CBO does not estimate that either of these two provisions would lead to additional suspensions from the DI rolls as a result of earnings, because there are no firm empirical data on which to base such an assumption.

Demonstration projects and studies (title III)

Permanent Extension of DI Demonstration Project Authority. SSA has had the authority to conduct certain research and demonstration projects that occasionally require waivers of provisions of title II of the Social Security Act. That waiver authority expired on June 10, 1996. This bill would extend it permanently. This extension would be the fifth since the waiver authority was enacted in 1980. This general waiver authority should not be confused with the so-called \$1-for-\$2 demonstrations in the next section; those demonstrations are costlier and longer-lasting than the modest projects that SSA would likely conduct on its own initiative.

When the waiver authority has been in effect, SSA has generally spent between \$2 million and \$4 million annually on the affected projects. CBO judges that the proposed extension would lead to extra outlays of \$3 million in 2000 and \$5 million a year thereafter.

\$1-for-\$2 Demonstration Projects. Under current law, after completing the TWP and the three-month grace period during which earnings are disregarded, a disabled worker gives up his or her entire benefit in any month that earnings exceed SGA. Both anecdotal and statistical evidence suggest that many beneficiaries balk at that, instead quitting work or holding their earnings just below the threshold. Some advocates favor, instead, cutting benefits by \$1 for every \$2 of earnings over SGA. More modestly, some favor a treatment of earnings more like the SSI program's—a cut of \$1 in benefits for every \$2 of earnings over \$85 a month.

Such proposals would probably encourage more people who are already on the DI rolls to work. Although fewer beneficiaries would be suspended (i.e., have their benefit reduced to zero), many might have their benefit substantially reduced. A major concern about such proposals, though, is that they would encourage an unknown

number of people to file for benefits. Survey data suggest that there are millions of severely impaired people who are nevertheless working and not collecting DI. Filing for benefits, and working part-time, might actually improve their standards of living. That incentive would be much stronger if the DI program liberalized its treatment of earnings. The SSA Office of the Actuary in 1994 estimated that applying a \$1-for-\$2 policy for earnings above \$500, the threshold for SGA at that time, would cost \$5 billion in extra DI benefits over a five-year period and that setting the threshold at \$85 would cost \$2 billion.

H.R. 1180 would require SSA to conduct demonstrations to test the effects of a \$1 reduction in benefits for each \$2 of earnings. It would require that SSA conduct the demonstrations on a wide enough scale, and for a long enough period, to permit valid analysis of the results. CBO assumed that, to meet those criteria, the demonstrations would have to include perhaps half a dozen small states, that the intake of the project would have to last three or four years to permit observation of induced filers, and that the incentives themselves would have to be promised to the beneficiaries for an indefinite period. Because the demonstrations would pose formidable issues of design and administration, CBO assumes they would not get under way until 2002. CBO also assumes that the demonstration would be conducted in areas with and without the tickets to work and self-sufficiency, to enable the effect of the incentives to be isolated from the effects of the new VR program. Even a relatively small-scale demonstration might thereby apply to approximately 2 percent to 3 percent of the nation. Multiplying that percentage times the DI benefit costs suggested by the SSA's 1994 memo implies that the demonstration would, after intake is complete, cost almost \$20 million in extra DI benefits a year. It would also lead to slightly higher Medicare costs, since the induced filers would qualify for Medicare after two years on the DI rolls. Finally, CBO assumes that running the demonstrations and collecting and analyzing data would be handled by an expert contractor, at a cost of several million dollars a year. In sum, the \$1-for-\$2 demonstration projects proposed by the bill are estimated to cost \$190 million over the 2002–2009 period.

Technical amendments (title IV)

Title IV contains technical corrections and clarifications to the Social Security Act. Two sections have budgetary effects.

Provisions Affecting Prisoners. H.R. 1180 would tighten restrictions on the payment of Social Security benefits to prisoners. Current law sets strict limits on the payment of SSI benefits to incarcerated people and somewhat milder limits on payments of OASDI. SSI recipients who are in prison for a full month—regardless of whether they are convicted—have their benefits suspended while they are incarcerated. OASDI recipients who have been convicted of an offense carrying a maximum sentence of one year or more have their benefits suspended. Those who are convicted of lesser crimes, and those who are in jail awaiting trial, may still collect OASDI benefits. Those provisions are enforced chiefly by an exchange of computerized data between SSA and the Federal Bureau of Prisons, state prisons, and some county jails. Those agreements

are voluntary and, until recently, involved no payments to the institutions.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 changed that arrangement by directing SSA to pay institutions for reporting information that led to the identification of ineligible SSI recipients. The payment is \$400 if the institution reports information within 30 days of confinement and \$200 if the report is made 30 to 90 days after confinement. The law also exempts matching agreements between SSA and correctional institutions from certain provisions of the Privacy Act.

This bill would establish analogous arrangements for the OASDI program. It would also drop the requirement that OASDI benefits be suspended only if the maximum sentence for the offense is one year or more. (A conviction would still be required; inmates who are in jail while they await trial could continue to collect benefits.) CBO estimated the effects of this provision, like its predecessor in the welfare reform law, by analyzing data from several sources that suggest about 4 percent to 5 percent of prisoners were receiving Social Security, SSI benefits, or both before incarceration. Reports from SSA's Inspector General showed that some of those prisoners were overlooked under matching arrangements either because their institution had not signed an agreement, had not renewed it promptly, or did not submit data on schedule.

CBO estimates that, over the 2000–2009 period, the provisions would lead to payments of \$85 million to correctional institutions out of the OASDI trust funds and benefit savings of \$205 million, for a net saving of \$120 million. CBO also expects that the broader arrangement, by doubling the pool of potential payments, would encourage more jailers to submit information accurately and promptly and would therefore lead to spillover savings in the SSI program amounting to about \$90 million over the 10-year period.

Open Season for Clergy to Enroll in Social Security. Section 1402(e) of the Internal Revenue Code allows certain clergy to exempt the self-employment income from their ministry from Social Security and Medicare taxes. Under current law, such an exemption is irrevocable.

Section 403 of H.R. 1180 would allow clergy who have received an exemption a two-year opportunity to revoke that exemption beginning in calendar year 2000. Similar opportunities were offered in 1978 and 1987. Based on those experiences, CBO estimates that 3,500 taxpayers would choose to revoke their exemptions, and that the average new enrollee would have about \$20,000 of self-employment income. (There would be a slight decrease in income tax revenue, since a portion of payroll taxes is deductible for income tax purposes.) From 2000 through 2009, off-budget revenues would increase by \$87 million, and on-budget revenues would increase by \$10 million.

Those taxpayers who revoke their exemption will eventually receive higher Social Security benefits, but that effect will mostly occur in years beyond the 10-year estimation period. CBO estimates that outlays will increase by \$4 million in the 2000–2009 period.

Authorization for State to Permit Annual Wage Reports. H.R. 1180 would amend the Social Security Act to allow states to permit

employers of domestic workers to report on such employment annually rather than quarterly. State-maintained employment histories are used to verify eligibility for certain benefits, such as unemployment insurance, Food Stamps, and SSI. This change would not affect eligibility requirements. It could present an administrative burden to states that choose to allow annual reporting, because they would have to research cases annually if they suspect domestic employment. CBO expects any budgetary effects to be insignificant.

Spending subject to appropriation: H.R. 1180 would also create several new programs or activities to be funded out of SSA's annual appropriation (see Table 4).

TABLE 4.—SPENDING SUBJECT TO APPROPRIATION

| | By fiscal years, in millions of dollars— | | | | |
|--|--|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 |
| WITH ADJUSTMENTS FOR INFLATION | | | | | |
| Work Incentives Advisory Panel: | | | | | |
| Budget authority | 1 | 1 | 1 | 2 | 2 |
| Outlays | 1 | 1 | 1 | 2 | 2 |
| Work Incentives Outreach: | | | | | |
| Budget authority | 23 | 23 | 23 | 23 | 23 |
| Outlays | 2 | 14 | 23 | 23 | 23 |
| State Grants for Work Incentives Assistance: | | | | | |
| Budget authority | 7 | 7 | 7 | 7 | 8 |
| Outlays | 3 | 6 | 7 | 7 | 7 |
| Total: | | | | | |
| Budget authority | 31 | 32 | 32 | 32 | 32 |
| Outlays | 7 | 21 | 32 | 32 | 32 |
| WITHOUT ADJUSTMENTS FOR INFLATION | | | | | |
| Work Incentives Advisory Panel: | | | | | |
| Budget authority | 1 | 1 | 1 | 1 | 1 |
| Outlays | 1 | 1 | 1 | 1 | 1 |
| Work Incentives Outreach: | | | | | |
| Budget authority | 23 | 23 | 23 | 23 | 23 |
| Outlays | 2 | 14 | 23 | 23 | 23 |
| State Grants for Work Incentives Assistance: | | | | | |
| Budget authority | 7 | 7 | 7 | 7 | 7 |
| Outlays | 3 | 6 | 7 | 7 | 7 |
| Total: | | | | | |
| Budget authority | 31 | 31 | 31 | 31 | 31 |
| Outlays | 7 | 21 | 31 | 31 | 31 |

Note.—Components may not sum to totals due to rounding.

Section 201 of H.R. 1180 would create a Work Incentives Advisory Panel to advise the Secretaries of Health and Human Services (HHS), Labor, and Education, and the Commissioner of Social Security on work incentives for the disabled and to advise SSA on implementation and evaluation of the Ticket to Work program. The panel would consist of 12 members appointed by the Commissioner in consultation with the Congress. At least five of the members would be current or former SSI or DI recipients. H.R. 1180 would permit the panel to hire a director and other staff and pay other necessary expenses. CBO estimates that the panel would cost between \$1 million and \$2 million a year.

Section 221 would establish a community-based program to disseminate information about work incentives and related issues. Grants totaling no more than \$23 million a year would be awarded

competitively to community-based groups. Because this would be a brand-new program, CBO assumes that spending would be low at first, not reaching \$23 million until the third year.

Section 222 would require the Commissioner of Social Security to make grants to the protection and advocacy (P&A) system established under part C of title I of the Developmental Disabilities Act to assist disabled people to obtain vocational rehabilitation or employment. That P&A system is currently funded by the Children and Family Services Program in the Department of HHS. The bill would authorize \$7 million in 2000 and such sums as shall be necessary thereafter; CBO assumed that funding would remain at about \$7 million. Estimated outlays would be \$3 million in 2000 and \$6 million a year thereafter.

Although they do not explicitly call for further appropriations, several other provisions of H.R. 1180 would affect SSA's workload and thus the pressures on its annual appropriation. The Ticket to Work program (section 201) would require significant planning and oversight by SSA staff. Section 221 would direct SSA to establish a special corps of work incentive specialists to deal with questions from applicants, beneficiaries, and the community-based organizations funded under the same section. Enforcement of the tougher restrictions on prisoners in section 402 would require SSA staff time, because suspension of benefits occurs only after care verification. Partly offsetting these extra costs, SSA would no longer be required to do work CDRs under section 211. CBO estimates that these effects on SSA's workload would, on balance, cost the agency between \$10 million and \$30 million in the 2000–2004 period.

Pay-as-you go considerations: The Balanced Budget and Emergency Deficit Control Act sets up pay-as-you-go procedures for legislation affecting direct spending or receipts. The net changes in outlays and governmental receipts that are subject to pay-as-you-go procedures are shown in the following table. For the purposes of enforcing pay-as-you-go procedures, only the effects in the current year, the budget year, and the succeeding four years are counted.

TABLE 5.—SUMMARY OF PAY-AS-YOU-GO EFFECTS OF H.R. 1180

| | By fiscal years, in millions of dollars— | | | | | | | | | | |
|---------------------------|--|------|------|------|------|------|------|------|------|------|--|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | |
| Changes in outlays | 43 | 104 | 151 | 175 | 206 | 178 | 199 | 222 | 277 | 327 | |
| Changes in receipts | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | |

Estimated impact on State, local, and tribal governments: Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance program under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the provisions of H.R. 1180 either fall within that exclusion or contain no intergovernmental mandates.

The bill includes optional programs for states that would result in greater state spending if they chose to participate as well as additional grants to states for specific programs.

Title I contains a number of options for states to expand their Medicaid program to cover workers with disabilities who want to buy into Medicaid and to continue Medicaid coverage for individuals who lose their eligibility for DI or SSI following a continuing disability review. CBO estimates that state costs attributable to these optional expansions during the first five years would total about \$70 million for the first option and about \$10 million for the second. States that implement the first of these Medicaid options would be eligible for grants to develop and operate programs to support working individuals with disabilities. CBO estimates that states would receive a total of about \$40 million during the first five years the program is in effect. States would also have the option of charging participants premiums or other fees to offset a portion of the costs.

Title I would also allow states to establish demonstration projects that would provide Medicaid to working individuals with physical or mental impairments who, without Medicaid, could become blind or disabled. CBO estimates that state costs attributable to this optional coverage would total \$215 million over the first five years of implementation.

Estimated impact on the private sector: Provisions of the bill not excluded from consideration by UMRA include one private-sector mandate on insurers who provide medigap coverage to Medicare beneficiaries who are eligible because of disability. It requires such insurers to reinstate coverage that disabled beneficiaries had previously suspended because they had group health coverage if the beneficiaries lose group coverage and request reinstatement within 90 days of that loss. Because of restrictions on the premiums that could be charged for reinstated coverage, this provision could impose costs that insurers might not immediately recover from premiums. However, because of the small number of beneficiaries this provision would affect, the costs that might be imposed on medigap insurers would also be very small—less than \$5 million a year by 2009.

Previous CBO estimate: On March 19, 1999, CBO released a cost estimate for S. 331, the Work Incentives Improvement Act of 1999, as ordered reported by the Senate Committee on Finance on March 4, 1999. The major difference between the bills is that S. 331 contains several provisions that would increase revenues (title V), while H.R. 1180 does not. As a result, CBO estimated that S. 331 would add \$0.7 billion to the total federal surplus over the 2000–2004 period.

Estimated prepared by: Federal Cost: Kathy Ruffing (DI and SSI), Jeanne De Sa and Dorothy Rosenbaum (Medicare and Medicaid), and Noah Meyerson (Social Security receipts). Impact on State, Local, and Tribal Governments: Leo Lex.) Impact on the Private Sector: Sandra Christensen.

Estimate approved by: Paul N. Van de Water, Assistant Director for Budget Analysis.

FEDERAL MANDATES STATEMENT

The Committee adopts as its own the estimate of Federal mandates prepared by the Director of the Congressional Budget Office pursuant to section 423 of the Unfunded Mandates Reform Act.

ADVISORY COMMITTEE STATEMENT

Section 201(f) of the bill establishes the Work Incentives Advisory Panel to advise the Commissioner of the Social Security Administration, the Secretaries of Health and Human Services, Labor, and Education on issues related to work incentives programs, planning, and assistance for individuals with disabilities. In addition, the Panel would advise the Commissioner on implementation of the Ticket to Work and Self-Sufficiency Program including establishment of phase-in sites, research and demonstrations related to the program, and development of performance measures. Pursuant to the requirements of subsection 5(b) of the Federal Advisory Committee Act, the Committee finds that the functions of the proposed advisory committee are not and cannot be performed by an existing Federal agency or advisory commission or by enlarging the mandate of an existing advisory committee.

CONSTITUTIONAL AUTHORITY STATEMENT

Pursuant to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, the Committee finds that the Constitutional authority for this legislation is provided in Article I, section 8, clause 3, which grants Congress the power to regulate commerce with foreign nations, among the several States, and with the Indian tribes.

APPLICABILITY TO LEGISLATIVE BRANCH

The Committee finds that the legislation does not relate to the terms and conditions of employment or access to public services or accommodations within the meaning of section 102(b)(3) of the Congressional Accountability Act.

SECTION-BY-SECTION ANALYSIS OF THE LEGISLATION

Sec. 1. Short title; table of contents

Section 1 provides the short title of the legislation, the “Work Incentives Improvement Act of 1999.” The section also contains the table of contents for the bill.

Sec. 2. Findings and purposes

Section 2(a) sets forth various congressional findings and the purposes of the Act.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under the Medicaid program for workers with disabilities

Section 101(a) provides that, for purposes of Medicaid eligibility, States would be able to establish more liberal income and resource limits than are currently required for certain individuals with dis-

abilities. They would have the option to establish one or two new Medicaid eligibility categories.

First, States would have the option to cover persons with disabilities who would be eligible for SSI, except for earned income that exceeds the SSI limits. States may establish limits on assets, resources, and earned or unearned income that differ from the Federal requirements. This means that income levels set by the State could exceed 250 percent of the Federal poverty level (as provided by BBA 97) and resources levels could exceed \$2,000 for individuals, and \$3,000 for couples; and the \$20 exclusion or disregard of monthly unearned income could be increased.

Second, if States provide Medicaid coverage to individuals described above, they may also provide coverage to individuals with disabilities, aged 16–64, who are employed and who cease to be eligible for Medicaid under the option above because their medical condition has improved, but who continue to have a severe medically determinable impairment. Individuals would be considered to be employed if they earn at least the Federal minimum wage, and work at least 40 hours per month, or are engaged in work that meets reasonable and substantial criteria for work hours, wages, or other measures established by the State and approved by the Secretary of the Department of Health and Human Services (HHS).

Individuals covered under these options could be required by States to “buy into” Medicaid coverage by paying premiums or other cost-sharing charges on a sliding fee scale based on an individual’s income as established by the State. The State would be required to make premium or other cost-sharing charges the same for both these two new optional eligibility groups. In addition, a State may require individuals with income above 250 percent of the Federal poverty level to pay the full premium cost.

Section 101(b) makes conforming amendments.

Federal funds may be paid to a State for Medicaid coverage of these new eligibility groups as long as the State maintains the same level of expenditures to assist disabled persons to work (other than medical assistance) as in the year prior to enactment.

Section 101(c) provides an effective date that would apply to medical assistance for items and services furnished on or after October 1, 1999.

Sec. 102. Continuation of Medicare coverage for working individuals with disabilities

Section 102(a) provides that during the ten-year period following enactment of the bill, disabled Social Security beneficiaries who engage in substantial gainful activity would receive free Medicare Part A coverage. In addition, Medicare Part A coverage could continue after the termination of the ten-year period for any individual who is enrolled in the Medicare Part A program for the month that ends the initial 10-year period, without requiring the beneficiaries to pay the premium.

Section 102(b) requires the General Accounting Office (GAO) to submit a report to Congress no later than 8 years after enactment of the bill that would examine the effectiveness and cost of extending Medicare Part A coverage to working disabled persons without charging them a premium. The report also requires GAO to rec-

commend whether the Medicare coverage extension should continue beyond the initial 10-year period provided under the bill.

Section 102(c) provides that the effective date for the amendments made by this section are required to apply to months beginning with the first month that begins after the date of enactment.

Section 102(d) provides that disabled individuals who had been enrolled in Medicare Part A, and continue to have a disabling physical or mental impairment, but whose entitlement to SSDI benefits ended solely because of earnings exceeding the substantial gainful activity amount, are required to be treated with respect to premium payment obligations under Medicare Part A as though such individuals had continued to be entitled to SSDI benefits.

Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities

Section 103(a) requires HHS to award grants to States to design, establish, and operate supportive infrastructures that provide items and services to support working individuals with disabilities, and to conduct outreach campaigns to inform them about the infrastructures. States would be eligible for these grants under the following conditions: (1) they must provide Medicaid coverage to the first proposed eligibility category discussed above (i.e., persons whose income exceeds 250 percent of the Federal poverty guidelines, and meets resource, assets, and earned or unearned income limits set by the State); and (2) they must provide personal assistance services to assist individuals eligible under the bill to remain employed (that is, earn at least the Federal minimum wage and work at least 40 hours per month, or engage in work that meets criteria for work hours, wages, or other measures established by the State and approved by HHS). Personal assistance services refers to a range of services, provided by one or more persons, to assist individuals with a disability perform daily activities on and off the job. These services would be designed to increase individuals' control in life and ability to perform daily activities on or off the job.

Section 103(b) of the bill requires HHS to develop a formula for the award of infrastructure grants. The formula would provide special consideration to States that extend Medicaid coverage to persons who cease to be eligible for SSI because of an improvement in their medical condition, but who have a severe medically determinable impairment, and who are employed.

Grant amounts to States would be a minimum of at least \$500,000 per year. They may be up to a maximum amount of 15 percent of Federal and State Medicaid expenditures for individuals eligible under one or both of the new eligibility groups described above, whichever is greater. If insufficient funds are appropriated to pay States the minimum grant amount, the Secretary of Health and Human Services (the Secretary) would be required to pay States a pro rata amount.

Section 103(c) of the bill provides that funds awarded to a State under a grant for a fiscal year are required to remain available until expended. Funds not awarded to States in the fiscal year for which they are appropriated are required to remain available in succeeding fiscal years for awarding by the Secretary.

Section 103(d) of the bill requires States to submit an annual report to the Secretary on the use of the grant funds. In addition, the report would be required to indicate the percent increase in the number of disabled Social Security and SSI beneficiaries who receive a ticket to work (as established under Title II of the bill) who return to work.

Section 103(e) of the bill authorizes appropriations in the following amounts:

- FY 2000, \$20 million;
- FY 2001, \$25 million;
- FY 2002, \$30 million;
- FY 2003, \$35 million;
- FY 2004, \$40 million, and
- FY 2005–FY 2010, the amount of appropriations for the preceding fiscal year plus the percent increase in the Consumer Price Index for All Urban Consumers for the preceding fiscal year.

The bill provides that this provision constitutes budget authority in advance of appropriations and represents the obligation of the Federal government to provide payment of the amounts appropriated.

Section 103(f) requires the Secretary of HHS, in consultation with the Work Incentives Advisory Panel established by the bill, to submit a recommendation, by October 1, 2009, to the Committee on Commerce in the House and the Committee on Finance in the Senate, on whether the grant program should be continued after FY 2010.

Sec. 104. Demonstration of coverage under the Medicaid program of workers with potentially severe disabilities

Section 104(a) allows States to apply to the Secretary for approval of a demonstration project under which a specified maximum number of individuals who are workers with a potentially severe disability are provided medical assistance equal to that provided under Medicaid for disabled persons age 16–64.

Section 104(b) defines a “worker with a potentially severe disability” as an individual, who is employed, age 16–64, and who has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected to meet SSI’s definition of blindness or disability if they did not receive Medicaid services. States’ definitions can include individuals with a potentially severe disability that can be traced to congenital birth defects as well as diseases developed in childhood or adulthood.

For purposes of the demonstration, individuals are considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, or are engaged in work that meets threshold criteria for work hours, wages, or other measures as defined by the demonstration project and approved by the Secretary.

Section 104(c) requires the Secretary to approve applications for the demonstration projects if the State meets the following requirements: (1) the State has elected to provide Medicaid coverage to persons who meet the more liberal income, resources, assets, and earned and unearned income tests as set by the State described in

Section 101 of the bill; (2) Federal funds are used to supplement State funds used for workers with potentially severe disabilities at the time the demonstration is approved; and (3) the State conducts an independent evaluation of the demonstration program. The bill permits the Secretary to approve demonstration programs that operate on a sub-State basis.

The bill authorizes appropriations of the following amounts:

- FY 2000, \$70 million;
- FY 2001, \$73 million;
- FY 2002, \$77 million; and,
- FY 2003, \$80 million.

The bill provides that this provision constitutes budget authority in advance of appropriations and represents the obligation of the Federal government to provide payment of the amounts appropriated.

Payments under this demonstration program could not exceed, in the aggregate, \$300 million. Payments may be provided to States only through FY 2005. The Secretary would be required to allocate funds to States based on their applications and the availability of funds. Funds awarded to States would equal their Federal medical assistance percentage (FMAP) of expenditures for medical assistance to workers with a potentially severe disability. Funds not allocated to States in the fiscal years in which they are appropriated will remain available in succeeding fiscal years.

Section 104(d) of the bill requires the Secretary to submit by no later than October 1, 2002, a recommendation to the House Commerce and Senate Finance Committees regarding whether the demonstration project established under this section should be continued after FY 2003.

Section 104(e) defines a State as having the meaning under Medicaid, which includes all 50 States, the District of Columbia, Puerto Rico, the Commonwealth of the Northern Mariana Islands, Guam, American Samoa, and the Virgin Islands.

Sec. 105. Election by disabled beneficiaries to suspend Medigap insurance when covered under a group health plan

Section 105(a) requires Medigap supplemental insurance plans to provide that benefits and premiums of such plans would be suspended at the request of the policyholder if the policyholder is entitled to Medicare Part A benefits as a disabled individual and is covered under a group health plan (offered by an employer with 20 or more employees). If the suspension occurs and the policyholder loses coverage under the group health plan, the Medigap policy is required to be automatically reinstated (as of the date of the loss of group coverage) if the policy holder provides notice of the loss of such coverage within 90 days of the date of losing group coverage.

Section 105(b) provides that the effective date for this provision is the date of enactment.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND
RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

*Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency
Program*

Section 201(a) of the bill establishes the Ticket to Work and Self-Sufficiency Program under Title XI of the Social Security Act. The bill requires the Commissioner of the Social Security Administration (SSA) (the Commissioner) to establish the program, under which “tickets to work” would be provided to disabled Social Security and SSI beneficiaries to obtain employment services, vocational rehabilitation (VR) services, or other support services provided by employment networks. Under the ticket system, the Commissioner is authorized to issue tickets to work to disabled beneficiaries for participation in the program, who would be permitted to assign the ticket to any employment network providing services under the program and willing to accept the assignment. The Commissioner would be required to pay the employment network for the services provided to beneficiaries under the payment systems provided by the bill. Employment networks would be prohibited from requesting or receiving compensation from the beneficiary.

The bill provides special rules for State VR agencies electing to participate in the program. Services provided by State VR agencies participating in the Ticket to Work and Self-Sufficiency Program would be governed by plans for VR services approved under Title I of the Rehabilitation Act of 1973, as amended. State VR agencies would not be required to accept referrals from employment networks unless they enter into an agreement with such employment network that specified the terms of reimbursement. If VR agencies elect to participate in the program, they may also elect to receive payment under the outcome payment system or the outcome milestone payment system established by the bill.

The bill requires the Commissioner to enter into agreements with one or more organizations in the private or public sector for service as a program manager to assist in administering the program. The selection of a program manager is required to be through a competitive bidding process, from among organizations in the private or public sector with expertise and experience in the field of vocational rehabilitation or employment services. Program managers would be precluded from direct participation in the delivery of employment, vocational rehabilitation, or other support services to beneficiaries in the area covered by the agreement. The agreements would also preclude a program manager from holding a financial interest in an employment network or service provider operating in a geographic area covered under the manager’s agreement. The Commissioner is required to terminate agreements with employment networks for inadequate performance, provide for periodic quality assurance review of employment networks, and establish a method for resolving disputes between beneficiaries and networks.

The bill requires program managers to conduct tasks appropriate to assist the Commissioner in administering the program, including

recruiting, and making recommendations for selection by the Commissioner, of employment networks for service under the program. Program managers would be required to facilitate access by beneficiaries to employment networks and ensure that beneficiaries would be allowed to change employment networks for good cause without being deemed to have rejected services under the program. Program managers would be required to establish and maintain lists of employment networks available to beneficiaries; ensure that adequate services are available to beneficiaries throughout the geographic area covered under the agreement, including rural areas; monitor activities of employment networks; and ensure that sufficient employment networks are available and that beneficiaries have reasonable access to services, including case management, work incentive planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and other services as specified by the Commissioner.

The bill requires that employment networks serving under the Ticket to Work and Self-Sufficiency Program consist of an agency or instrumentality of a State (or political subdivision thereof) or a private entity that assumes responsibility for the coordination and delivery of services under the program. An employment network could also consist of one-stop delivery systems established under Title I of the Workforce Investment Act of 1998.

The bill requires employment networks to have substantial expertise and experience in providing employment, vocational rehabilitation, or other support services for individuals with disabilities, and to demonstrate professional and educational qualifications in these services. Employment networks must ensure that services are provided to beneficiaries pursuant to appropriate individual work plans that are developed with beneficiaries.

The bill also requires employment networks to develop and implement individual work plans in partnership with beneficiaries in a manner that allows the beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal. The bill requires that each individual work plan must include: a statement of the vocational goal developed with the beneficiary; the services and supports and coordination necessary for the beneficiary to accomplish his/her vocational goal; a statement of any terms and conditions related to the provision of such services and supports to the beneficiary; a statement regarding the beneficiary's rights and responsibilities, including the right to retrieve the ticket to work if the beneficiary is dissatisfied with services provided by the employment network; and, remedies available to the individual, including information on availability of advocacy services and assistance in resolving disputes.

The bill requires payment be made to employment networks authorized by the Commissioner under either an outcome payment system or an outcome-milestone payment system. Each employment network would be required to elect which payment system would be used to determine the method of payment for services provided to beneficiaries.

The outcome payment system would provide payment to employment networks from funds that would have otherwise been paid to SSDI or SSI beneficiaries if they were not working. That is, employment networks would be paid up to 40 percent of the average monthly benefit for all disabled beneficiaries (either SSDI or SSI, whichever applies) in the preceding year, for each month (up to 60 months) that cash benefits are not being paid to ticket to work recipients who are engaged in substantial gainful activity, or who had earnings from work.

The outcome-milestone payment system is similar to the outcome payment system, except that it provides for early payment(s) based on the achievement of one or more milestones directed towards the goal of permanent employment. The total amount payable under the outcome-milestone payment system would be less than the total amount payable to a provider that would have been payable for an individual under the outcome payment system.

The bill requires the Commissioner to periodically review both payment systems, and if necessary, alter the percentages, milestones, or payment periods to ensure that employment networks have adequate incentives to assist beneficiaries into the workforce.

The bill prohibits the Commissioner from initiating continuing disability reviews (CDRs) for beneficiaries who are using tickets to work. A CDR is a process in which the disability status of current beneficiaries is reviewed to determine if they show medical improvement that would make them ineligible for benefits under the SSA definition of disability.

The bill requires that Federal funds to pay employment networks are to be made from the Federal OASI (for disabled dependents and survivors), or DI trust funds (for disabled workers), as appropriate, or from general revenue funds (for disabled SSI beneficiaries).

The bill requires that the Ticket to Work and Self-Sufficiency Program terminate five years after the Commissioner commences implementation of the program. It further provides that any individual who has initiated a work plan under the program prior to the termination date may use services provided under the program, and any employment network that provides services to such individual is required to receive payment for such services.

Section 201(b) provides conforming amendments to various sections of the Social Security Act, including the repeal of the provision that terminates SSDI and SSI cash benefits if a beneficiary refuses to accept State VR agency services.

Section 201(c) requires the effective date for Sections 201(a) and 201(b) of the bill to be the first month following 1 year after the date of enactment of the bill.

Section 201(d) requires that, not later than one year after enactment of the Ticket to Work and Self-Sufficiency Program, the Commissioner commence the implementation of the program in graduated phases at phase-in sites selected by the Commissioner. The Commissioner is required to ensure that the ability to provide tickets and services to individuals under the program exists in every State as soon as practicable on or after enactment, but no later than three years after enactment. The bill requires the Commissioner to conduct a series of evaluations to assess the cost-effective-

ness and effects of the program. The Commissioner's evaluation reports must be transmitted to the House Ways and Means and Senate Finance Committees following the close of the third, fifth, and seventh fiscal years after the program's effective date, and include a detailed evaluation of the program's progress, costs, and success.

Section 201(e) requires the Commissioner to prescribe regulations necessary to carry out the Ticket to Work and Self-Sufficiency Program not later than 1 year after enactment.

Section 201(f) establishes within the Social Security Administration a Work Incentives Advisory Panel consisting of experts representing consumers, providers of services, employers, and employees. The Panel is required to advise the Commissioner, the Secretaries of Health and Human Services, Labor, and Education on issues related to work incentives programs, planning, and assistance for individuals with disabilities. In addition, the Panel is to advise the Commissioner on implementation of the Ticket to Work and Self-Sufficiency Program, including establishment of phase-in sites, research and demonstrations related to the program, and development of performance measures.

Subtitle B—Elimination of Work Disincentives

Sec. 211. Work activity standard as a basis for review of an individual's disabled status

Section 211 of the bill provides that in any case in which an individual is entitled to Social Security disability benefits and has received Social Security benefits for at least two years—(1) the person shall not be the subject of a CDR solely because of the person's work activity; (2) no work activity by the person may be used as evidence that the person is no longer disabled; and (3) no cessation of work activity by the person may be used to presume that the person is unable to work. The bill clarifies that the individual in question is subject to (1) CDRs on a regularly scheduled basis if the CDR is not triggered by the person's work activity and (2) termination of Social Security benefits if the person has earnings that exceed the substantial gainful activity level.

Sec. 212. Expedited reinstatement of disability benefits

Section 212 provides that the following two groups of individuals may request reinstatement of those benefits without filing a new disability application: (1) an individual whose entitlement to SSDI benefits had been terminated on the basis of work activity following completion of an extended period of eligibility or (2) an individual whose eligibility for SSI benefits (including Section 1619(b) of the Social Security Act) had been terminated following suspension of those benefits for 12 consecutive months because of excess income resulting from work activity. The individual must have become unable to continue working on the basis of his or her medical condition and must file a reinstatement request within the 60-month period following the month of such termination.

While the Commissioner is making a determination of a reinstatement request, the individual will be eligible for provisional benefits (cash benefits and Medicare or Medicaid, as appropriate) for a period of not more than six months. If the Commissioner

makes a favorable determination, such individual's prior entitlement to benefits would be reinstated, as would be the prior benefits of his or her dependents who continue to meet the entitlement criteria.

The bill provides an effective date for the amendments made by this section of the first day of the thirteenth month after the date of enactment.

Subtitle C—Work Incentives, Planning, Assistance, and Outreach

Sec. 221. Work incentives outreach program

Section 221 requires the Commissioner of Social Security, in consultation with the proposed Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

The bill directs the Commissioner to establish a competitive program of grants, cooperative agreements, or contracts to provide benefit planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including persons participating in the Ticket to Work and Self-Sufficiency Program, the SSI Section 1619 program, and other programs that are designed to encourage disabled beneficiaries to work.

The bill requires the Commissioner to conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and their families) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work. The outreach efforts are to include (1) preparing and issuing information explaining work incentive programs and (2) cooperating with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling.

The bill requires the Commissioner to establish a group of trained, accessible, and responsive work incentives specialists within SSA who will focus on disability work incentives under the Social Security and SSI programs for the purpose of dispensing accurate information with respect to inquiries and issues relating to work incentives to (1) disabled beneficiaries, (2) Social Security and SSI applicants, and (3) individuals or entities awarded grants to provide benefits planning and assistance or outreach services. Since some beneficiaries attempt work without receiving rehabilitation services, work incentive information would be available to all beneficiaries, not just those participating in the Ticket to Work and Self-Sufficiency Program.

The bill requires the Commissioner to provide (1) training for the work incentive specialists and the individuals providing benefits planning assistance and (2) technical assistance to organizations and entities whose purpose is to encourage disabled beneficiaries to return to work.

The bill specifies responsibilities of the Commissioner (mentioned above) are to be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries, including the SSI Section 1619 program, the plan for achieving self-support program (PASS), and any other Federal or State work incentive programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, and transition services programs.

An application for a grant, cooperative agreement, or contract to provide benefits planning and assistance must be submitted to the SSA Commissioner. The Commissioner may award a grant, cooperative agreement, or contract to a State or a private agency or organization, except for SSA field offices and the agency administering the Medicaid program or any entity that might be subject to a conflict of interest. Eligible organizations may include Centers for Independent Living, protection and advocacy organizations, and client assistance programs (established in accordance with the Rehabilitation Act of 1973, as amended); State Developmental Disabilities Councils (established in accordance with the Developmental Disabilities Assistance and Bill of Rights Act); and State welfare agencies (funded under Title IV–A of the Social Security Act).

Recipients of an award must select individuals to provide information, guidance, and planning to disabled beneficiaries concerning the (1) availability and interrelationship of any Federal or State work incentives programs for which the individual may qualify, (2) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual, and (3) availability of protection and advocacy services for disabled beneficiaries and how to access such services. The Commissioner must ensure that information, planning, and assistance provided be available on a statewide basis.

The bill requires the Commissioner of Social Security to award a grant, cooperative agreement, or contract to an entity based on the percentage of disabled beneficiaries in the State who live in the applicant entity's locale. The maximum amount permitted for a grant, cooperative agreement, or contract is \$300,000 and the minimum is \$50,000. The bill limits the total amount for a fiscal year to \$23 million.

Sec. 222. State grants for work incentives assistance to disabled beneficiaries

Section 222 of the bill authorizes the Commissioner of Social Security to award grants to State protection and advocacy systems authorized by the Developmental Disabilities Assistance and Bill of Rights Act. These grants would be in addition to the current program grants. The purpose of the grants is to provide information and advice about obtaining vocational rehabilitation, employment, advocacy, or other services that disabled SSDI or SSI beneficiaries may need to secure or regain gainful employment.

The bill provides that a protection and advocacy system must be funded at least at a level the greater of \$100,000, or one-third of

one percent of the appropriation. Grants to certain territories would be at least \$50,000. The minimum payments may be increased to reflect an inflation adjustment in certain circumstances. The bill limits appropriations for the program to \$7 million in FY 2000, and such sums as needed thereafter.

Each protection and advocacy system that receives a grant must submit an annual report to the Commissioner of Social Security and the Work Incentives Advisory Panel on the services provided to individuals by the system.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Permanent extension of disability insurance program demonstration project authority

Section 301 permanently extends SSA's Social Security demonstration project authority. Section 301 also adds another purpose to experiments and demonstration projects. Namely, they may be designed to determine the advantages and disadvantages of the following: implementing a sliding scale benefit offsets procedure using variations in the amount of the offset as a proportion of earned income; changing the duration of the offset period; revising the method of determining the amount of income earned by the beneficiaries; using state-of-the-art information technology and electronic funds transfer technology to streamline the reporting of data and the implementation of the offset; and developing and making available to beneficiaries, their families, guardians, and advocates, information through the Internet on work incentives and assistance so that beneficiaries may make informed decisions regarding work.

The bill also permits the Commissioner to expand the scope of the demonstration projects to include applicants as well as beneficiaries.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings

Section 302 requires the Commissioner to conduct demonstration projects for the purpose of evaluating a program for disabled Social Security beneficiaries under which the beneficiary's benefit is reduced \$1 for every \$2 of earned income above an amount specified by the Commissioner. The demonstration projects would be conducted at a number of localities which the Commissioner determines is sufficient to adequately evaluate the appropriateness of national implementation of such a program. The demonstration projects would identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

The bill requires the demonstration projects to be sufficient in scope and scale to determine: (1) the effects, if any, of induced entry into the project and reduced exit from the project; (2) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the proposed Ticket to Work and Self-Sufficiency Program; and (3) the savings, if any, that accrue to the Social Security trust funds, and other Federal programs. The Commissioner must take into account services provided by the Work Incentives Advisory

Panel in determining the scope and scale of the demonstration projects.

Under the bill, the Commissioner also must determine: (1) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project; (2) the determinants of return-to-work activities, including the characteristics of the beneficiaries who participate in the project; and (3) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of their participation in the demonstration project.

The bill permits the Commissioner to evaluate the merits of trial work periods and periods of extended eligibility.

The Commissioner may waive compliance with Title II (Social Security) law and the Secretary of HHS may waive compliance with the benefit requirements of Title XVIII (Medicare) law, insofar as necessary for a thorough evaluation of the alternative methods under consideration. The Commissioner is required to submit a description of the demonstration project along with notification of its pending operation to the House Ways and Means and Senate Finance Committees at least 90 days before the project is implemented.

The Commissioner is required to submit to Congress an interim report on the progress of the demonstration projects not later than two years after the date of enactment, and annually thereafter. The Commissioner is required to submit to Congress a final report on all of the demonstration projects not later than one year after their completion.

The bill provides that expenditures for the demonstration projects are to come from the DI or OASI trust funds, as determined appropriate by the Commissioner, and from the Hospital Insurance (HI) or Supplementary Medical Insurance (SMI) trust funds, as determined appropriate by the HHS Secretary, to the extent provided in advance in appropriation Acts.

Sec. 303. Studies and reports

Section 303 requires GAO to undertake three studies. The first requires GAO to study existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 and other Federal laws. The study must address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities. The report must be submitted to the House Ways and Means and Senate Finance Committees no later than three years after enactment.

The second study requires GAO to evaluate the coordination of the Social Security and SSI programs as it relates to disabled individuals entering or leaving concurrent entitlement under such programs. The study must address the effectiveness of work incentives under these programs with respect to the effectiveness of coverage of such disabled Social Security beneficiaries. The report must be submitted to the House Ways and Means and Senate Finance Committees no later than three years after enactment.

The third study requires GAO to undertake a study of the substantial gainful activity level currently applicable to disabled Social

Security and SSI beneficiaries, and the effect of such levels as disincentives for those recipients to return to work. The study must address the merits of increasing the substantial gainful activity level applicable to such beneficiaries and the rationale for not annually indexing that level for inflation. The report must be transmitted to the House Ways and Means and Senate Finance Committees no later than two years after enactment.

The bill also directs the Commissioner of Social Security to identify all income, assets, and resource disregards under Title II (Social Security) and Title XVI (SSI); specify the most recent statutory or regulatory change in each disregard and recommend whether further statutory or regulatory modification is appropriate; and report certain additional information and recommendations on disregards related to grants, scholarships, or fellowships used in attending any educational institution. The report is to be submitted within 90 days of enactment of the bill to the House Ways and Means and Senate Finance Committees.

TITLE IV—TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics

Section 401 clarifies that the meaning of the term “final adjudication” includes a pending request for administrative or judicial review or a pending readjudication pursuant to a class action or court remand. (There has been at least one court case construing the meaning of “final adjudication.”) The bill clarifies that if the Commissioner does not perform the entitlement redetermination before January 1, 1997, an entitlement redetermination must be performed instead of a continuing disability review.

The bill also corrects an anomaly that currently excludes all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, from the requirement that a representative payee be appointed and that the recipient be referred for treatment.

The amendments made by this section are to take effect as if included in the enactment of section 105 of P.L. 104–121.

Sec. 402. Treatment of prisoners

Section 402(a) establishes analogous incentive payment provisions to correctional facilities that currently pertain to SSI recipients to Social Security beneficiaries (both disabled and elderly). This incentive payment program is identical to that now operating under the SSI program pursuant to P.L. 104–193. Under the incentive payment program, the Commissioner is to enter into an agreement with State and local correctional institutions to provide monthly reports which list the names, Social Security numbers, confinement date, dates of birth, and other identifying information regarding prisoners who receive Social Security benefits. Certain requirements for computer matching agreements do not apply. For each eligible individual who becomes ineligible as a result, the Commissioner pays the institution an amount up to \$400 if the information is provided within 30 days of incarceration, and up to

\$200 if the information is provided after 30 days but within 90 days.

The bill reduces payments to correctional institutions by 50 percent for multiple reports on the same individual who receives both SSI and Social Security benefits. Payments made to correctional institutions are to be made from OASI or DI trust funds, as appropriate.

The bill expands the categories of institutions eligible to enter into agreements with the Commissioner. It provides that the Commissioner shall enter into an agreement with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine prisoners.

The bill also authorizes the Commissioner of Social Security to provide, on a reimbursable basis, information obtained pursuant to the agreements to any Federal or Federally-assisted cash, food, or medical assistance program for eligibility purposes.

The bill provides that the effective date for the amendments made by this subsection are required to apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month of enactment.

Section 402(b) of the bill prohibits Social Security payments to any person convicted of a criminal offense for any month throughout which he or she has been an inmate in a jail, prison, or other penal institution, or correctional facility.

The bill provides that the effective date for the amendments made by this subsection are required to apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month of enactment.

Section 402(c) of the bill provides conforming amendments to SSI law to ensure that payments to correctional institutions are reduced by 50 percent for multiple reports on the same individual who receives both SSI and SSDI benefits. It also expands the categories of institutions eligible to enter into agreements with the Commissioner.

The bill provides that the effective date for the amendments made by this subsection are required to take effect as if included in the enactment of Section 203(a) of P.L. 104-193.

Section 402(d) prohibits Social Security payments to sex offenders who, on completion of a prison term, remain confined in a public institution pursuant to a court finding that they continue to be sexually dangerous to others.

The bill provides that the effective date for the amendments made by this subsection are required to apply with respect to benefits for months ending after the date of enactment.

Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage

Section 403(a) of the bill provides a two-year "open season," beginning January 1, 1999, for members of the clergy who want to revoke their exemption from Social Security. The decision to join Social Security would be irrevocable. A member of the clergy choos-

ing such coverage becomes subject to self-employment taxes and his or her subsequent earnings are credited for Social Security (and Medicare) benefit purposes. H.R. 1180 would give clergy a limited opportunity to enroll in the Social Security system, similar to those opportunities provided by Congress in 1977 and 1986.

Section 403(b) of the bill provides that the effective date for the amendments made by this section are required to apply with respect to service performed in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under Title II of the Social Security Act on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual's application for revocation is effective.

Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI

Section 404(a) of the bill includes a technical amendment that adds the Title II program to a reference regarding "any jointly financed cooperative agreement or grant concerning Title XVI."

Section 404(b) of the bill provides that the effective date for the amendments made by this section are required to take effect as if included in the enactment of P.L. 103-296.

Sec. 405. Authorization for State to permit annual wage reports

Section 405 of the bill provides that in the case of wage reports with respect to domestic service employment, a State may permit employers that make returns with respect to such employment on a calendar year basis to make such reports on an annual basis.

The bill provides that the effective date for the amendments made by this section are required to apply to wage reports required to be submitted on and after the date of enactment.

CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

The bill was referred to this committee for consideration of such provisions of the bill as fall within the jurisdiction of this committee pursuant to clause 2 of rule XII of the Rules of the House of Representatives. In compliance with clause 3(e) of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported by this committee, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

SOCIAL SECURITY ACT

* * * * *

**TITLE II—FEDERAL OLD-AGE, SURVIVORS, AND
DISABILITY INSURANCE BENEFITS**

* * * * *

ENTITLEMENT TO HOSPITAL INSURANCE BENEFITS

SEC. 226. (a) * * *

(b) Every individual who—

(1) * * *

* * * * *

shall be entitled to hospital insurance benefits under part A of title XVIII for each month beginning with the later of (I) July 1973 or (II) the twenty-fifth month of his entitlement or status as a qualified railroad retirement beneficiary described in paragraph (2), and ending (subject to the last sentence of this subsection) with the month following the month in which notice of termination of such entitlement to benefits or status as a qualified railroad retirement beneficiary described in paragraph (2) is mailed to him, or if earlier, with the month before the month in which he attains age 65. In applying the previous sentence in the case of an individual described in paragraph (2)(C), the "twenty-fifth month of his entitlement" refers to the first month after the twenty-fourth month of entitlement to specified benefits referred to in paragraph (2)(C) and "notice of termination of such entitlement" refers to a notice that the individual would no longer be determined to be entitled to such specified benefits under the conditions described in that paragraph. For purposes of this subsection, an individual who has had a period of trial work which ended as provided in section 222(c)(4)(A), and whose entitlement to benefits or status as a qualified railroad retirement beneficiary as described in paragraph (2) has subsequently terminated, shall be deemed to be entitled to such benefits or to occupy such status (notwithstanding the termination of such entitlement or status) for the period of consecutive months throughout all of which the physical or mental impairment, on which such entitlement or status was based, continues, and throughout all of which such individual would have been entitled to monthly insurance benefits under title II or as a qualified railroad retirement beneficiary had such individual been unable to engage in substantial gainful activity, but not in excess of 24 such months, *except as provided in subsection (j)*. In determining when an individual's entitlement or status terminates for purposes of the preceding sentence, the term "36 months" in the second sentence of section 223(a)(1), in section 202(d)(1)(G)(i), in the last sentence of section 202(e)(1), and in the last sentence of section 202(f)(1) shall be applied as though it read "15 months".

* * * * *

(j) The 24-month limitation on deemed entitlement under the third sentence of subsection (b) shall not apply—

(1) for months occurring during the 10-year period beginning with the first month that begins after the date of enactment of this subsection; and

(2) for subsequent months, in the case of an individual who was entitled to benefits under subsection (b) as of the last month of such 10-year period and would continue (but for such 24-month limitation) to be so entitled.

* * * * *

TITLE XVIII—HEALTH INSURANCE FOR THE AGED AND DISABLED

* * * * *

PART A—HOSPITAL INSURANCE BENEFITS FOR THE AGED AND
DISABLED

* * * * *

HOSPITAL INSURANCE BENEFITS FOR DISABLED INDIVIDUALS WHO
HAVE EXHAUSTED OTHER ENTITLEMENT

SEC. 1818A. (a) Every individual who—
(1) has not attained the age of 65;
(2)(A) has been entitled to benefits under this part under
section 226(b), and

* * * * *

(C) whose entitlement under section 226(b) ends due **[solely]**
to the individual having earnings that exceed the substantial
gainful activity amount (as defined in section 223(d)(4)) *or the*
expiration of the last month of the 10-year period described in
section 226(j); and

* * * * *

PART D—MISCELLANEOUS PROVISIONS

* * * * *

CERTIFICATION OF MEDICARE SUPPLEMENTAL HEALTH INSURANCE
POLICIES

SEC. 1882. (a) * * *

* * * * *

(q) The requirements of this subsection are as follows:

(1) * * *

* * * * *

(5)(A) Each medicare supplemental policy shall provide that
benefits and premiums under the policy shall be suspended at
the request of the policyholder for the period (not to exceed 24
months) in which the policyholder has applied for and is deter-
mined to be entitled to medical assistance under title XIX, but
only if the policyholder notifies the issuer of such policy within
90 days after the date the individual becomes entitled to such
assistance. If such suspension occurs and if the policyholder or
certificate holder loses entitlement to such medical assistance,
such policy shall be automatically reinstated (effective as of
the date of termination of such entitlement) under terms de-
scribed in subsection (n)(6)(A)(ii) as of the termination of such
entitlement if the policyholder provides notice of loss of such
entitlement within 90 days after the date of such loss.

* * * * *

(C) Any person who issues a medicare supplemental policy
and fails to comply with the requirements of this paragraph *or*
paragraph (6) is subject to a civil money penalty of not to ex-
ceed \$25,000 for each such violation. The provisions of section
1128A (other than the first sentence of subsection (a) and other
than subsection (b)) shall apply to a civil money penalty under

the previous sentence in the same manner as such provisions apply to a penalty or proceeding under section 1128A(a).

(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss.

* * * * *

TITLE XIX—GRANTS TO STATES FOR MEDICAL ASSISTANCE PROGRAMS

* * * * *

STATE PLANS FOR MEDICAL ASSISTANCE

SEC. 1902. (a) A State plan for medical assistance must—

(1) * * *

* * * * *

(10) provide—

(A) for making medical assistance available, including at least the care and services listed in paragraphs (1) through (5), (17) and (21) of section 1905(a), to—

(i) all individuals—

(ii) at the option of the State, to any group or groups of individuals described in section 1905(a) (or, in the case of individuals described in section 1905(a)(i), to any reasonable categories of such individuals) who are not individuals described in clause (i) of this subparagraph but—

(I) * * *

* * * * *

(XIII) who are in families whose income is less than 250 percent of the income official poverty line (as defined by the Office of Management and Budget, and revised annually in accordance with section 673(2) of the Omnibus Budget Reconciliation Act of 1981) applicable to a family of the size involved, and who but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income (subject, notwithstanding section 1916, to payment of premiums or other cost-sharing charges (set on a sliding scale based on income) that the State may determine); **[or]**

(XIV) who are optional targeted low-income children described in section 1905(u)(2)(C);

(XV) who, but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income, who is at least 16, but less than 65, years of age, and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish; or

(XVI) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XV);

* * * * *

PAYMENT TO STATES

SEC. 1903. (a) * * *

* * * * *

(f)(1) * * *

* * * * *

(4) The limitations on payment imposed by the preceding provisions of this subsection shall not apply with respect to any amount expended by a State as medical assistance for any individual described in section 1902(a)(10)(A)(i)(III), 1902(a)(10)(A)(i)(IV), 1902(a)(10)(A)(i)(V), 1902(a)(10)(A)(i)(VI), 1902(a)(10)(A)(i)(VII), 1902(a)(10)(A)(ii)(IX), 1902(a)(10)(A)(ii)(X), 1902(a)(10)(A)(ii)(XIII), 1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI), 1905(p)(1), or 1905(u) or for any individual—

(A) * * *

* * * * *

(i) Payment under the preceding provisions of this section shall not be made—

(1) * * *

* * * * *

(18) with respect to any amount expended for home health care services provided by an agency or organization unless the agency or organization provides the State agency on a continuing basis a surety bond in a form specified by the Secretary under paragraph (7) of section 1861(o) and in an amount that is not less than \$50,000 or such comparable surety bond as the Secretary may permit under the last sentence of such section [1]; or

(19) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended

for such programs during the most recent State fiscal year ending before the date of enactment of this paragraph.

* * * * *

DEFINITIONS

SEC. 1905. For purposes of this title—

(a) The term “medical assistance” means payment of part or all of the cost of the following care and services (if provided in or after the third month before the month in which the recipient makes application for assistance or, in the case of medicare cost-sharing with respect to a qualified medicare beneficiary described in subsection (p)(1), if provided after the month in which the individual becomes such a beneficiary) for individuals, and, with respect to physicians’ or dentists’ services, at the option of the State, to individuals (other than individuals with respect to whom there is being paid, or who are eligible, or would be eligible if they were not in a medical institution, to have paid with respect to them a State supplementary payment and are eligible for medical assistance equal in amount, duration, and scope to the medical assistance made available to individuals described in section 1902(a)(10)(A)) not receiving aid or assistance under any plan of the State approved under title I, X, XIV, or XVI, or part A of title IV, and with respect to whom supplemental security income benefits are not being paid under title XVI, who are—

(i) * * *

* * * * *

(x) individuals described in section 1902(u)(1), **[or]**

(xi) individuals described in section 1902(z)(1), *or*

(xii) *employed individuals with a medically improved disability (as defined in subsection (v)),*

but whose income and resources are insufficient to meet all of such cost—

(1) inpatient hospital services (other than services in an institution for mental diseases);

* * * * *

(v)(1) *The term “employed individual with a medically improved disability” means an individual who—*

(A) *is at least 16, but less than 65, years of age;*

(B) *is employed (as defined in paragraph (2));*

(C) *ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XV) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and*

(D) *continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.*

(2) *For purposes of paragraph (1), an individual is considered to be “employed” if the individual—*

(A) *is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or*

(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.

* * * * *

USE OF ENROLLMENT FEES, PREMIUMS, DEDUCTIONS, COST SHARING,
AND SIMILAR CHARGES

SEC. 1916. (a) **【The State plan】** *Subject to subsection (g), the State plan shall provide that in the case of individuals described in subparagraph (A) or (E)(i) of section 1902(a)(10) who are eligible under the plan—*

(1) * * *

* * * * *

(g) With respect to individuals provided medical assistance only under subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii), a State may (in a uniform manner for individuals described in either such subclause)—

(1) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and

(2) require payment of 100 percent of such premiums in the case of such an individual who has income that exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved.

* * * * *



The SPEAKER pro tempore. Is there objection to the request of the gentleman from New York?

There was no objection.

MESSAGE FROM THE PRESIDENT

A message in writing from the President of the United States was communicated to the House by Mr. Sherman Williams, one of his secretaries.

TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999

Mr. ARCHER. Mr. Speaker, I move to suspend the rules and pass the bill (H.R. 1180) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes, as amended.

The Clerk read as follows:

H.R. 1180

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Ticket to Work and Work Incentives Improvement Act of 1999".

(b) TABLE OF CONTENTS.—The table of contents is as follows:

Sec. 1. Short title; table of contents.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 111. Work activity standard as a basis for review of an individual's disabled status.

Sec. 112. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 121. Work incentives outreach program.

Sec. 122. State grants for work incentives assistance to disabled beneficiaries.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 201. Expanding State options under the medicaid program for workers with disabilities.

Sec. 202. Extending medicare coverage for OASDI disability benefit recipients.

Sec. 203. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 204. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.

Sec. 205. Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Extension of disability insurance program demonstration project authority.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics.

Sec. 402. Treatment of prisoners.

Sec. 403. Revocation by members of the clergy of exemption from social security coverage.

Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.

Sec. 405. Authorization for State to permit annual wage reports.

Sec. 406. Assessment on attorneys who receive their fees via the Social Security Administration.

Sec. 407. Prevention of fraud and abuse associated with certain payments under the medicaid program. Extension of authority of State medicaid fraud control units.

Sec. 408. Extension of authority of State medicaid fraud control units.

Sec. 409. Special allowance adjustment for student loans.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) IN GENERAL.—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding after section 1147 (as added by section 8 of the Noncitizen Benefit Clarification and Other Technical Amendments Act of 1998 (Public Law 105-306; 112 Stat. 2928)) the following:

"THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

"SEC. 1148. (a) IN GENERAL.—The Commissioner of Social Security shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary's choice and which is willing to provide such services to such beneficiary.

"(b) TICKET SYSTEM.—

"(1) DISTRIBUTION OF TICKETS.—The Commissioner of Social Security may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

"(2) ASSIGNMENT OF TICKETS.—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary's choice which is serving under the Program and is willing to accept the assignment.

"(3) TICKET TERMS.—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner's agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the

employment network may provide to the beneficiary.

"(4) PAYMENTS TO EMPLOYMENT NETWORKS.—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

"(c) STATE PARTICIPATION.—

"(1) IN GENERAL.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 may elect to participate in the Program as an employment network with respect to a disabled beneficiary. If the State agency does elect to participate in the Program, the State agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system in accordance with subsection (h)(1). With respect to a disabled beneficiary that the State agency does not elect to have participate in the Program, the State agency shall be paid for services provided to that beneficiary under the system for payment applicable under section 222(d) and subsections (d) and (e) of section 1615. The Commissioner shall provide for periodic opportunities for exercising such elections.

"(2) EFFECT OF PARTICIPATION BY STATE AGENCY.—

"(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under that paragraph to participate in the Program, the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973.

"(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

"(3) AGREEMENTS BETWEEN STATE AGENCIES AND EMPLOYMENT NETWORKS.—State agencies and employment networks shall enter into agreements regarding the conditions under which services will be provided when an individual is referred by an employment network to a State agency for services. The Commissioner of Social Security shall establish by regulations the timeframe within which such agreements must be entered into and the mechanisms for dispute resolution between State agencies and employment networks with respect to such agreements.

"(d) RESPONSIBILITIES OF THE COMMISSIONER OF SOCIAL SECURITY.—

"(1) SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.—The Commissioner of Social Security shall enter into agreements with 1 or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

"(2) TENURE, RENEWAL, AND EARLY TERMINATION.—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior

terms. Such performance standards shall include—

“(A) measures for ease of access by beneficiaries to services; and

“(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement; and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) SELECTION OF EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(B) ALTERNATE PARTICIPANTS.—In any State where the Program is being implemented, the Commissioner shall enter into an agreement with any alternate participant that is operating under the authority of section 222(d)(2) in the State as of the date of enactment of this section and chooses to serve as an employment network under the Program.

“(5) TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) QUALITY ASSURANCE.—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall solicit and consider the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure that the periodic surveys of beneficiaries receiving services under the Program are designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Pro-

gram in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks without being deemed to have rejected services under the Program. When such a change occurs, the program manager shall reassign the ticket based on the choice of the beneficiary. Upon the request of the employment network, the program manager shall make a determination of the allocation of the outcome or milestone-outcome payments based on the services provided by each employment network. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible formats.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager’s agreement, including rural areas.

“(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Services provided under the Program may include case management, work incentives planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are available in each service area.

“(f) EMPLOYMENT NETWORKS.—

“(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, that assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b).

“(B) ONE-STOP DELIVERY SYSTEMS.—An employment network serving under the Program may consist of a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998.

“(C) COMPLIANCE WITH SELECTION CRITERIA.—No employment network may serve under the Program unless it meets and maintains compliance with both general selection criteria (such as professional and educational qualifications, where applicable) and specific selection criteria (such as substantial expertise and experience in providing relevant employment services and supports).

“(D) SINGLE OR ASSOCIATED PROVIDERS ALLOWED.—An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

“(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

“(A) serve prescribed service areas; and

“(B) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans meeting the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) REQUIREMENTS.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subparagraph (C);

“(B) develop and implement each such individual work plan, in partnership with each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal;

“(C) ensure that each individual work plan includes at least—

“(i) a statement of the vocational goal developed with the beneficiary, including, as appropriate, goals for earnings and job advancement;

“(ii) a statement of the services and supports that have been deemed necessary for the beneficiary to accomplish that goal;

“(iii) a statement of any terms and conditions related to the provision of such services and supports; and

“(iv) a statement of understanding regarding the beneficiary’s rights under the Program (such as the right to retrieve the ticket to work and self-sufficiency if the beneficiary is dissatisfied with the services being provided by the employment network) and remedies available to the individual, including information on the availability of advocacy services and assistance in resolving disputes through the State grant program authorized under section 1150;

“(D) provide a beneficiary the opportunity to amend the individual work plan if a change in circumstances necessitates a change in the plan; and

“(E) make each beneficiary’s individual work plan available to the beneficiary in, as appropriate, an accessible format chosen by the beneficiary.

“(2) EFFECTIVE UPON WRITTEN APPROVAL.—A beneficiary’s individual work plan shall take effect upon written approval by the beneficiary or a representative of the beneficiary and a representative of the employment network that, in providing such written approval, acknowledges assignment of the beneficiary’s ticket to work and self-sufficiency.

“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

“(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

“(B) NO CHANGE IN METHOD OF PAYMENT FOR BENEFICIARIES WITH TICKETS ALREADY ASSIGNED TO THE EMPLOYMENT NETWORKS.—Any election of a payment system by an employment network that would result in a change in the method of payment to the employment network for services provided to a beneficiary who is receiving services from the employment network at the time of the election shall not be effective with respect to payment for services provided to that beneficiary and the method of payment previously selected shall continue to apply with respect to such services.

“(2) OUTCOME PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual’s outcome payment period, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual because of work or earnings.

“(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

“(i) the payment for each month during the outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation

base for the calendar year in which such month occurs; and

“(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

“(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.—The outcome-milestone payment system shall provide for 1 or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, that are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure that provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

“(C) LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

“(4) DEFINITIONS.—In this subsection:

“(A) PAYMENT CALCULATION BASE.—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year; and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained 18 years of age but have not attained 65 years of age.

“(B) OUTCOME PAYMENT PERIOD.—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity; and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and

such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNT OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, or other reliable sources.

“(C) REPORT ON THE ADEQUACY OF INCENTIVES.—The Commissioner shall submit to Congress not later than 36 months after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999 a report with recommendations for a method or methods to adjust payment rates under subparagraphs (A) and (B), that would ensure adequate incentives for the provision of services by employment networks of—

“(i) individuals with a need for ongoing support and services;

“(ii) individuals with a need for high-cost accommodations;

“(iii) individuals who earn a subminimum wage; and

“(iv) individuals who work and receive partial cash benefits.

The Commissioner shall consult with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 during the development and evaluation of the study. The Commissioner shall implement the necessary adjusted payment rates prior to full implementation of the Ticket to Work and Self-Sufficiency Program.

“(i) SUSPENSION OF DISABILITY REVIEWS.—During any period for which an individual is using, as defined by the Commissioner, a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) AUTHORIZATIONS.—

“(1) PAYMENTS TO EMPLOYMENT NETWORKS.—

“(A) TITLE II DISABILITY BENEFICIARIES.—There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums

as may be necessary to make payments to employment networks under this section. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund.

“(B) TITLE XVI DISABILITY BENEFICIARIES.—Amounts authorized to be appropriated to the Social Security Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

“(2) ADMINISTRATIVE EXPENSES.—The costs of administering this section (other than payments to employment networks) shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among such amounts as appropriate.

“(k) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(3) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(4) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

“(5) SUPPLEMENTAL SECURITY INCOME BENEFIT.—The term ‘supplemental security income benefit under title XVI’ means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

“(l) REGULATIONS.—Not later than 1 year after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999, the Commissioner shall prescribe such regulations as are necessary to carry out the provisions of this section.”

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(i) of the Social Security Act (42 U.S.C. 421(i)) is amended by adding at the end the following:

“(5) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”

(B) Section 222(a) of such Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of such Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of such Act (42 U.S.C. 425(b)(1)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under

section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of such Act (42 U.S.C. 1382d(a)) is amended to read as follows:

“SEC. 1615. (a) In the case of any blind or disabled individual who—

“(1) has not attained age 16; and

“(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.”

(B) Section 1615(c) of such Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of such Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(D) Section 1633(c) of such Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting “(1)” after “(c)”; and

(ii) by adding at the end the following:

“(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”

(c) EFFECTIVE DATE.—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following 1 year after the date of the enactment of this Act.

(d) GRADUATED IMPLEMENTATION OF PROGRAM.—

(1) IN GENERAL.—Not later than 1 year after the date of the enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) REQUIREMENTS.—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) FULL IMPLEMENTATION.—The Commissioner shall ensure that ability to provide tickets and services to individuals under the Program exists in every State as soon as practicable on or after the effective date specified in subsection (c) but not later than 3 years after such date.

(4) ONGOING EVALUATION OF PROGRAM.—

(A) IN GENERAL.—The Commissioner shall design and conduct a series of evaluations to assess the cost-effectiveness of activities carried out under this section and the amendments made thereby, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) CONSULTATION.—The Commissioner shall design and carry out the series of evaluations after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program and consulting with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f), the Comptroller General of the United States, other agencies of the Federal Government, and private organizations with appropriate expertise.

(C) METHODOLOGY.—

(i) IMPLEMENTATION.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f), shall ensure that plans for evaluations and data collection methods under the Program are appropriately designed to obtain detailed employment information.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to)—

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of individuals in possession of tickets under the Program who are not accepted for services and, to the extent reasonably determinable, the reasons for which such beneficiaries were not accepted for services;

(VII) the characteristics of providers whose services are provided within an employment network under the Program;

(VIII) the extent (if any) to which employment networks display a greater willingness to provide services to beneficiaries with a range of disabilities;

(IX) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome payment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(X) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(XI) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(D) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the

Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) for prompt referrals to a State agency; and

(ii) the authority of the Commissioner under section 222(d)(2) of the Social Security Act to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals, shall apply in such State.

(B) EXISTING AGREEMENTS.—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act before the date of the enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to services (if any) to be provided after 3 years after the effective date provided in subsection (c).

(e) SPECIFIC REGULATIONS REQUIRED.—

(1) IN GENERAL.—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.—The matters which shall be addressed in such regulations shall include—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1148(b)(1) of the Social Security Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program pursuant to section 1148(c)(1) of such Act and provision for periodic opportunities for exercising such elections;

(D) the status of State agencies under section 1148(c)(1) of such Act at the time that State agencies exercise elections under that section;

(E) the terms of agreements to be entered into with program managers pursuant to section 1148(d) of such Act, including—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1148(d)(3) of such Act;

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1148(d) of such Act and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1148(e) of such Act; and

(iii) the format under which dispute resolution will operate under section 1148(d)(7) of such Act;

(F) the terms of agreements to be entered into with employment networks pursuant to section 1148(d)(4) of such Act, including—

(i) the manner in which service areas are specified pursuant to section 1148(f)(2)(A) of such Act;

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1148(f)(1)(C) of such Act in selecting service providers;

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1148(f)(3) of such Act; and

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1148(f)(4) of such Act;

(G) standards which must be met by individual work plans pursuant to section 1148(g) of such Act;

(H) standards which must be met by payment systems required under section 1148(h) of such Act, including—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1148(h)(1)(A) of such Act;

(ii) the terms which must be met by an outcome payment system under section 1148(h)(2) of such Act;

(iii) the terms which must be met by an outcome-milestone payment system under section 1148(h)(3) of such Act;

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1148(h) of such Act or the period of time specified in paragraph (4)(B) of such section 1148(h) of such Act; and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

(f) THE TICKET TO WORK AND WORK INCENTIVES ADVISORY PANEL.—

(1) ESTABLISHMENT.—There is established within the Social Security Administration a panel to be known as the "Ticket to Work and Work Incentives Advisory Panel" (in this subsection referred to as the "Panel").

(2) DUTIES OF PANEL.—It shall be the duty of the Panel to—

(A) advise the President, the Congress, and the Commissioner of Social Security on issues related to work incentives programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq., 1395 et seq., 1396 et seq.); and

(B) with respect to the Ticket to Work and Self-Sufficiency Program established under section 1148 of such Act—

(i) advise the Commissioner of Social Security with respect to establishing phase-in sites for such Program and fully implementing the Program thereafter, the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems, and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program;

(ii) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to section 302 of this Act;

(iii) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1148(d)(6) of the Social Security Act; and

(iv) furnish progress reports on the Program to the Commissioner and each House of Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 12 members as follows:

(i) 4 members appointed by the President, not more than 2 of whom may be of the same political party;

(ii) 2 members appointed by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means of the House of Representatives;

(iii) 2 members appointed by the minority leader of the House of Representatives, in consultation with the ranking member of the Committee on Ways and Means of the House of Representatives;

(iv) 2 members appointed by the majority leader of the Senate, in consultation with the Chairman of the Committee on Finance of the Senate; and

(v) 2 members appointed by the minority leader of the Senate, in consultation with the ranking member of the Committee on Finance of the Senate.

(B) REPRESENTATION.—Of the members appointed under subparagraph (A), at least 8 shall have experience or expert knowledge as a recipient, provider, employer, or employee in the fields of, or related to, employment services, vocational rehabilitation services, and other support services, of whom—

(i) at least 2 shall represent the interests of recipients of employment services, vocational rehabilitation services, and other support services;

(ii) at least 2 shall represent the interests of providers of employment services, vocational rehabilitation services, and other support services;

(iii) at least 2 shall represent the interests of private employers; and

(iv) at least 2 shall represent the interests of employees.

At least ½ of the members described in each clause of subparagraph (A) shall be individuals with disabilities, or representatives of individuals with disabilities, with consideration to current or former title II disability beneficiaries or title XVI disability beneficiaries (as such terms are defined in section 1148(k) of the Social Security Act (as added by subsection (a)).

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of the enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—As designated by the President at the time of appointment, of the members first appointed—

(I) ½ of the members appointed under subparagraph (A) shall be appointed for a term of 2 years; and

(II) the remaining members appointed under subparagraph (A) shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Panel shall be filled in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—8 members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Panel, and paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(B) STAFF.—Subject to rules prescribed by the Commissioner of Social Security, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Commissioner of Social Security, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this Act.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places, and take such testimony and evidence as the Panel considers appropriate.

(B) POWERS OF MEMBERS AND AGENTS.—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this section.

(C) MAILS.—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(6) REPORTS.—

(A) INTERIM REPORTS.—The Panel shall submit to the President and the Congress interim reports at least annually.

(B) FINAL REPORT.—The Panel shall transmit a final report to the President and the Congress not later than eight years after the date of the enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislative and administrative actions which the Panel considers appropriate.

(7) TERMINATION.—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated from the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the general fund of the Treasury, as appropriate, such sums as are necessary to carry out this subsection.

Subtitle B—Elimination of Work Disincentives

SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN INDIVIDUAL'S DISABLED STATUS.

(a) IN GENERAL.—Section 221 of the Social Security Act (42 U.S.C. 421) is amended by adding at the end the following:

“(m)(1) In any case where an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual's disability (as defined in section 223(d)) has

received such benefits for at least 24 months—

“(A) no continuing disability review conducted by the Commissioner may be scheduled for the individual solely as a result of the individual's work activity;

“(B) no work activity engaged in by the individual may be used as evidence that the individual is no longer disabled; and

“(C) no cessation of work activity by the individual may give rise to a presumption that the individual is unable to engage in work.

“(2) An individual to which paragraph (1) applies shall continue to be subject to—

“(A) continuing disability reviews on a regularly scheduled basis that is not triggered by work; and

“(B) termination of benefits under this title in the event that the individual has earnings that exceed the level of earnings established by the Commissioner to represent substantial gainful activity.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on January 1, 2003.

SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS.

(a) OASDI BENEFITS.—Section 223 of the Social Security Act (42 U.S.C. 423) is amended—

(1) by redesignating subsection (i) as subsection (j); and

(2) by inserting after subsection (h) the following:

“Reinstatement of Entitlement

“(i)(1)(A) Entitlement to benefits described in subparagraph (B)(i)(I) shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of such entitlement shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was entitled to benefits under this section or section 202 on the basis of disability pursuant to an application filed therefor; and

“(II) such entitlement terminated due to the performance of substantial gainful activity;

“(ii) the individual is under a disability and the physical or mental impairment that is the basis for the finding of disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of disability that gave rise to the entitlement described in clause (i); and

“(iii) the individual's disability renders the individual unable to perform substantial gainful activity.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was entitled to a benefit described in subparagraph (B)(i)(I) prior to the entitlement termination described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual

that the individual meets the requirements specified in clauses (ii) and (iii) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not entitled to reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of subsection (f) shall apply.

“(4)(A)(i) Subject to clause (ii), entitlement to benefits reinstated under this subsection shall commence with the benefit payable for the month in which a request for reinstatement is filed.

“(ii) An individual whose entitlement to a benefit for any month would have been reinstated under this subsection had the individual filed a request for reinstatement before the end of such month shall be entitled to such benefit for such month if such request for reinstatement is filed before the end of the twelfth month immediately succeeding such month.

“(B)(i) Subject to clauses (ii) and (iii), the amount of the benefit payable for any month pursuant to the reinstatement of entitlement under this subsection shall be determined in accordance with the provisions of this title.

“(ii) For purposes of computing the primary insurance amount of an individual whose entitlement to benefits under this section is reinstated under this subsection, the date of onset of the individual's disability shall be the date of onset used in determining the individual's most recent period of disability arising in connection with such benefits payable on the basis of an application.

“(iii) Benefits under this section or section 202 payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) No benefit shall be payable pursuant to an entitlement reinstated under this subsection to an individual for any month in which the individual engages in substantial gainful activity.

“(D) The entitlement of any individual that is reinstated under this subsection shall end with the benefits payable for the month preceding whichever of the following months is the earliest:

“(i) The month in which the individual dies.

“(ii) The month in which the individual attains retirement age.

“(iii) The third month following the month in which the individual's disability ceases.

“(5) Whenever an individual's entitlement to benefits under this section is reinstated under this subsection, entitlement to benefits payable on the basis of such individual's wages and self-employment income may be reinstated with respect to any person previously entitled to such benefits on the basis of an application if the Commissioner determines that such person satisfies all the requirements for entitlement to such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated entitlement of any such person to the same extent that they apply to the reinstated entitlement of such individual.

“(6) An individual to whom benefits are payable under this section or section 202 pursuant to a reinstatement of entitlement under this subsection for 24 months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth

month, be deemed for purposes of paragraph (1)(B)(i)(I) and the determination, if appropriate, of the termination month in accordance with subsection (a)(1) of this section, or subsection (d)(1), (e)(1), or (f)(1) of section 202, to be entitled to such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be entitled to provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under subsection (b) or (g) of section 205.

“(B) The amount of a provisional benefit for a month shall equal the amount of the last monthly benefit payable to the individual under this title on the basis of an application increased by an amount equal to the amount, if any, by which such last monthly benefit would have been increased as a result of the operation of section 215(i).

“(C)(i) Provisional benefits shall begin with the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual's entitlement to reinstated benefits;

“(II) the fifth month following the month described in clause (i);

“(III) the month in which the individual performs substantial gainful activity; or

“(IV) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not entitled to reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).”

(b) SSI BENEFITS.—

(1) IN GENERAL.—Section 1631 of the Social Security Act (42 U.S.C. 1383) is amended by adding at the end the following:

“Reinstatement of Eligibility on the Basis of Blindness or Disability

“(p)(1)(A) Eligibility for benefits under this title shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of eligibility shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was eligible for benefits under this title on the basis of blindness or disability pursuant to an application filed therefor; and

“(II) the individual thereafter was ineligible for such benefits due to earned income (or earned and unearned income) for a period of 12 or more consecutive months;

“(ii) the individual is blind or disabled and the physical or mental impairment that is the basis for the finding of blindness or dis-

ability is the same as (or related to) the physical or mental impairment that was the basis for the finding of blindness or disability that gave rise to the eligibility described in clause (i);

“(iii) the individual's blindness or disability renders the individual unable to perform substantial gainful activity; and

“(iv) the individual satisfies the nonmedical requirements for eligibility for benefits under this title.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was eligible for a benefit under this title (including section 1619) prior to the period of ineligibility described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) through (iv) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not eligible for reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of section 1614(a)(4) shall apply.

“(4)(A) Eligibility for benefits reinstated under this subsection shall commence with the benefit payable for the month following the month in which a request for reinstatement is filed.

“(B)(i) Subject to clause (ii), the amount of the benefit payable for any month pursuant to the reinstatement of eligibility under this subsection shall be determined in accordance with the provisions of this title.

“(ii) The benefit under this title payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) Except as otherwise provided in this subsection, eligibility for benefits under this title reinstated pursuant to a request filed under paragraph (2) shall be subject to the same terms and conditions as eligibility established pursuant to an application filed therefor.

“(5) Whenever an individual's eligibility for benefits under this title is reinstated under this subsection, eligibility for such benefits shall be reinstated with respect to the individual's spouse if such spouse was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements for eligibility for such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated eligibility of the spouse to the same extent that they apply to the reinstated eligibility of such individual.

“(6) An individual to whom benefits are payable under this title pursuant to a reinstatement of eligibility under this subsection for twenty-four months (whether or not consecutive) shall, with respect to bene-

fits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) to be eligible for such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be eligible for provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under paragraph (1) or (3) of subsection (c).

“(B)(i) Except as otherwise provided in clause (ii), the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual under this title with the same kind and amount of income.

“(ii) If the individual has a spouse who was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements of section 1614(b) except requirements related to the filing of an application, the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual and eligible spouse under this title with the same kind and amount of income.

“(C)(i) Provisional benefits shall begin with the month following the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual's eligibility for reinstated benefits;

“(II) the fifth month following the month for which provisional benefits are first payable under clause (i); or

“(III) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not eligible for reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).

“(8) For purposes of this subsection other than paragraph (7), the term ‘benefits under this title’ includes State supplementary payments made pursuant to an agreement under section 1616(a) of this Act or section 212(b) of Public Law 93-66.”

(2) CONFORMING AMENDMENTS.—

(A) Section 1631(j)(1) of such Act (42 U.S.C. 1383(j)(1)) is amended by striking the period and inserting ‘, or has filed a request for reinstatement of eligibility under subsection (p)(2) and been determined to be eligible for reinstatement.’

(B) Section 1631(j)(2)(A)(i)(I) of such Act (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by inserting ‘(other than pursuant to a request for reinstatement under subsection (p))’ after ‘eligible’.

(c) EFFECTIVE DATE.—

(1) IN GENERAL.—The amendments made by this section shall take effect on the first day of the thirteenth month beginning after the date of enactment of this Act.

(2) LIMITATION.—No benefit shall be payable under title II or XVI on the basis of a

request for reinstatement filed under section 223(i) or 1631(p) of the Social Security Act before the effective date described in paragraph (1).

Subtitle C—Work Incentives Planning, Assistance, and Outreach

SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 101, is amended by adding after section 1148 the following:

“WORK INCENTIVES OUTREACH PROGRAM

“SEC. 1149. (a) ESTABLISHMENT.—

“(1) IN GENERAL.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, shall establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

“(2) GRANTS, COOPERATIVE AGREEMENTS, CONTRACTS, AND OUTREACH.—Under the program established under this section, the Commissioner shall—

“(A) establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including individuals participating in the Ticket to Work and Self-Sufficiency Program established under section 1148, the program established under section 1619, and other programs that are designed to encourage disabled beneficiaries to work;

“(B) conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and to the families of such beneficiaries) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work, including—

“(i) preparing and disseminating information explaining such programs; and

“(ii) working in cooperation with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling;

“(C) establish a corps of trained, accessible, and responsive work incentives specialists within the Social Security Administration who will specialize in disability work incentives under titles II and XVI for the purpose of disseminating accurate information with respect to inquiries and issues relating to work incentives to—

“(i) disabled beneficiaries;

“(ii) benefit applicants under titles II and XVI; and

“(iii) individuals or entities awarded grants under subparagraphs (A) or (B); and

“(D) provide—

“(i) training for work incentives specialists and individuals providing planning assistance described in subparagraph (C); and

“(ii) technical assistance to organizations and entities that are designed to encourage disabled beneficiaries to return to work.

“(3) COORDINATION WITH OTHER PROGRAMS.—The responsibilities of the Commissioner established under this section shall be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries including the program under section 1619, the plans for achieving self-support program (PASS), and

any other Federal or State work incentives programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, transition services (as defined in, and provided in accordance with, the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)), a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998, and other services.

“(b) CONDITIONS.—

“(1) SELECTION OF ENTITIES.—

“(A) APPLICATION.—An entity shall submit an application for a grant, cooperative agreement, or contract to provide benefits planning and assistance to the Commissioner at such time, in such manner, and containing such information as the Commissioner may determine is necessary to meet the requirements of this section.

“(B) STATEWIDENESS.—The Commissioner shall ensure that the planning, assistance, and information described in paragraph (2) shall be available on a statewide basis.

“(C) ELIGIBILITY OF STATES AND PRIVATE ORGANIZATIONS.—

“(i) IN GENERAL.—The Commissioner may award a grant, cooperative agreement, or contract under this section to a State or a private agency or organization (other than Social Security Administration Field Offices and the State agency administering the State Medicaid program under title XIX, including any agency or entity described in clause (ii), that the Commissioner determines is qualified to provide the planning, assistance, and information described in paragraph (2)).

“(ii) AGENCIES AND ENTITIES DESCRIBED.—The agencies and entities described in this clause are the following:

“(I) Any public or private agency or organization (including Centers for Independent Living established under title VII of the Rehabilitation Act of 1973, protection and advocacy organizations, client assistance programs established in accordance with section 112 of the Rehabilitation Act of 1973, and State Developmental Disabilities Councils established in accordance with section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6024)) that the Commissioner determines satisfies the requirements of this section.

“(II) The State agency administering the State program funded under part A of title IV.

“(D) EXCLUSION FOR CONFLICT OF INTEREST.—The Commissioner may not award a grant, cooperative agreement, or contract under this section to any entity that the Commissioner determines would have a conflict of interest if the entity were to receive a grant, cooperative agreement, or contract under this section.

“(2) SERVICES PROVIDED.—A recipient of a grant, cooperative agreement, or contract to provide benefits planning and assistance shall select individuals who will act as planners and provide information, guidance, and planning to disabled beneficiaries on the—

“(A) availability and interrelation of any Federal or State work incentives programs designed to assist disabled beneficiaries that the individual may be eligible to participate in;

“(B) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual; and

“(C) availability of protection and advocacy services for disabled beneficiaries and how to access such services.

“(3) AMOUNT OF GRANTS, COOPERATIVE AGREEMENTS, OR CONTRACTS.—

“(A) BASED ON POPULATION OF DISABLED BENEFICIARIES.—Subject to subparagraph (B), the Commissioner shall award a grant, cooperative agreement, or contract under this section to an entity based on the percentage of the population of the State where the entity is located who are disabled beneficiaries.

“(B) LIMITATIONS.—

“(i) PER GRANT.—No entity shall receive a grant, cooperative agreement, or contract under this section for a fiscal year that is less than \$50,000 or more than \$300,000.

“(ii) TOTAL AMOUNT FOR ALL GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS.—The total amount of all grants, cooperative agreements, and contracts awarded under this section for a fiscal year may not exceed \$23,000,000.

“(4) ALLOCATION OF COSTS.—The costs of carrying out this section shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(c) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$23,000,000 for each of the fiscal years 2000 through 2004.”

SEC. 122. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 121, is amended by adding after section 1149 the following:

“STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

“SEC. 1150. (a) IN GENERAL.—Subject to subsection (c), the Commissioner may make payments in each State to the protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.) for the purpose of providing services to disabled beneficiaries.

“(b) SERVICES PROVIDED.—Services provided to disabled beneficiaries pursuant to a payment made under this section may include—

“(1) information and advice about obtaining vocational rehabilitation and employment services; and

“(2) advocacy or other services that a disabled beneficiary may need to secure or regain gainful employment.

“(c) APPLICATION.—In order to receive payments under this section, a protection and advocacy system shall submit an application to the Commissioner, at such time, in such form and manner, and accompanied by such information and assurances as the Commissioner may require.

“(d) AMOUNT OF PAYMENTS.—

“(1) IN GENERAL.—Subject to the amount appropriated for a fiscal year for making payments under this section, a protection and advocacy system shall not be paid an amount that is less than—

“(A) in the case of a protection and advocacy system located in a State (including the District of Columbia and Puerto Rico) other than Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, the greater of—

“(i) \$100,000; or

“(ii) ½ of 1 percent of the amount available for payments under this section; and

“(B) in the case of a protection and advocacy system located in Guam, American

Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, \$50,000.

“(2) INFLATION ADJUSTMENT.—For each fiscal year in which the total amount appropriated to carry out this section exceeds the total amount appropriated to carry out this section in the preceding fiscal year, the Commissioner shall increase each minimum payment under subparagraphs (A) and (B) of paragraph (1) by a percentage equal to the percentage increase in the total amount so appropriated to carry out this section.

“(e) ANNUAL REPORT.—Each protection and advocacy system that receives a payment under this section shall submit an annual report to the Commissioner and the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 on the services provided to individuals by the system.

“(f) FUNDING.—

“(1) ALLOCATION OF PAYMENTS.—Payments under this section shall be made from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(2) CARRYOVER.—Any amounts allotted for payment to a protection and advocacy system under this section for a fiscal year shall remain available for payment to or on behalf of the protection and advocacy system until the end of the succeeding fiscal year.

“(g) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(3) PROTECTION AND ADVOCACY SYSTEM.—The term ‘protection and advocacy system’ means a protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.).

“(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$7,000,000 for each of the fiscal years 2000 through 2004.”

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

SEC. 201. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES.

(a) IN GENERAL.—

(1) STATE OPTION TO PROVIDE OPPORTUNITY FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY TO BUY INTO MEDICAID.—

(A) ELIGIBILITY.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

(i) in subclause (XIII), by striking “or” at the end;

(ii) in subclause (XIV), by adding “or” at the end; and

(iii) by adding at the end the following:

“(XV) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XIII);”.

(B) DEFINITION OF EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY.—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following:

“(v)(1) The term ‘employed individual with a medically improved disability’ means an individual who—

“(A) is at least 16, but less than 65, years of age;

“(B) is employed (as defined in paragraph (2));

“(C) ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XIII) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and

“(D) continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.

“(2) For purposes of paragraph (1), an individual is considered to be ‘employed’ if the individual—

“(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

“(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.”.

(C) CONFORMING AMENDMENT.—Section 1905(a) of such Act (42 U.S.C. 1396d(a)) is amended in the matter preceding paragraph (1)—

(i) in clause (x), by striking “or” at the end;

(ii) in clause (xi), by adding “or” at the end; and

(iii) by inserting after clause (xi), the following:

“(xii) employed individuals with a medically improved disability (as defined in subsection (v)).”.

(2) STATE AUTHORITY TO IMPOSE INCOME-RELATED PREMIUMS AND COST-SHARING.—Section 1916 of such Act (42 U.S.C. 1396o) is amended—

(A) in subsection (a), by striking “The State plan” and inserting “Subject to subsection (g), the State plan”; and

(B) by adding at the end the following:

“(g) With respect to individuals provided medical assistance only under subclause (XV) of section 1902(a)(10)(A)(ii), a State may (in a uniform manner for individuals described in either such subclause)—

“(1) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and

“(2) require payment of 100 percent of such premiums in the case of such an individual who has income that exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved.”.

(3) PROHIBITION AGAINST SUPPLANTATION OF STATE FUNDS AND STATE FAILURE TO MAINTAIN EFFORT.—Section 1903(i) of such Act (42 U.S.C. 1396b(i)) is amended—

(A) by striking the period at the end of paragraph (19) and inserting “; or”; and

(B) by inserting after such paragraph the following:

“(20) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended for such programs during the most recent State fiscal year ending before the date of enactment of this paragraph.”.

(b) CONFORMING AMENDMENTS.—

(1) Section 1903(f)(4) of the Social Security Act (42 U.S.C. 1396b(f)(4)) is amended in the matter preceding subparagraph (A) by inserting “1902(a)(10)(A)(ii)(XV),” after “1902(a)(10)(A)(ii)(X),”.

(2) Section 1903(f)(4) of such Act, as amended by paragraph (1), is amended by inserting “1902(a)(10)(A)(ii)(XIII),” before

“1902(a)(10)(A)(ii)(XV)”.

(c) EFFECTIVE DATE.—

(1) IN GENERAL.—Except as provided in paragraph (2), the amendments made by this section apply to medical assistance for items and services furnished on or after October 1, 1999.

(2) RETROACTIVITY OF CONFORMING AMENDMENT.—The amendment made by subsection (b)(2) takes effect as if included in the enactment of the Balanced Budget Act of 1997.

SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS.

(a) IN GENERAL.—The next to last sentence of section 226(b) of the Social Security Act (42 U.S.C. 426) is amended by striking “24” and inserting “96”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall be effective on and after October 1, 2000.

(c) GAO REPORT.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress that—

(1) examines the effectiveness and cost of the amendment made by subsection (a);

(2) examines the necessity and effectiveness of providing continuation of medicare coverage under section 226(b) of the Social Security Act to individuals whose annual income exceeds the contribution and benefit base (as determined under section 230 of such Act);

(3) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a sliding scale premium for individuals whose annual income exceeds such contribution and benefit base;

(4) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a premium buy-in by the beneficiary’s employer in lieu of coverage under private health insurance;

(5) examines the interrelation between the use of the continuation of medicare coverage under such section 226(b) and the use of private health insurance coverage by individuals during the extended period; and

(6) recommends such legislative or administrative changes relating to the continuation of medicare coverage for recipients of social security disability benefits as the Comptroller General determines are appropriate.

SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES.

(a) ESTABLISHMENT.—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall award grants described in subsection (b) to States to support the design, establishment, and operation of State infrastructures that provide items and services to support working individuals with disabilities.

(2) APPLICATION.—In order to be eligible for an award of a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary shall require.

(3) DEFINITION OF STATE.—In this section, the term “State” means each of the 50 States, the District of Columbia, Puerto Rico, Guam, the United States Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) GRANTS FOR INFRASTRUCTURE AND OUTREACH.—

(1) IN GENERAL.—Out of the funds appropriated under subsection (e), the Secretary shall award grants to States to—

(A) support the establishment, implementation, and operation of the State infrastructures described in subsection (a); and

(B) conduct outreach campaigns regarding the existence of such infrastructures.

(2) ELIGIBILITY FOR GRANTS.—

(A) IN GENERAL.—No State may receive a grant under this subsection unless the State—

(i) has an approved amendment to the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) that provides medical assistance under such plan to individuals described in section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)); and

(ii) demonstrates to the satisfaction of the Secretary that the State makes personal assistance services available under the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to the extent necessary to enable individuals described in clause (i) to remain employed (as determined under section 1905(v)(2) of the Social Security Act (42 U.S.C. 1396d(v)(2))).

(B) DEFINITION OF PERSONAL ASSISTANCE SERVICES.—In this paragraph, the term “personal assistance services” means a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability. Such services shall be designed to increase the individual’s control in life and ability to perform everyday activities on or off the job.

(3) DETERMINATION OF AWARDS.—

(A) IN GENERAL.—Subject to subparagraph (B), the Secretary shall determine a formula for awarding grants to States under this section that provides special consideration to States that provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

(B) AWARD LIMITS.—

(i) MINIMUM AWARDS.—

(I) IN GENERAL.—Subject to subclause (II), no State with an approved application under this section shall receive a grant for a fiscal year that is less than \$500,000.

(II) PRO RATA REDUCTIONS.—If the funds appropriated under subsection (e) for a fiscal year are not sufficient to pay each State with an application approved under this section the minimum amount described in subclause (I), the Secretary shall pay each such State an amount equal to the pro rata share of the amount made available.

(ii) MAXIMUM AWARDS.—No State with an application that has been approved under this section shall receive a grant for a fiscal year that exceeds 15 percent of the total expenditures by the State (including the reimbursed Federal share of such expenditures) for medical assistance for individuals eligible under subclause (XIII) or (XV) of section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as estimated by the State and approved by the Secretary.

(C) AVAILABILITY OF FUNDS.—

(1) FUNDS AWARDED TO STATES.—Funds awarded to a State under a grant made under this section for a fiscal year shall remain available until expended.

(2) FUNDS NOT AWARDED TO STATES.—Funds not awarded to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for awarding by the Secretary.

(d) ANNUAL REPORT.—A State that is awarded a grant under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include the percentage increase in the number of title II disability bene-

ficiaries, as defined in section 1148(k)(3) of the Social Security Act (as amended by section 101(a)) in the State, and title XVI disability beneficiaries, as defined in section 1148(k)(4) of the Social Security Act (as so amended) in the State who return to work.

(e) APPROPRIATION.—

(1) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to make grants under this section—

(A) for fiscal year 2000, \$20,000,000;

(B) for fiscal year 2001, \$25,000,000;

(C) for fiscal year 2002, \$30,000,000;

(D) for fiscal year 2003, \$35,000,000;

(E) for fiscal year 2004, \$40,000,000; and

(F) for each of fiscal years 2005 through 2010, the amount appropriated for the preceding fiscal year increased by the percentage increase (if any) in the Consumer Price Index for All Urban Consumers (United States city average) for the preceding fiscal year.

(2) BUDGET AUTHORITY.—This subsection constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under paragraph (1).

(f) RECOMMENDATION.—Not later than October 1, 2009, the Secretary, in consultation with the Work Incentives Advisory Panel established under section 201(f), shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the grant program established under this section should be continued after fiscal year 2010.

SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES.

(a) STATE APPLICATION.—A State may apply to the Secretary of Health and Human Services (in this section referred to as the “Secretary”) for approval of a demonstration project (in this section referred to as a “demonstration project”) under which up to a specified maximum number of individuals who are workers with a potentially severe disability (as defined in subsection (b)(1)) are provided medical assistance equal to that provided under section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)) to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)).

(b) WORKER WITH A POTENTIALLY SEVERE DISABILITY DEFINED.—For purposes of this section—

(1) IN GENERAL.—The term “worker with a potentially severe disability” means, with respect to a demonstration project, an individual who—

(A) is at least 16, but less than 65, years of age;

(B) has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected, but for the receipt of items and services described in section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)), to become blind or disabled (as defined under section 1614(a) of the Social Security Act (42 U.S.C. 1382c(a))); and

(C) is employed (as defined in paragraph (2)).

(2) DEFINITION OF EMPLOYED.—An individual is considered to be “employed” if the individual—

(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures,

as defined under the demonstration project and approved by the Secretary.

(c) APPROVAL OF DEMONSTRATION PROJECTS.—

(1) IN GENERAL.—Subject to paragraph (3), the Secretary shall approve applications under subsection (a) that meet the requirements of paragraph (2) and such additional terms and conditions as the Secretary may require. The Secretary may waive the requirement of section 1902(a)(1) of the Social Security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-State demonstrations.

(2) TERMS AND CONDITIONS OF DEMONSTRATION PROJECTS.—The Secretary may not approve a demonstration project under this section unless the State provides assurances satisfactory to the Secretary that the following conditions are or will be met:

(A) ELECTION OF OPTIONAL CATEGORY.—The State has elected to provide coverage under its plan under title XIX of the Social Security Act of individuals described in section 1902(a)(10)(A)(ii)(XIII) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)).

(B) MAINTENANCE OF STATE EFFORT.—Federal funds paid to a State pursuant to this section must be used to supplement, but not supplant, the level of State funds expended for workers with potentially severe disabilities under programs in effect for such individuals at the time the demonstration project is approved under this section.

(C) INDEPENDENT EVALUATION.—The State provides for an independent evaluation of the project.

(3) LIMITATIONS ON FEDERAL FUNDING.—

(A) APPROPRIATION.—

(i) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to carry out this section for the 5-fiscal-year period beginning with fiscal year 2000, \$56,000,000.

(ii) BUDGET AUTHORITY.—Clause (i) constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under clause (i).

(B) LIMITATION ON PAYMENTS.—In no case may—

(i) the aggregate amount of payments made by the Secretary to States under this section exceed \$56,000,000; or

(ii) payments be provided by the Secretary for a fiscal year after fiscal year 2005.

(C) FUNDS ALLOCATED TO STATES.—The Secretary shall allocate funds to States based on their applications and the availability of funds. Funds allocated to a State under a grant made under this section for a fiscal year shall remain available until expended.

(D) FUNDS NOT ALLOCATED TO STATES.—Funds not allocated to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for allocation by the Secretary using the allocation formula established under this section.

(E) PAYMENTS TO STATES.—The Secretary shall pay to each State with a demonstration project approved under this section, from its allocation under subparagraph (C), an amount for each quarter equal to the Federal medical assistance percentage (as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1395d(b))) of expenditures in the quarter from medical assistance provided to workers with a potentially severe disability.

(d) RECOMMENDATION.—Not later than October 1, 2002, the Secretary shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the demonstration project established under this section should be continued after fiscal year 2003.

(e) STATE DEFINED.—In this section, the term "State" has the meaning given such term for purposes of title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) IN GENERAL.—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting "or paragraph (6)" after "this paragraph"; and

(2) by adding at the end the following new paragraph:

"(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss."

(b) EFFECTIVE DATE.—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

SEC. 301. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) EXTENSION OF AUTHORITY.—Title II of the Social Security Act (42 U.S.C. 401 et seq.) is amended by adding at the end the following:

"DEMONSTRATION PROJECT AUTHORITY

"SEC. 234. (a) AUTHORITY.—

"(1) IN GENERAL.—The Commissioner of Social Security (in this section referred to as the "Commissioner") shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of—

"(A) various alternative methods of treating the work activity of individuals entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual's disability (as defined in section 223(d)), including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of such individuals;

"(B) altering other limitations and conditions applicable to such individuals (including lengthening the trial work period (as defined in section 222(c)), altering the 24-month waiting period for hospital insurance benefits under section 226, altering the manner in which the program under this title is administered, earlier referral of such individuals for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation); and

"(C) implementing sliding scale benefit offsets using variations in—

"(i) the amount of the offset as a proportion of earned income;

"(ii) the duration of the offset period; and

"(iii) the method of determining the amount of income earned by such individuals,

to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of this title.

"(2) AUTHORITY FOR EXPANSION OF SCOPE.—The Commissioner may expand the scope of

any such experiment or demonstration project to include any group of applicants for benefits under the program established under this title with impairments that reasonably may be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.

"(b) REQUIREMENTS.—The experiments and demonstration projects developed under subsection (a) shall be of sufficient scope and shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration while giving assurance that the results derived from the experiments and projects will obtain generally in the operation of the disability insurance program under this title without committing such program to the adoption of any particular system either locally or nationally.

"(c) AUTHORITY TO WAIVE COMPLIANCE WITH BENEFITS REQUIREMENTS.—In the case of any experiment or demonstration project conducted under subsection (a), the Commissioner may waive compliance with the benefit requirements of this title and the requirements of section 1148 as they relate to the program established under this title, and the Secretary may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

"(d) REPORTS.—

"(1) INTERIM REPORTS.—On or before June 9 of each year, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate an annual interim report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials that the Commissioner may consider appropriate.

"(2) TERMINATION AND FINAL REPORT.—The authority under the preceding provisions of this section (including any waiver granted pursuant to subsection (c)) shall terminate 5 years after the date of the enactment of this Act. Not later than 90 days after the termination of any experiment or demonstration project carried out under this section, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate a final report with respect to that experiment or demonstration project."

(b) CONFORMING AMENDMENTS; TRANSFER OF PRIOR AUTHORITY.—

(1) CONFORMING AMENDMENTS.—

(A) REPEAL OF PRIOR AUTHORITY.—Paragraphs (1) through (4) of subsection (a) and subsection (c) of section 505 of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) are repealed.

(B) CONFORMING AMENDMENT REGARDING FUNDING.—Section 201(k) of the Social Security Act (42 U.S.C. 401(k)) is amended by striking "section 505(a) of the Social Security Disability Amendments of 1980" and inserting "section 234".

(2) TRANSFER OF PRIOR AUTHORITY.—With respect to any experiment or demonstration project being conducted under section 505(a) of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) as of the date of enactment of this Act, the authority to conduct such experiment or demonstration project (including the terms and conditions applicable to the experiment or demonstration project) shall be treated as if that authority (and such terms and conditions) had been established under section 234 of the Social Security Act, as added by subsection (a).

SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.

(a) AUTHORITY.—The Commissioner of Social Security shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1148(k)(3) of the Social Security Act) under which benefits payable under section 223 of such Act, or under section 202 of such Act based on the beneficiary's disability, are reduced by \$1 for each \$2 of the beneficiary's earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(b) SCOPE AND SCALE AND MATTERS TO BE DETERMINED.—

(1) IN GENERAL.—The demonstration projects developed under subsection (a) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(A) the effects, if any, of induced entry into the project and reduced exit from the project;

(B) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act; and

(C) the savings that accrue to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Ticket to Work and Work Incentives Advisory Panel pursuant to section 101(f)(2)(B)(ii) of this Act.

(2) ADDITIONAL MATTERS.—The Commissioner shall also determine with respect to each project—

(A) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project;

(B) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project; and

(C) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project.

The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(c) **WAIVERS.**—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act, and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of such Act, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

(d) **INTERIM REPORTS.**—Not later than 2 years after the date of enactment of this Act, and annually thereafter, the Commissioner of Social Security shall submit to Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials that the Commissioner of Social Security may consider appropriate.

(e) **FINAL REPORT.**—The Commissioner of Social Security shall submit to Congress a final report with respect to all demonstration projects carried out under this section not later than 1 year after their completion.

(f) **EXPENDITURES.**—Expenditures made for demonstration projects under this section shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

SEC. 303. STUDIES AND REPORTS.

(a) **STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.**—

(1) **STUDY.**—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 and other Federal laws. In such study, the Comptroller General shall specifically address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities.

(2) **REPORT.**—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(b) **STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.**—

(1) **STUDY.**—As soon as practicable after the date of enactment of this Act, the Com-

troller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act and the supplemental security income program under title XVI of such Act, as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of such Act.

(2) **REPORT.**—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(c) **STUDY BY GENERAL ACCOUNTING OFFICE OF THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON RETURN TO WORK.**—

(1) **STUDY.**—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study of the substantial gainful activity level applicable as of that date to recipients of benefits under section 223 of the Social Security Act (42 U.S.C. 423) and under section 202 of such Act (42 U.S.C. 402) on the basis of a recipient having a disability, and the effect of such level as a disincentive for those recipients to return to work. In the study, the Comptroller General also shall address the merits of increasing the substantial gainful activity level applicable to such recipients of benefits and the rationale for not yearly indexing that level to inflation.

(2) **REPORT.**—Not later than 2 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(d) **REPORT ON DISREGARDS UNDER THE DI AND SSI PROGRAMS.**—Not later than 90 days after the date of enactment of this Act, the Commissioner of Social Security shall submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report that—

(1) identifies all income, assets, and resource disregards (imposed under statutory or regulatory authority) that are applicable to individuals receiving benefits under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.);

(2) with respect to each such disregard—

(A) specifies the most recent statutory or regulatory modification of the disregard; and

(B) recommends whether further statutory or regulatory modification of the disregard would be appropriate; and

(3) with respect to the disregard described in section 1612(b)(7) of such Act (42 U.S.C. 1382a(b)(7)) (relating to grants, scholarships, or fellowships received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution)—

(A) identifies the number of individuals receiving benefits under title XVI of such Act (42 U.S.C. 1381 et seq.) who have attained age 22 and have not had any portion of any

grant, scholarship, or fellowship received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution excluded from their income in accordance with that section;

(B) recommends whether the age at which such grants, scholarships, or fellowships are excluded from income for purposes of determining eligibility under title XVI of such Act should be increased to age 25; and

(C) recommends whether such disregard should be expanded to include any such grant, scholarship, or fellowship received for use in paying the cost of room and board at any such institution.

(e) **STUDY BY THE GENERAL ACCOUNTING OFFICE OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY INSURANCE PROGRAM DEMONSTRATION AUTHORITY.**—

(1) **STUDY.**—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess the results of the Social Security Administration's efforts to conduct disability demonstrations authorized under prior law as well as under section 301 of this Act.

(2) **REPORT.**—Not later than 5 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this section, together with a recommendation as to whether the demonstration authority authorized under section 301 of this Act should be made permanent.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) **CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.**—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended—

(1) in subparagraph (A), by striking "by the Commissioner of Social Security" and "by the Commissioner"; and

(2) by adding at the end the following:

"(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

"(i) there is pending a request for either administrative or judicial review with respect to such claim; or

"(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

"(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) shall not apply to such redetermination."

(b) **CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS**

AND ALCOHOLICS.—Section 105(a)(5)(B) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended to read as follows:

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act; or

“(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).”

(c) EFFECTIVE DATES.—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104-121; 110 Stat. 852 et seq.).

SEC. 402. TREATMENT OF PRISONERS.

(a) IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

(1) IN GENERAL.—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”; and

(B) by adding at the end the following:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, Social Security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1) and other provisions of this title; and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual's confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II).

“(iv) The Commissioner shall maintain, and shall provide on a reimbursable basis, information obtained pursuant to agreements entered into under this paragraph to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility and other administrative purposes under such program.”

(2) CONFORMING AMENDMENTS TO THE PRIVACY ACT.—Section 552a(a)(8)(B) of title 5, United States Code, is amended—

(A) in clause (vi), by striking “or” at the end;

(B) in clause (vii), by adding “or” at the end; and

(C) by adding at the end the following:

“(viii) matches performed pursuant to section 202(x)(3) or 1611(e)(1) of the Social Security Act (42 U.S.C. 402(x)(3), 1382(e)(1));”.

(3) CONFORMING AMENDMENTS TO TITLE XVI.—

(A) Section 1611(e)(1)(I)(i) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended by striking “; and” and inserting “and the other provisions of this title; and”.

(B) Section 1611(e)(1)(I)(ii)(II) of such Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amended by striking “is authorized to provide, on a reimbursable basis,” and inserting “shall maintain, and shall provide on a reimbursable basis.”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during which” and inserting “ending with or during or beginning with or during a period of more than 30 days throughout all of which”; and

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) 50 PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv) respectively; and

(C) by inserting after clause (i) the following:

“(ii) The dollar amounts specified in clause (i)(I) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”

(2) EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii).”.

(3) ELIMINATION OF OVERLY BROAD EXEMPTION.—Section 1611(e)(1)(I)(iii) of such Act (as redesignated by paragraph (1)(B)) is amended further—

(A) by striking “(I) The provisions” and all that follows through “(II)”; and

(B) by striking “eligibility purposes” and inserting “eligibility and other administrative purposes under such program”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) in section 1611(e)(1)(I)(i) of the Social Security Act as amended by paragraph (2) shall be deemed a reference to such section 202(x)(1)(A)(ii) of such Act as amended by subsection (b)(1)(C).

(d) CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following new clause:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”.

(2) CONFORMING AMENDMENT.—Section 202(x)(1)(B)(ii) of such Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii).”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of the enactment of this Act.

SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) IN GENERAL.—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefor (in such form and manner, and with such official, as may be prescribed by the Commissioner of Internal Revenue), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant's second taxable year beginning after December 31, 1999. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act), as specified in the application, either with respect to the applicant's first taxable year beginning after December 31, 1999, or with respect to the applicant's second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant's Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would

have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant's income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding paragraphs (4) and (5) of section 1402(c)) except for the exemption under section 1402(e)(1) of such Code.

(b) **EFFECTIVE DATE.**—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under title II on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual's application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) **IN GENERAL.**—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking "title XVI" and inserting "title II or XVI".

(b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103-296; 108 Stat. 1464).

SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL WAGE REPORTS.

(a) **IN GENERAL.**—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended by inserting before the semicolon the following: ", and except that in the case of wage reports with respect to domestic service employment, a State may permit employers (as so defined) that make returns with respect to such employment on a calendar year basis pursuant to section 3510 of the Internal Revenue Code of 1986 to make such reports on an annual basis".

(b) **TECHNICAL AMENDMENTS.**—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended—

(1) by striking "(as defined in section 453A(a)(2)(B)(iii))"; and

(2) by inserting "(as defined in section 453A(a)(2)(B))" after "employers".

(c) **EFFECTIVE DATE.**—The amendments made by this section shall apply to wage reports required to be submitted on and after the date of enactment of this Act.

SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE THEIR FEES VIA THE SOCIAL SECURITY ADMINISTRATION.

(a) **IN GENERAL.**—Section 206 of the Social Security Act (42 U.S.C. 606) is amended by adding at the end the following:

"(d) **ASSESSMENT ON ATTORNEYS.**—

"(1) **IN GENERAL.**—Whenever a fee for services is required to be certified for payment to an attorney from a claimant's past-due benefits pursuant to subsection (a)(4)(A) or (b)(1)(A), the Commissioner shall impose on the attorney an assessment calculated in accordance with paragraph (2).

"(2) **AMOUNT.**—

"(A) The amount of an assessment under paragraph (1) shall be equal to the product obtained by multiplying the amount of the representative's fee that would be required to be so certified by subsection (a)(4)(A) or (b)(1)(A) before the application of this subsection, by the percentage specified in subparagraph (B).

"(B) The percentage specified in this subparagraph is—

"(i) for calendar years before 2001, 6.3 percent, and

"(ii) for calendar years after 2000, 6.3 percent or such different percentage rate as the Commissioner determines is necessary in order to achieve full recovery of the costs of certifying fees to attorneys from the past-due benefits of claimants.

"(3) **COLLECTION.**—The Commissioner may collect the assessment imposed on an attorney under paragraph (1) by offset from the amount of the fee otherwise required by subsection (a)(4)(A) or (b)(1)(A) to be certified for payment to the attorney from a claimant's past-due benefits.

"(4) **PROHIBITION ON CLAIMANT REIMBURSEMENT.**—An attorney subject to an assessment under paragraph (1) may not, directly or indirectly, request or otherwise obtain reimbursement for such assessment from the claimant whose claim gave rise to the assessment.

"(5) **DISPOSITION OF ASSESSMENTS.**—Assessments on attorneys collected under this subsection shall be credited to the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate.

"(6) **AUTHORIZATION OF APPROPRIATIONS.**—The assessments authorized under this section shall be collected and available for obligation only to the extent and in the amount provided in advance in appropriations Acts. Amounts so appropriated are authorized to remain available until expended, for administrative expenses in carrying out title II of the Social Security Act and related laws.

(b) **CONFORMING AMENDMENTS.**—

(1) Section 206(a)(4)(A) of such Act (42 U.S.C. 606(a)(4)(A)) is amended by inserting "(and subsection (d))" after "subparagraph (B)".

(2) Section 206(b)(1)(A) of such Act (42 U.S.C. 606(b)(1)(A)) is amended by inserting ", but subject to subsection (d) of this section" after "section 205(i)".

(c) **EFFECTIVE DATE.**—The amendments made by this section shall apply in the case of any attorney with respect to whom a fee for services is required to be certified for payment from a claimant's past-due benefits pursuant to subsection (a)(4)(A) or (b)(4)(A) of section 206 of the Social Security Act after—

(1) December 31, 1999, or

(2) the last day of the first month beginning after the month in which this Act is enacted.

SEC. 407. PREVENTION OF FRAUD AND ABUSE ASSOCIATED WITH CERTAIN PAYMENTS UNDER THE MEDICAID PROGRAM.

(a) **REQUIREMENTS FOR PAYMENTS.**—Section 1903(i) of the Social Security Act (42 U.S.C. 1396b(i)) (as amended by section 201(a)(3)(B)) is amended further—

(1) in paragraph (20), by striking the period at the end and inserting "; or"; and

(2) by inserting immediately after paragraph (20) the following:

"(21) with respect to any amount expended for an item or service provided under the plan, or for any administrative expense incurred to carry out the plan, which is provided or incurred by, or on behalf of, a State or local educational agency or school district, unless payment for the item, service, or administrative expense is made in accordance with a methodology approved in advance by the Secretary under which—

"(A) in the case of payment for—

"(i) a group of individual items, services, and administrative expenses, the methodology—

"(I) provides for an itemization to the Secretary that assures accountability of the cost of the grouped items, services, and administrative expenses and includes payment

rates and the methodologies underlying the establishment of such rates;

"(II) has an actuarially sound basis for determining the payment rates and the methodologies; and

"(III) reconciles payments for the grouped items, services, and administrative expenses with items and services provided and administrative expenses incurred under this title; or

"(ii) an individual item, service, or administrative expense, the amount of payment for the item, service, or administrative expense does not exceed the amount that would be paid for the item, service, or administrative expense if the item, service, or administrative expense were incurred by an entity other than a State or local educational agency or school district, unless the State can demonstrate to the satisfaction of the Secretary a higher amount for such item, service, or administrative expense; and

"(B) in the case of a transportation service for an individual under age 21 who is eligible for medical assistance under this title (whether or not the child has an individualized education program established pursuant to part B of the Individuals with Disabilities Education Act)—

"(i) a medical need for transportation is noted in such an individualized education program (if any) for the individual, including such an individual residing in a geographic area within which school bus transportation is otherwise not provided;

"(ii) in the case of a child with special medical needs, the vehicle used to furnish such transportation service is specially equipped or staffed to accommodate individuals with special medical needs; and

"(iii) payment for such service only—

"(I) is made with respect to costs directly attributable to the costs associated with transporting such individuals whose medical needs require transport in such a vehicle; and

"(II) reflects the proportion of transportation costs equal to the proportion of the school day spent by such individuals in activities relating to the receipt of covered services under this title or such other proportion based on an allocation method that the Secretary finds reasonable in light of the benefit to the program under this title and consistent with the cost principles contained in OMB Circular A-87; or

"(22) with respect to any amount expended for an item or service under the plan or for any administrative expense to carry out the plan provided by or on behalf of a State or local agency (including a State or local educational agency or school district) that enters into a contract or other arrangement with a person or entity for, or in connection with, the collection or submission of claims for such expenditures, unless, notwithstanding section 1902(a)(32), the agency—

"(A) uses a competitive bidding process or otherwise to contract with such person or entity at a reasonable rate commensurate with the services performed by the person or entity; and

"(B) requires that any fees (including any administrative fees) to be paid to the person or entity for the collection or submission of such claims are identified as a non-contingent, specified dollar amount in the contract."; and

(3) in the third sentence, by striking "(17), and (18)" and inserting "(17), (18), (19), and (21)".

(b) **PROVISION OF ITEMS AND SERVICES THROUGH MEDICAID MANAGED CARE ORGANIZATIONS.**—

(1) **CONTRACTUAL REQUIREMENT.**—Section 1903(m)(2)(A) of the Social Security Act (42 U.S.C. 1396b(m)(2)(A)) is amended by redesignating clause (xi) (as added by section

nating clause (xi) (as added by section 4701(c)(3) of the Balanced Budget Act of 1997) as clause (xiii), by striking "and" at the end of clause (xi), and by inserting after clause (xi) the following:

"(xi) such contract provides that with respect to payment for, and coverage of, such services, the contract requires coordination between the State or local educational agency or school district and the medicaid managed care organization to prevent duplication of services and duplication of payments under this title for such services."

(2) PROHIBITION ON DUPLICATIVE PAYMENTS.—

(A) IN GENERAL.—Section 1903(i) of the Social Security Act (42 U.S.C. 1396b(i)), as amended by subsection (a), is amended—

(i) in paragraph (22), by striking the period and inserting "; or"; and

(ii) by adding at the end the following:

"(23) with respect to any amount expended under the plan for an item, service, or administrative expense for which payment is or may be made directly to a person or entity (including a State or local educational agency or school district) under the State plan if payment for such item, service, or administrative expense was included in the determination of a prepaid capitation or other risk-based rate of payment to an entity under a contract pursuant to section 1903(m)."

(B) CONFORMING AMENDMENT.—The third sentence of section 1903(i) of such Act (42 U.S.C. 1396b(i)), as amended by subsection (a)(3), is amended by striking "and (21)" and inserting "(21), and (23)".

(C) ALLOWABLE SHARE OF FFP WITH RESPECT TO PAYMENT FOR SERVICES FURNISHED IN SCHOOL SETTING.—Section 1903(w)(6) of the Social Security Act (42 U.S.C. 1396b(w)(6)) is amended—

(i) in subparagraph (A), by inserting "subject to subparagraph (C)," after "subsection,"; and

(2) by adding at the end the following:

"(C) In the case of any Federal financial participation amount determined under subsection (a) with respect to any expenditure for an item or service under the plan, or for any administrative expense to carry out the plan, that is furnished by a State or local educational agency or school district, the State shall provide that there is paid to the agency or district a percent of such amount that is not less than the percentage of such expenditure or expense that is paid by such agency or district."

(D) UNIFORM METHODOLOGY FOR SCHOOL-BASED ADMINISTRATIVE CLAIMS.—Not later than 90 days after the date of enactment of this Act, the Administrator of the Health Care Financing Administration, in consultation with State medicaid and State educational agencies and local school systems, shall develop and implement a uniform methodology for claims for payment of administrative expenses furnished under title XIX of the Social Security Act by State or local educational agencies or school districts. Such methodology shall be based on standards related to time studies and population estimates and a national standard for determining payment for such administrative expenses.

(E) EFFECTIVE DATE.—

(i) IN GENERAL.—The amendments made by this section (other than by subsection (b)) shall apply to items and services provided on and after the date of enactment of this Act, without regard to whether implementing regulations are in effect.

(ii) MANAGED CARE AMENDMENTS.—The amendments made by subsection (b) shall apply to contracts entered into or renewed on or after the date of the enactment of this Act.

(iii) REGULATIONS.—The Secretary of Health and Human Services shall promulgate such

final regulations as are necessary to carry out the amendments made by this section not later than 1 year after the date of the enactment of this Act.

SEC. 408. EXTENSION OF AUTHORITY OF STATE MEDICAID FRAUD CONTROL UNITS.

(A) EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE FRAUD IN OTHER FEDERAL HEALTH CARE PROGRAMS.—Section 1903(q)(3) of the Social Security Act (42 U.S.C. 1396b(q)(3)) is amended—

(i) by inserting "(A)" after "in connection with"; and

(2) by striking "title." and inserting "title; and (B) upon the approval of the Inspector General of the relevant Federal agency, any aspect of the provision of health care services and activities of providers of such services under any Federal health care program (as defined in section 1128B(f)(1)), if the suspected fraud or violation of law in such case or investigation is primarily related to the State plan under this title."

(B) RECOUPMENT OF FUNDS.—Section 1903(q)(5) of such Act (42 U.S.C. 1396b(q)(5)) is amended—

(i) by inserting "or under any Federal health care program (as so defined)" after "plan"; and

(2) by adding at the end the following: "All funds collected in accordance with this paragraph shall be credited exclusively to, and available for expenditure under, the Federal health care program (including the State plan under this title) that was subject to the activity that was the basis for the collection."

(C) EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID BOARD AND CARE FACILITIES.—Section 1903(q)(4) of such Act (42 U.S.C. 1396b(q)(4)) is amended to read as follows:

"(4)(A) The entity has—

"(i) procedures for reviewing complaints of abuse or neglect of patients in health care facilities which receive payments under the State plan under this title;

"(ii) at the option of the entity, procedures for reviewing complaints of abuse or neglect of patients residing in board and care facilities; and

"(iii) procedures for acting upon such complaints under the criminal laws of the State or for referring such complaints to other State agencies for action.

"(B) For purposes of this paragraph, the term 'board and care facility' means a residential setting which receives payment (regardless of whether such payment is made under the State plan under this title) from or on behalf of two or more unrelated adults who reside in such facility, and for whom one or both of the following is provided:

"(i) Nursing care services provided by, or under the supervision of, a registered nurse, licensed practical nurse, or licensed nursing assistant.

"(ii) A substantial amount of personal care services that assist residents with the activities of daily living, including personal hygiene, dressing, bathing, eating, toileting, ambulation, transfer, positioning, self-medication, body care, travel to medical services, essential shopping, meal preparation, laundry, and housework."

(d) EFFECTIVE DATE.—The amendments made by this section take effect on the date of enactment of this Act.

SEC. 409. SPECIAL ALLOWANCE ADJUSTMENT FOR STUDENT LOANS.

(A) AMENDMENT.—Section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087-1(b)(2)) is amended—

(1) in subparagraph (A), by striking "(G), and (H)" and inserting "(G), (H), and (I)";

(2) in subparagraph (B)(iv), by striking "(G), or (H)" and inserting "(G), (H), or (I)";

(3) in subparagraph (C)(ii), by striking "(G) and (H)" and inserting "(G), (H), and (I)";

(4) in the heading of subparagraph (H), by striking "JULY 1, 2003" and inserting "JANUARY 1, 2000";

(5) in subparagraph (H), by striking "July 1, 2003," each place it appears and inserting "January 1, 2000,"; and

(6) by inserting after subparagraph (H) the following new subparagraph:

"(I) LOANS DISBURSED ON OR AFTER JANUARY 1, 2000, AND BEFORE JULY 1, 2003.—

"(i) IN GENERAL.—Notwithstanding subparagraphs (G) and (H), but subject to paragraph (4) and clauses (ii), (iii), and (iv) of this subparagraph, and except as provided in subparagraph (B), the special allowance paid pursuant to this subsection on loans for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, shall be computed—

"(I) by determining the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period;

"(II) by subtracting the applicable interest rates on such loans from such average bond equivalent rate;

"(III) by adding 2.34 percent to the resultant percent; and

"(IV) by dividing the resultant percent by 4.

"(ii) IN SCHOOL AND GRACE PERIOD.—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(2), clause (i)(III) of this subparagraph shall be applied by substituting '1.74 percent' for '2.34 percent'.

"(iii) PLUS LOANS.—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(3), clause (i)(III) of this subparagraph shall be applied by substituting '2.64 percent' for '2.34 percent', subject to clause (v) of this subparagraph.

"(iv) CONSOLIDATION LOANS.—In the case of any consolidation loan for which the application is received by an eligible lender on or after January 1, 2000, and before July 1, 2003, and for which the applicable interest rate is determined under section 427A(k)(4), clause (i)(III) of this subparagraph shall be applied by substituting '2.64 percent' for '2.34 percent', subject to clause (vi) of this subparagraph.

"(v) LIMITATION ON SPECIAL ALLOWANCES FOR PLUS LOANS.—In the case of PLUS loans made under section 428B and first disbursed on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(3), a special allowance shall not be paid for such loan during any 12-month period beginning on July 1 and ending on June 30 unless, on the June 1 preceding such July 1—

"(I) the bond equivalent rate of 91-day Treasury bills auctioned at the final auction held prior to such June 1 (as determined by the Secretary for purposes of such section); plus

"(II) 3.1 percent,

exceeds 9.0 percent.

"(vi) LIMITATION ON SPECIAL ALLOWANCES FOR CONSOLIDATION LOANS.—In the case of consolidation loans made under section 428C and for which the application is received on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(4), a special allowance shall not be paid for such loan during any 3-month period ending March 31,

June 30, September 30, or December 31 unless—

“(I) the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period; plus

“(II) 2.64 percent,

exceeds the rate determined under section 427A(k)(4).”.

(b) EFFECTIVE DATE.—Subparagraph (I) of section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087-1(b)(2)) as added by subsection (a) of this section shall apply with respect to any payment pursuant to such section with respect to any 3-month period beginning on or after January 1, 2000, for loans for which the first disbursement is made after such date.

The SPEAKER pro tempore. Pursuant to the rule, the gentleman from Texas (Mr. ARCHER) and the gentleman from New York (Mr. RANGEL) each will control 20 minutes.

The Chair recognizes the gentleman from Texas (Mr. ARCHER).

GENERAL LEAVE

Mr. ARCHER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days within which to revise and extend their remarks and include extraneous material on H.R. 1180.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. ARCHER. Mr. Speaker, I yield myself 2 minutes.

Mr. Speaker, the Social Security disability program provides essential income to those who are unable to work due to severe illness or injury. Last year, benefits were paid to over 6 million workers, their wives and their children. Since arriving on Capitol Hill some 27 years ago, I have worked to find ways to make this complex and often unfriendly program work better.

Most of those receiving disability benefits, due to the severity of their impairments, cannot attempt to work. Today, however, because of the Americans with Disabilities Act, along with advancements in assistive technology, medical treatment and rehabilitation, doors are opening for opportunities never thought possible to individuals with disabilities. Now one can telecommute to work, there are voice-activated computers, and as technology provides new ways to clear hurdles presented by a disability, government must also keep pace by providing opportunity and not just dependency.

Yet, current law still tends to chain individuals with disabilities to the system through complex so-called “work incentives.” In essence, individuals who work lose cash benefits along with access to essential medical coverage. This bill assists beneficiaries to pass through those doors of opportunity and return to self-sufficiency. I cannot think of anything more important than providing support to allow individuals the freedom to reach their utmost potential and that is what this bill is all about.

□ 1545

During the last Congress, former Social Security Chairman JIM BUNNING and ranking member Barbara Kennelly initiated similar bipartisan legislation. This bill passed the Committee on Ways and Means by 33 to 1. The bill last year passed the House of Representatives by 410 to 1. Unfortunately, in the last Congress it was never considered by the other body. I compliment the gentleman from Missouri (Mr. HULSHOF) for taking up the cause in the 106th Congress and introducing this bill. It is an outstanding piece of legislation, and I strongly recommend it to my colleagues.

Mr. RANGEL. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, let me congratulate the gentleman from Texas for this bipartisan effort to make certain that those people who are disabled can make that transition into the labor market.

This is a bill that was cosponsored by all of the Democrats on the Committee on Ways and Means. It was a bill that has been worked out by Republicans and Democrats not working in a partisan way, but trying to make life easier without losing benefits for those people that suffer disabilities. This, I think, really shows what can happen when people put partisanship behind them and try to work together.

This was not a case where the majority was asking for the President to send them a plan, no. It was as legislators they got together and drafted the plan. As we have been able to work out differences on this bill, why can we not do this with Medicare? Why can we not do it with prescription drugs? Why can we not do it with Social Security?

Oh, I know we will hear screams that the President really ought to send us something to guide us. Mr. Speaker, my colleagues did not ask the President for any guidance when they decided to enact the \$792 billion tax cut, and we did not ask for a whole lot of guidance to come up with this decent piece of legislation.

So, Mr. Speaker, I say congratulations to Democrats and Republicans for doing the right thing, and I hope this might be just one giant step forward in moving toward resolving the Social Security problem that we have.

Mr. Speaker, I yield the balance of my time to the gentleman from California (Mr. MATSUI), and I ask unanimous consent that he be allowed to control that time.

The SPEAKER pro tempore (Mr. BURR of North Carolina). Is there objection to the request of the gentleman from New York?

There was no objection.

The SPEAKER pro tempore. Without objection, the gentleman from Missouri (Mr. HULSHOF) will control the remaining time for the gentleman from Texas (Mr. ARCHER).

There was no objection.

Mr. HULSHOF. Mr. Speaker, I yield 2½ minutes to the gentleman from Florida (Mr. SHAW), the Chairman of

the Subcommittee on Social Security who has been championing this issue through our subcommittee.

(Mr. SHAW asked and was given permission to revise and extend his remarks.)

Mr. SHAW. Mr. Speaker, I thank the gentleman for yielding this time to me and congratulate the gentleman for his good work in seeing that this was re-introduced and brought to the House floor, an extremely important piece of legislation.

Mr. Speaker, today I welcome the chance to speak in support of this excellent bill. Simply put, this bill is about work. Its aim is to help individuals with disability achieve their goals of working and supporting themselves and their family.

Through Subcommittee on Social Security hearings over the past 4 years, we have been told over and over again that people with disabilities do want to work. That has always been the case. What has changed is the fact that advances in medicine, technology, and the field of rehabilitation have given many individuals with disabilities a real chance to work. The next step is to redesign our programs to encourage, rather than discourage, their efforts.

With H.R. 1180 we are helping disabled individuals take advantage of these advances in science and medicine both by allowing them to obtain needed rehabilitation and support services and by removing barriers that have prevented them from becoming self-sufficient. Topping the list of barriers is fear of losing health coverage, the cash benefits.

Another disincentive is that beneficiaries currently have limited choices in selecting rehabilitation services and the providers of these services. To address these concerns we would allow the Social Security Administration to begin offering new tickets that disabled Social Security supplemental security income beneficiaries could use to purchase services to help them enter the work force. Disabled individuals in every State will be able to meet with service providers of their choice to develop a personalized employment plan. The Government will pay for services needed to help them work, rewarding the results by paying the service provider part of the benefit savings when disabled individuals leave the rolls.

I would just like to take this one-half minute to ask really the other side and the White House to really bring the spirit of cooperation together. We have reached out to the Democrat side on many occasions in order to try to bring the spirit of the ticket of work to Social Security.

Social Security should not be a partisan issue. There are Democrats and Republicans, millions across this country, who are dependent upon and will be dependent upon the Social Security Administration to keep them out of poverty, and it is time that this Congress and the White House stops the politicking and the wall of silence that

we are receiving from the other side end and that we work together to do great things like we are doing today.

Mr. MATSUI. Mr. Speaker, I yield myself 3 minutes.

I do not know if I will take the entire 3 minutes, in which case I will reserve my time; but let me just say that this bill passed in the last Congress with over 400 votes. Only one Member voted against it, and obviously it has strong bipartisan support at this time. It is a kind of bill that all of us obviously realize is extremely important for the disabled. Basically what it will do that is so important to the disabled is continue Medicare benefits once the disabled person is in the work force.

The real issue here is that we give, instead of 4 years, we give them a total of 10 years; and in my opinion this will go a long way in keeping people that have disabilities in the work force.

In addition to this, one of the major components of it is that it sets up a program that allows the disabled to go into private or public type agencies for support services such as job training, job searches and things of that nature.

I want to commend both the majority and the minority staff for their leadership in making this work out. We did have some problems obviously before the committee markup and after the committee markup and during the committee markup. On the other hand, I think the results that we have today on the floor of the House are excellent.

I want to also commend both the Committee on Commerce and the Committee on Ways and Means for working together and ironing out our differences.

Hopefully, this bill will get to conference soon so that we can get it to the President, and there is no politics in this issue. I think people had a good-faith belief in their differences, but we were able to resolve them and come to some conclusion.

Mr. Speaker, I reserve the balance of my time.

Mr. HULSHOF. Mr. Speaker, I ask unanimous consent that each side will have an additional 5 minutes for a total of 10 minutes to be added to the entirety of the debate.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from Minnesota (Mr. RAMSTAD), cochair of the Disability Caucus.

(Mr. RAMSTAD asked and was given permission to revise and extend his remarks.)

Mr. RAMSTAD. Mr. Speaker, I thank the gentleman for yielding this time to me.

Mr. Speaker, this day has been a long time coming. I first heard about this problem in 1981 when I was attending a meeting as a young State senator at the Courage Center in Golden Valley, Minnesota. Jeff Bangsberg, a person with quadriplegia, told me how it was

not economically sensible for him to work because he would lose his health benefits, and then Tom Haben told me the same thing, and one after another people with disabilities at that meeting in 1981 when I was a young State senator explained why it did not make sense for them from an economic standpoint to work, and that is why I am so grateful for this day when we are getting near to passing this important legislation because eliminating work disincentives for people with disabilities is not just humane public policy, it is sound fiscal policy.

It is not only the right thing to do, but it is clearly the cost-effective thing to do. People with disabilities have to make decisions on financial reality, and they should not be penalized for going to work, they should have incentives to go to work, and I appreciate the bipartisan cooperation on this important legislation.

Mr. Speaker, I want to thank the people back in Minnesota who have advised me on this bill, people with disabilities who will be outlined for the RECORD, and I have said many times before passing this bill, passing this bill today is one of the most important things we could do as a Congress and as a people.

Mr. Speaker, this day has been a long time coming. Since my election to this body in 1990, and as a Minnesota State Senator ten years prior, I have worked hard to help people with disabilities live up to their full potential. That's why, in 1993, Representative PETE STARK and I introduced legislation to achieve the same goal we seek today. Glad we're finally here, PETE.

Nine years ago, President Bush signed the ADA into law and reminded us that "many of our fellow citizens with disabilities are unemployed. They want to work and they can work . . . this is a tremendous pool of people who will bring to jobs diversity, loyalty, low turnover rate, and only one request: the chance to prove themselves."

Mr. Speaker, despite the remarkably low unemployment rate in this country today, many of those with disabilities are still asking for this chance to prove themselves in the workplace.

Despite all the good that the ADA has done to date, there is still room for improvement. The ADA did not remove all the barriers within current federal programs that prohibit people with disabilities from working. It's time to eliminate work disincentives for people with disabilities!

Eliminating work disincentives for people with disabilities is not just humane public policy, it is sound fiscal policy. It's not only the right thing to do; it's the cost-effective thing to do!

Discouraging people with disabilities from working, earning a regular paycheck, paying taxes and moving off public assistance actually results in reduced federal revenues.

Like everyone else, people with disabilities have to make decisions based on financial reality. Should they consider returning to work or even making it through vocational rehabilitation, the risk of losing vital federal health benefits often becomes too threatening to future financial stability. As a result, they are compelled not to work. Given the sorry state of

present law, that's generally a reasonable and rational decision.

Transforming these federal programs to spring-boards into the workforce for people with disabilities is the goal of legislation that I have cosponsored this important legislation before us today.

I want to publicly thank the people who have worked so tirelessly on this legislation, especially Kim Hildred and Beverly Crawford of the Ways and Means Committee.

But most importantly, I want to thank my friends with disabilities back in Minnesota who have counseled me on these issues for two decades.

Mary O'Hara Anderson, Mary Jean Babock, Jeff and Anita Bangsberg, Bill Blom, Gary Boetcher, Wendy Brower, Mary Helen Gunkler, Tom Haben, Mark Hughes, Carol and Jonathan Hughes, Mary Kay Kennedy, Mary Jo Nichols, Joyce Scanlan, Rand Stenhjem, Colleen Wieck, Leah Welch—this day is for you!

As I have said many times, preventing people from working runs counter to the American spirit, one that thrives on individual achievements and the larger contributions to society that result. We must stay true to our Nation's spirit and pass H.R. 1180 today!

Mr. MATSUI. Mr. Speaker, I yield 5 minutes to the gentleman from Ohio (Mr. BROWN).

Mr. BROWN of Ohio. Mr. Speaker, I thank my friend from California (Mr. MATSUI) for yielding this time to me.

Mr. Speaker, if we can help disabled individuals reenter and stay in the work force, we should do that. It clearly makes sense from a fiscal perspective, and it exemplifies our values as a Nation. I plan to vote for H.R. 1180 for one reason and one reason only. The programs it establishes are in the best interests of disabled individuals and the Nation.

However, it is important for us to recognize that this bill is not the same as the one 279 Members of this body cosponsored. It started out stronger, but that was before Members less dedicated to the policy and more dedicated to the politics of this bill got hold of it. Republican members of the Committee on Ways and Means got a hold of the original bill.

As a result, we are being asked to consider without amendment a weak alternative to a strong bill. For political reasons rather than policy reasons we are only partially funding H.R. 1180. The Ways and Means majority ignored committee jurisdiction to include Medicaid offsets in H.R. 1180, then refused to cooperate on a noncontroversial offset for which the Committee on Commerce has primary jurisdiction.

Apparently some Committee on Ways and Means members' feathers were ruffled that the Committee on Commerce would even suggest the Medicare part B offset. Somehow they felt justified in claiming the Committee on Commerce had overstepped our jurisdiction. In fact, of the two committees, the Committee on Commerce is the one that did not attempt to overstep its jurisdiction.

Republican Ways and Means leadership claims the administration refused

to lift a finger to help find offsets for this bill. I was there. I can assure my colleagues that this assertion is patently false. As a matter of fact, the administration helped us identify the very offset that the Committee on Ways and Means refused to accept. Basically, the Committee on Ways and Means majority leadership broke the rules to fund the pieces of the bill they liked and co-opted the rules in attempt to kill the sections of the bill they did not like, and none of their actions reflects what is best for the disabled community or for American taxpayers.

The original Work Incentive Act that passed out of the Committee on Commerce has well over a majority of Members of this body sponsoring it. H.R. 1180 funds Medicare and Medicaid options for disabled individuals who want to return to work. It funds a demonstration program, the goal of which is to prevent disabled individuals from being forced to leave a job because of a degenerative illness. Ignoring for a moment what our values as a Nation say about supporting the effort to contribute to society, let us talk dollars and cents. The work incentives bill enables disabled individuals to work instead of being dependent on cash assistance.

□ 1600

The effect of the bill is to reduce the cost of cash assistance programs. Knowing they will have health insurance should they return to work, disabled people would not need to remain dependent on cash assistance. We should be considering full funding for H.R. 1180, which means we should be considering the Commerce bill.

Finally, Mr. Speaker, I want to address the issue of offsets. The majority cited the fact that offsets have not been agreed upon as a justification for weakening this bill. I have to say that concerns raised by the majority are more than a little ironic given their arbitrary application of pay-as-you-go rules. The \$792 billion tax cut bill had no offsets nor did the \$48 billion tax cut for buying health insurance. Both bills are touted as helping one population, but in reality, help another.

The tax bill ostensibly would provide the bulk of the tax cut to those Americans who make up the majority of the population and happen to need the money; that is, to low- and middle-income families. Simply not so. The access bill ostensibly would expand access to those most likely to be uninsured and least able to afford coverage. Again, not so. These bills generally skip over those in need of help and help those with influence.

In contrast, the Work Incentives Act which we know would actually help the intended beneficiaries, people with disabilities, apparently has been slashed by the Committee on Ways and Means for the lack of considerably fewer dollars in offsets. Apparently, there is one set of rules for bills that aid Americans with money and power and another set

of rules for those bills that help the less fortunate.

Mr. Speaker, I am going to vote for this bill. I expect and hope a majority of our colleagues will vote for this bill, but I hope those who underfunded this version of H.R. 1180 will reconsider and work with us in conference to achieve the strongest bill possible.

Mr. HULSHOF. Mr. Speaker, I yield myself 30 seconds.

I am disappointed, Mr. Speaker, that the gentleman from Ohio who just spoke would take such a negative tone. This really was an effort to reach bipartisan consensus. In fact, I would point out to the gentleman that in the last Congress, by a vote of 410-to-1, we passed a Ticket to Work piece of legislation and made vast improvements to that bill, and that is the bill that is in front of the House today. I would regrettably urge the gentleman to support the bill.

Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. CUNNINGHAM).

Mr. CUNNINGHAM. Mr. Speaker, I rise today in support of H.R. 1180 in memory of a fine San Diegan who died last May, who died too soon, whose life work lives on.

Holly Caudill of San Diego, California was a vigorous and tireless advocate for persons with disabilities. She was a young lawyer, a native of the State of Washington, an assistant U.S. Attorney, and she was a quadriplegic. She died last year.

I would like to quote from San Diego Union Columnist Peter Rowe who was a preeminent teller of Holly's life and her advocacy. "There are thousands of people, there may be tens of thousands of people, just like her," said Cyndi Jones, Director of the Accessible Society Action Project, ASAP, a San Diego-based organization that lobbies on behalf of the disabled.

"If you are disabled and Washington, via Social Security or Medicare, pays some of your health bills, you cannot work. Without a job, there is a good chance you will end up on welfare."

Holly fought until the very last second not to be on welfare, to fight because she wanted to work, she wanted to be an active member of this society, but our government stopped it.

I laud the authors of this bill.

Mr. Speaker, I met Ms. Caudill some years ago in a meeting where she gave me the benefit of her experience. Notwithstanding the fact that she was eager and qualified to work, the existing system of medical benefits, disability coverage, and other government programs made productive work almost impossible.

A job with greater pay meant a severe reduction in benefits payments, providing a powerful disincentive against paid work for her and for other Americans with severe disabilities.

Her knowledge of the system, and her determination to succeed, together with support from others that she inspired, helped Ms. Caudill to continue to work and be a tax-paying citizen. When it came to this basic principle—that people who work for pay should not have the government arrayed against

them—Holly Caudill was second to none as a vigorous, determined, effective and inspirational advocate.

I recall most vividly that in the 105th Congress, at her request, I helped her to meet with House Speaker Newt Gingrich. He was the sponsor of H.R. 2020, the Medicaid Community Attendant Services Act, which would have made a greater amount of attendant services benefits payable under the Medicaid program. She had a long and wide-ranging discussion with the Speaker and his staff—about her life, about the Speaker's bill, and, most importantly, about how important it was to stop government programs from being such a barrier to work and dignity for persons with disabilities.

The Speaker himself remarked to me on several occasions about Ms. Caudill's vigor and determination, and what an inspiration she was.

With her advice, I was privileged to add my name as a cosponsor to H.R. 2020, which had 76 cosponsors at the close of the 105th Congress.

And in this Congress, I am honored to be one of 249 cosponsors of a similar measure introduced by the gentleman from New York, Mr. LAZIO, which is H.R. 1180, the Work Incentives Improvement Act.

The fact that this legislation is before us today is testimony to the power of Holly Caudill's message: that, in America, the system ought to work for people with disabilities, not against them, so that we all have a fighting chance to achieve the American Dream.

Mr. Speaker, Holly Caudill had the ability. She had the desire. She found the whole system aligned against her iron will to work. Yet she did work. She helped to make our system of justice work as an Assistant U.S. Attorney, while she so vigorously advocated for justice and dignity in work for persons with disabilities.

Before she reached her goal, of an America where people with disabilities could work and enjoy the fruits of their labors, our Heavenly Father brought her home. There are no wheelchairs there, Mr. Speaker.

Let the permanent Record of the Congress of the United States today note that Ms. Holly Caudill, Assistant U.S. Attorney in San Diego, California, was an inspiration to me and to many others, and a friend of America. May God rest her soul, and give peace to her family, friends, co-workers, and to so many others that she touched.

Today, by adopting this bill, we help to remember well her life's purpose.

Mr. MATSUI. Mr. Speaker, I yield 3 minutes to the distinguished gentleman from the State of Maryland (Mr. CARDIN), the ranking member of the Committee on Ways and Means and the Subcommittee on Human Resources.

Mr. CARDIN. Mr. Speaker, I want to thank the gentleman for yielding me this time and thank him for the work that he has done on this very important legislation. I want to compliment the leadership of both the Committee on Ways and Means and the Committee on Commerce on both sides of the aisle.

I think the gentleman from Ohio (Mr. BROWN) has pointed out that we have not completed our work yet, but this is a good bill. This is a bill that we need

to move forward, and I do hope that it will be even strengthened as it moves through the Senate, the other body, and through conference.

Mr. Speaker, we are talking about 4.7 million Americans who are currently on SSDI, Social Security Disability, and 4.3 that are on SSI. Of this number, only about 10,000 move off the rolls every year to work. That is not acceptable for this Nation.

Let me just talk economics for a moment, if I might. For every 1 percent of the disabled that we can move off of SSDI and SSI into work, we save during their beneficiary's lifetime \$3 billion in benefits. So it is in our financial interests to work to get people who are on disability to work.

The problem is that the current system puts too many barriers in the way for people to leave the disability rolls to work. People want to work, but our system prevents them from working. What the Ticket to Work legislation does is provide more providers, a choice of providers, to help people with disabilities to become gainfully employed. It offers incentive payments so that the provider has incentives to work with the beneficiary to get the individual a job, to get the individual employed.

It removes the disincentives. Perhaps the greatest disincentive is health benefits. Currently, only 35 percent of the people who leave disability to get gainful employment find health insurance, and yet if one is disabled, it is virtually impossible for one to leave the disability rolls where one has guaranteed health benefits unless one has health insurance.

So what this legislation does is provide a way that we can continue health benefits for people who work off of the disability rolls. That makes sense for the individual, it makes sense for us.

We also make it easier for an individual to be able to get back on cash assistance if the work experience does not work. We want people to take the risk to go to work. If it does not work, we should be able to come back and help that individual. We have taken care of that particular problem.

Mr. Speaker, we brag, both parties, about how low the unemployment rates are in this Nation. We are very proud of what we have been able to do with our economy, and yet, for the disabled population, the unemployment rate is 75 percent. That is unacceptable. We need to do something about it. The Ticket to Work legislation is aimed at reducing that unemployment number to help people become employed. This is a good step forward; I hope that we can improve it as it goes through the process, but I would urge all of my colleagues to support the legislation.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from Pennsylvania (Mr. ENGLISH).

Mr. ENGLISH. Mr. Speaker, it seems axiomatic that every American should have the right to aspire to the American dream. In America, every citizen

should have the opportunity to participate in our economy to the extent of their talent or abilities in order to claim their stake in the American dream. Unfortunately, many individuals with disabilities have had the American dream recede beyond their reach, not because of physical limitations, but because of roadblocks created within our system of social services. These artificial barriers unfairly and arbitrarily reduce work force participation and economic opportunity for many of these Americans who want to work.

Mr. Speaker, the time has come to empower these Americans to participate fully in the cornucopia of our national economy.

I rise in strong support of this legislation, a bill that would empower citizens with disabilities by improving their access to the job market, extending their health care coverage when they participate in the work force, and by selectively liberalizing the Social Security earnings limit. These changes are long overdue and need to be regarded as an initial modest step in the direction of giving those among us with disabilities greater control over their own destiny and ultimately freedom.

Mr. MATSUI. Mr. Speaker, may I inquire as to how much time each side has remaining?

The SPEAKER pro tempore (Mr. BURR of North Carolina). The gentleman from California (Mr. MATSUI) has 14 minutes remaining; the gentleman from Missouri (Mr. HULSHOF) has 17 minutes remaining.

Mr. MATSUI. Mr. Speaker, I yield 3 minutes to the gentleman from California (Mr. WAXMAN).

Mr. WAXMAN. Mr. Speaker, no group is more deserving of our support than persons with severe disabilities who want to work and be contributing members of society but who need help, particularly medical help, to be able to work. And, no public policy makes more sense than providing that support at a stage that will prevent a potentially severe disability from getting worse.

Both of these things are what this bill is about. That is why I recommend that members vote for it and move this process forward into conference with the Senate.

Of course, I regret that the House does not have the opportunity today to pass H.R. 1180 as it was reported out by the Committee on Commerce with unanimous bipartisan support.

That legislation, which had some 247 bipartisan cosponsors in the House, provided, in my view, the most complete and necessary assurance of coverage for severely disabled individuals who need medical help to work, and provided assured support for State efforts to also help potentially severely disabled individuals from deteriorating to the point of complete disability before they can get help. It provided assurance of permanent Medicare cov-

erage, and it provided incentives to States to extend Medicaid services and establish the infrastructure to help assure help to these individuals.

This legislation falls short in several ways. It does, though, give us the opportunity to join in a conference with the Senate. It is good enough to take the steps to move this process forward, and I hope and expect that we will bring back to this House from the conference with the Senate a stronger bill, much closer in its provisions to H.R. 1180 as it was introduced. Clearly, there is much work still to be done.

I commend those who have worked so hard in support of this legislation. Groups representing the disability community have worked tirelessly to bring legislation to fruition. The President, who urged action in his State of the Union message, the members on both sides of the aisle in the Senate, Senators ROTH and MOYNIHAN, JEFFORDS and KENNEDY, in particular. In the House, the gentleman from New York (Mr. LAZIO), who introduced the original bill; the gentleman from California (Mr. MATSUI), who has been working in this area for a great deal of time and has produced a good bill out of the Committee on Ways and Means; and so many of our colleagues in the House all deserve credit that this legislation is moving today.

I urge support for the bill, but even more, I urge that we all work to better meet the promise we have made to those Americans facing or dealing with severe disabilities who want to work. They deserve the best bill we can give them. I hope when we send this legislation on to the President, it will be just that.

Mr. HULSHOF. Mr. Speaker, if the gentleman from California will indulge me, we have a handful of 1-minute speakers, and at this time I yield 1 minute to the gentleman from Arizona (Mr. HAYWORTH), my good friend.

Mr. HAYWORTH. Mr. Speaker, I thank my colleague from Missouri for his hard work on the Committee on Ways and Means. I rise in strong support of this legislation.

Mr. Speaker, I find it unfortunate that in the midst of this triumph for all of the American people, and especially the disabled, there are those on this floor who would come to deal with jurisdictional issues and inside baseball issues that at this point seem, quite frankly, rather petty.

I have heard from many of my constituents. A dear lady in Apache Junction, Arizona at our town hall meeting who came to point out to me that she wants to work, but that there have been disincentives that eventually barred her from the opportunity to work. This legislation deals with that problem. It allows her to get back to work.

Mr. Speaker, 75 percent of working-age adults with disabilities are out of work. That is the unemployment rate. That is what we are dealing with here, Mr. Speaker, not jurisdictional issues,

but a chance to give those people an opportunity to work, for the limits they have confronted are not physical, they are financial.

I rise in strong support of the legislation and I am pleased to urge its passage.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from Florida (Mr. FOLEY), another champion on the Committee on Ways and Means.

Mr. FOLEY. Mr. Speaker, I commend this legislation. I am pleased to join my colleagues in supporting the Work Incentive Improvement Act on the House floor here today.

It has been almost 10 years since the Americans with Disabilities Act was signed into law. This law was intended to remove barriers that prevent disabled individuals from enjoying a full life. It is ironic that many of the doors that were supposed to be opened by the ADA are still firmly closed because people who choose to work risk losing the health care benefits they desperately need. It is like giving someone a driver's license and telling them they are capable of driving a car, but charging them \$50,000 a year for insurance. They would not be able to drive unless they were rich.

For too long, many individuals with disabilities have not had the freedom that the rest of us have to pursue their goals and dreams.

□ 1615

They live in fear of losing the health care that is essential to their functioning independently. They have lived with the frustration of trying to enter a job market that is becoming increasingly technical and competitive. They cannot earn enough to buy a home on their own or to build up a savings account.

I hope that this Ticket to Work Act will ease some of this fear and frustration and restore a sense of freedom.

We all know the barriers in discrimination still exist with the disabled as with other groups in society; but if we could pass this bill, it will have another significant step toward removing these barriers. A disability should not be a hindrance to achieving the American dream.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. HERGER), another member of the Committee on Ways and Means.

Mr. HERGER. Mr. Speaker, I rise today in strong support of the Ticket to Work and the Work Incentive Improvement Act. I am particularly pleased that this legislation includes a provision that I offered, the Criminal Welfare Prevention Act Part Two, which will save taxpayers millions of dollars by bolstering efforts to deny fraudulent Social Security benefits to prisoners.

My original Criminal Welfare Prevention Act has enabled the Social Security Administration to establish a system for cutting off these fraudulent government benefits. This new provi-

sion included in the legislation before us today will improve this system; thus, saving taxpayers an estimated \$123 million over the next 5 years.

I want to thank the gentleman from Texas (Chairman ARCHER), the gentleman from Florida (Chairman SHAW) and the gentleman from Missouri (Mr. HULSHOF) for their continued support. I look forward to seeing this worthy legislation enacted into law.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from Kansas (Mr. MORAN), my good friend and classmate.

(Mr. MORAN of Kansas asked and was given permission to revise and extend his remarks.)

Mr. MORAN of Kansas. Mr. Speaker, in this chorus of accolades, and I wholeheartedly support the original intent of this bill, in fact I am a cosponsor of H.R. 1180, improving the current system to provide real choices for people with disabilities is essential; but unfortunately, this bill we are considering today is not H.R. 1180. This bill includes troubling language from the substitute bill which will cost Kansans and other State school districts millions of dollars.

Section 408 of this bill would impact medicaid funding for school districts and their education of disabled children. 408 precludes or significantly restricts the use of bundled rates. The bundling system allows schools to minimize paperwork for billing, rather than individual services provided to each child.

Kansas is one of seven States that has a HCFA-approved bundling system. This administrative change will impose burdens, economic costs upon our schools to the tune of \$17 million.

Mr. Speaker, small schools are struggling today to survive and in the time and cost it takes to package this reimbursement opportunity we will not be able to afford the reimbursement.

Mr. Speaker, I ask that the conferees take a look at this provision.

Mr. MATSUI. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Texas (Mr. DOGGETT).

Mr. DOGGETT. Mr. Speaker, as an original cosponsor of this measure back in March, I was particularly pleased when it received the unanimous approval of the United States Senate. However, I dissented from this particular version of the bill when it was before the Committee on Ways and Means because some last minute changes in the bill changed its form and substantially weakened it.

I am pleased that today a number of further amendments have restored much of the harm that was done prior to the Committee on Ways and Means meeting. My concern has been that without the guarantee of health insurance this will not be for individuals with disabilities a ticket to work. It will be a ticket to nowhere.

It is essential that these provisions be fully funded and guaranteed to individuals with disabilities so that we

have more than a title to the bill; we have something that is meaningful for the many Americans who have disabilities and want to work in the labor force.

A second concern was the effect on individuals who are HIV positive, who have Parkinson's Disease, multiple sclerosis, or some other type of disease which allows them to work now and who do not want to have to leave their job in order to get insurance benefits. It is my understanding that these last-minute amendments that have been made today address those concerns, and so I applaud them.

I think to the extent that we are returning to the bill that a total of 247 Members of the House cosponsored we are moving in the right direction. Certainly, I agree that this bill must be fully paid for, as with any other measure, and that we not dip into Social Security funds. However, I can say that in the Committee on Ways and Means, there was no visible effort to pay for the abandoned provisions, and the one pay-for that was included in this bill is a new tax that is simply going to make it more difficult for people with disabilities to secure the representation they need in combatting a Social Security Administration which is often not sympathetic to their concerns.

It is still flawed, but in order to move the process along my vote today is for a flawed bill, with the hope that the Senate will hang as tough as it did in the last session and give us truly meaningful legislation.

Mr. HULSHOF. Mr. Speaker, I yield 1½ minutes to the gentlewoman from Maryland (Mrs. MORELLA).

(Mrs. MORELLA asked and was given permission to revise and extend her remarks.)

Mrs. MORELLA. Mr. Speaker, I want to thank the gentleman from Missouri (Mr. HULSHOF) for yielding to me, and for his work on the bill; the ranking member, the gentleman (Mr. MATSUI); the gentleman from New York (Mr. LAZIO), who has been so involved with H.R. 1180. This is a great bill.

Mr. Speaker, today's demographics show that there are about 54 million Americans living with a disability, almost 20 percent of our constituents. They are our largest minority. Further studies show that individuals with disabilities are the most underemployed, among the poorest also of our citizens.

H.R. 1180, the Work Incentives Improvement Act, will assist Americans with disabilities to become gainfully employed and self-reliant.

I am pleased to rise in strong support of this critically needed legislation.

The bill takes an essential step toward reforming Federal disability programs and removing the barriers to work. By passing this legislation, it is going to help people with disabilities to go to work and become productive members of our society and to become taxpayers instead of tax users.

People with disabilities should not have to choose between working and

maintaining access to necessary health benefits. Current law puts people with disabilities in a Catch-22 situation. The risk of losing health care benefits under the Medicare and Medicaid program is a terrible disincentive for millions of beneficiaries of both SSI and SSDI. This bill would remove these fears and risks by allowing disabled individuals to keep their Medicaid benefits such as personal assistance and prescription drugs while they take their job.

We are going into the Information Age. We are having trouble keeping up with employment, the demand for technology personnel. If we are going to stay on top, we have to make sure that we utilize all of our talent. This is a good bill.

Mr. Speaker, today's demographics show that there are about 54 million Americans living with a disability, almost 20% of our constituents. They are our largest minority. Further studies show that individuals with disabilities are the most underemployed, and among the poorest of our citizens. H.R. 1180, the Work Incentives Improvement Act, will assist Americans with disabilities to become gainfully employed and self-reliant, and I am pleased to rise in strong support of this critically important legislation.

H.R. 1180 takes an essential step toward reforming federal disability programs and removing the barriers to work. Passing this legislation will help people with disabilities to go to work and become productive members of society, to become taxpayers instead of tax users.

People with disabilities should not have to choose between working and maintaining access to necessary health benefits. Current law puts people with disabilities in a Catch-22 situation. The risk of losing health care benefits under the Medicare and Medicaid program is a terrible disincentive for millions of beneficiaries of both the SSI and SSDI programs. H.R. 1180 would remove those fears and risks by allowing disabled individuals to keep their Medicaid benefits, such as personal assistance and prescription drugs, when they take a job.

This is an ideal time for us to remove barriers and help disabled Americans return to work. Our economy is one of the most dynamic and diverse in history, and the unemployment rate is low. We have achieved a level of technological advancement unequaled around the world.

However, while we are leading the world into the Information Age, we are having trouble keeping up with the demand for new technology personnel. If we are to stay on top, we must promote legislation, such as H.R. 1180, that will ensure economic vitality and enhanced opportunities for all Americans. If we are to stay on top, we must make sure that we are utilizing 100% of our talent.

We must give people with disabilities a chance to unleash their creativity, to become productive members of society, and to fulfill their dreams. Disabled individuals are part of the American family. They are here to participate and teach us as well as to learn with us. We must give them the opportunity to be accepted by everyone in their community, and to live and work in regular environments. We can do this by passing the Work Incentives Improvement Act.

I urge a "yes" vote on H.R. 1180.

Mr. MATSUI. Mr. Speaker, I yield 1 minute to the distinguished gentlewoman from California (Ms. LEE).

Ms. LEE. Mr. Speaker, I first want to thank my colleague, the gentleman from California (Mr. MATSUI), for yielding and for his strong commitment to justice for all.

Some of us here in this House have members of our families who are disabled, and so I just want to thank all of the cosponsors and all of the supporters of H.R. 1180 for that, on a very personal level.

We know that the current system is extremely frustrating for disabled people eligible for Medicaid. This bill will help disabled workers by extending the period of Medicaid coverage as needed. It also creates options for States by removing senseless limitations for workers with disabilities.

Now, many of these individuals who can work want desperately to contribute to society and to become self-sufficient. However, the current system of cumbersome Federal regulations and conflicting rules discourage and block many qualified, competent, and energetic individuals with disabilities from the world of work.

They can provide our Nation with tremendous resources, experience, and knowledge by directly investing their abilities in the workforce. We are currently denying our Nation the talent of these individuals and limiting their ability to exhibit their untapped resources. So let us stop limiting the rights of so many competent people. Let us pass 1180 on a bipartisan vote and send the right signal so that so many eager and valuable Americans may be included.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from New Hampshire (Mr. BASS).

Mr. BASS. Mr. Speaker, I rise in strong support of the legislation before us today. I believe that Government certainly has a legitimate role to provide assistance for those who are truly in need, but the fact is when Government traps people in poverty, out of work year after year, that is not a program that works.

What this piece of legislation will do, in a common sense fashion, is allow disabled Americans to go back into the workforce without losing their health care. It will help them in a time of high technology. It will help them be empowered to get back into the workforce.

True compassion in government empowers people, Mr. Speaker. It does not hold them down.

With the unemployment rate amongst disabled individuals in excess of 75 percent, it is time we passed a piece of legislation in an environment where unemployment is at historic lows. It will bring these people into the workforce and do it in such a fashion so they will be able to maintain their health care. So I strongly support this piece of legislation and urge that the Congress adopt it.

Mr. MATSUI. Mr. Speaker, I yield 2 minutes to the distinguished gentlewoman from Wisconsin (Ms. BALDWIN).

Ms. BALDWIN. Mr. Speaker, I rise in strong support of the Work Incentives Improvement Act, this important legislation that removes the disincentives that people with disabilities face when entering or reentering the workforce. I also rise in strong tribute to my friend Charlie.

I want to say a little bit about my friend Charlie. I met him one day on the campaign trail as I was running for Congress. I walked into my headquarters, and there he was working incredibly hard early in the morning. I left for a variety of appointments and came back in the afternoon and Charlie was still there working very diligently. I left for further appointments and I came back, and into the evening hours Charlie was still working.

At the end of this long day, I walked up to Charlie, and I said, "Thank you so much for all you are doing to help me."

Charlie corrected me very quickly. He said, "I am not doing this to help you. I am doing this to help myself."

Charlie has a very significant disability. He also has a simple dream. His dream is to finish up school and to get a job, but he can't afford to risk losing the benefits for health care and other things that make a difference in his life.

Charlie and the many that he symbolizes have so much talent and energy to give our economy and our country. This legislation is also going to help Wisconsin's newly developed Pathways to Independence program. Pathways has already demonstrated that people with disabilities can work with the right support and assistance and encouragement.

It is time to pass this legislation and, I might add, provide the appropriate funding to remove the barriers that keep people with disabilities from becoming fully contributing members to our communities.

Mr. HULSHOF. Mr. Speaker, I yield 1 minute to the gentleman from Illinois (Mr. WELLER), another member of the Committee on Ways and Means, and my seat mate.

(Mr. WELLER asked and was given permission to revise and extend his remarks.)

Mr. WELLER. Mr. Speaker, let me first begin by commending my seat mate, the gentleman from Missouri (Mr. HULSHOF), for his leadership on shepherding this important legislation, which is in response to a question that I have heard often back home. I remember when representatives of the Will County Center for Independent Living came into my office shortly after I was elected and they said, We understand that under current laws and under current rules that it is really difficult, if you are disabled, to work; that there are limitations that make it hard for us to participate in the workforce, and they asked for help.

I am pleased that this Congress, this House, is moving forward with this ticket to work legislation, legislation designed to give those with disabilities the full opportunity to participate in today's workforce.

Unfortunately, our current system makes it difficult, in fact, to the point of difficulty where many of those who are disabled are discouraged and, in fact, almost afraid to seek work. They are most concerned that they will lose their benefits they currently have and wondering if they have further health conditions, what it means for them.

This legislation addresses that, giving those with disabilities a full ticket, punching their ticket so they have the opportunity to work. It deserves bipartisan support. I commend the gentleman from Missouri (Mr. HULSHOF) for his leadership and I urge a bipartisan yes vote.

□ 1630

Mr. MATSUI. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from Texas Mr. BENTSEN.)

(Mr. BENTSEN asked and was given permission to revise and extend his remarks.)

Mr. BENTSEN. Mr. Speaker, I rise today to express some concerns regarding consideration of H.R. 1180, the Work Incentives Improvement Act. As a cosponsor of the original legislation, I am pleased that the House is taking this up. But I do have some concerns.

The gentleman from Arizona Mr. HAYWORTH) earlier said that it was petty to be concerned about the fact that we did not follow the regular order in this bill. But while we are concerned and supportive of the underlying scope of this bill, some of us are also concerned about what the impact of the offsets of this bill will do on school districts.

In my State of Texas and in my home district, I have the La Porte School District, which is the lead school for a consortium of 200 small and rural Texas school districts. They do not think it is petty at all that this bill might squeeze them on their reimbursement under the Medicaid administrative claiming program.

In fact, Members, particularly Members from the other side might be coming over and saying this is some sort of an unfunded mandate that we are putting on the local school districts. So I do not think it is petty at all.

We have 4½ million children in this country who have no health insurance but are eligible for Medicaid, and we are asking the school districts to help us in screening these children to get them into the Medicaid Program. My home State of Texas leads the Nation in uninsured children. In this bill, we are going to make that problem worse. So I do not think that is petty at all.

The underlying bill is good, but there are some real problems. I know the staff has been working overnight to try to work this out, but the staff are the only ones who know what is in this bill.

It is not like we are in a big rush. We have not finished our budget. We are going to be here next week and the week after. I think following the regular order and making sure we do not stick it to the school districts back in our home districts in our home States maybe was not such a bad idea because all of us, or certainly the vast majority of us, including this Member, agree with what the intent of the bill is. But the process is not very good, and I do not think the majority really wants to stick it to the school districts either.

So, hopefully, in the conference, the staff can get together and work this out, and we can get a bill that everyone can approve of.

Mr. Speaker, I rise today to express my concerns regarding consideration of H.R. 1180, the Work Incentives Improvement Act. As a cosponsor of the original legislation, I am pleased that the House of Representatives will be voting upon this legislation on an expedited basis. However, I am concerned that this legislation will be considered under the suspension calendar and is not subject to amendments. And I am concerned about the offsets included in this bill.

Last Thursday, during consideration by the House Ways and Means Committee of this bill, the House Republican Leadership added several provisions to help pay for the Medicaid benefits included in this bill. Unfortunately, these offsets could be detrimental to local school districts which are helping to screen children for Medicaid eligibility. According to the U.S. Census Bureau there are 4.4 million children who are eligible for, but not enrolled in, Medicaid. I believe it is wrong to include provisions included in this measure that threaten the Medicaid Administrative Claiming (MAC) expenses paid to local schools and increase the number of uninsured children. In my district, for example, the La Porte School District is the lead school district for a consortium of 200 small and rural Texas school districts participating in this program. These offset provisions would require the Health Care Financing Administration (HCFA) to issue new regulations related to this program that would make it more difficult to administer and may lower reimbursements to schools. I am pleased that these regulations would require consultation with public schools, but I am concerned about their impact on smaller school districts.

This "one-size-fits-all" regulation would restrict payments for contracts related to this program. This offset section includes a provision requiring a competitive bidding process for such contracts as well as a restriction on contingency fees. As a result, many of the 200 school districts in the Texas consortia would likely drop this program. Since there is only one private company currently providing such services, I am concerned that competitive bidding may not be possible in the short term. Also, the restriction on contingency fees could reduce incentives for private companies to develop the software necessary for these outreach screenings. As a result, only the largest school districts would continue to participate in these programs. It would not be economically feasible for our nation's smallest school districts to develop and maintain software for their individual system. The consortia provide a mechanism whereby these smaller, but less

urban school districts can help with Medicaid screenings. Although fraud and abuse in Medicaid must not be tolerated, this provision is not the right answer. In Texas, schools receive a total of \$14 per child who is deemed eligible for Medicaid.

I am also concerned that these provisions were added to this bill without consultation with the House Commerce Committee, which has exclusive jurisdiction over Medicaid programs.

Regardless of my concerns, I will support final passage of this bill because it would ensure that disabled persons can keep their health insurance when they return to work. I will work with conferees on this legislation to make appropriate changes to protect local school districts. Under current law, disabled persons who are eligible for social security disability benefits are precluded from earning significant income without losing their Medicare or Medicaid health insurance. This bill would permit disabled persons to work while maintaining their health insurance coverage. For many disabled persons, this health insurance is critically important since they can neither afford nor purchase health insurance in the open market. This bill would provide SSDI beneficiaries with Medicare coverage for 10 years, instead of the current 4-year term. This legislation also provides vocational rehabilitative services to disabled persons to ensure that they can receive the training they need to become more self-sufficient. I support all of these provisions.

I urge my colleagues to support this legislation with the caveat that these offset provisions should be revised in order to protect local school districts.

Mr. HULSHOF. Mr. Speaker, I am happy to yield 1 minute to the gentlewoman from New Mexico (Mrs. WILSON), another classmate of mine.

Mrs. WILSON. Mr. Speaker, about a year ago, Zig and Charlene Piscotti came to visit me in Albuquerque. Their daughter is disabled, and she works at Kirkland Air Force Base, and she works as an hourly employee. But they told me they had to be careful to make sure that their daughter could not get more hours than she could afford because she could potentially lose her eligibility for Social Security.

They knew that they were not going to be around forever. Their daughter is in independent living. She is doing very well. But the last thing they wanted was their daughter to lose Social Security benefits because they knew, if she lost those benefits and then had a reduction in her hours, it would be very hard and time consuming for her to get back on those benefits.

This bill is for Michelle. It allows her easy-on provisions so she can go back to work as much as she wants to at Kirkland Air Force Base and do as well as she possibly can in the work force without that fear of not being able to get back on Social Security if her hours are cut back. I commend the gentleman for bringing forward his bill.

The SPEAKER pro tempore (Mr. BURR of North Carolina). The Chair would inform Members that the gentleman from California (Mr. MATSUI)

has 4 minutes remaining, and the gentleman from Missouri (Mr. HULSHOF) has 8½ minutes remaining.

Mr. HULSHOF. Mr. Speaker, I am happy to yield 1 minute to the gentlewoman from Connecticut (Mrs. JOHNSON), another tireless advocate for this bill, and a trusted Committee on Ways and Means member.

Mrs. JOHNSON of Connecticut. Mr. Speaker, I rise in strong support of this legislation and commend my House colleagues on funding it. It was frustrating to have the Senate vote 98 to 2 for it. But without any money and without the means, where is the promise?

I want to just say that work may be the one thing that matters most in our lives. It is the means by which we achieve our dreams. It is the means by which we come to know ourselves. Stretching ourselves, challenging ourselves at work, develops our minds, develops our skills.

We have passed in this Congress legislation to prevent discrimination against people with disabilities in the workplace. We have passed legislation to provide training and education for people with disabilities so they can participate in the workplace. Today we knock down what is probably the last and one of the biggest barriers to that freedom to work, the barrier of health insurance.

With this bill, they will not have to fear losing their health insurance. If they want to work more hours, if they want to develop themselves further, they will know that, with a relapse, they will be able to come back to the program.

This is for the people at Prime Time and throughout my district, the disabled who want to work and see us as standing in their way. We are getting out of the way with this bill.

Mr. HULSHOF. Mr. Speaker, I am happy to yield 1 minute to the gentleman from Connecticut (Mr. SHAYS).

Mr. SHAYS. Mr. Speaker, I appreciate the gentleman from Missouri yielding me this time. I just want to say that I think I came in part because I wanted to debate something where we could be bipartisan, something where we could talk about the real needs of our communities.

I have people with disabilities who want to work. Yet, if they work, they make less and have less benefits than if they stay home. So I just applaud my colleagues for bringing this legislation forward. It makes tremendous sense, I say to the gentleman from New York (Mr. LAZIO) in particular and the gentleman from Connecticut (Mrs. JOHNSON) who just spoke.

The bottom line is, under our current system, the government pays for health benefits for people with disabilities who do not work, but is unwilling to pay for those same benefits when people with disabilities get a job. We are going to change that, and it is about time.

Mr. MATSUI. Mr. Speaker, I yield 2 minutes to the distinguished gentleman from California (Mr. BECERRA).

(Mr. BECERRA asked and was given permission to revise and extend his remarks.)

Mr. BECERRA. Mr. Speaker, I thank the gentleman for yielding the time, and I also thank him for his efforts over the past several years to try to move us to the point where we now have legislation that we can move to the President for signature.

As I said, I rise in support of H.R. 1180, the Work Incentives Improvement Act, more because we are finally going to be able to remove a barrier that laws have imposed on people who have had the desire for quite some time to do simply what most of us take for granted; that is, to work. But simply because of the disability, many of these individuals have not been able to go forward with those desires to work. Simply because public policy has not caught up to their desire, they have found that they are either discouraged from taking a job or they are discouraged from keeping a job.

We must remove those barriers and make it possible for those who many of us would sometimes look at them and say, well, there is no way that they can work. We should applaud their efforts. Many of these folks, and I know all of us knows someone who has some form of disability, are out there in the work force doing tremendous work out there. We applaud those efforts.

But to think that, because laws that Congress passed some time ago made it very difficult for these individuals to continue to work full time or for a full year oftentimes decided it was better not to even start. So this is a good step forward.

I would also underscore the admonition by the gentleman from Texas (Mr. BENTSEN) regarding the pay fors. We have to make sure that, in the process of doing good, we do not do harm to some other program where we must seek money to pay for this program.

But, certainly, at the end of the day, I would hope that we realize that someone who has shown the desire to work and has shown the ability to work is given that opportunity.

All we have to do is make sure that someone who says I want that opportunity has that chance to, not only work, but also keep Medicaid if that is essential for the person to continue to just exist, to live, not just let alone work.

We could talk about a lot of examples, but I can mention one real quickly, and that is my father. He has got a bum knee. He has had an operation on his knee. His tendons have been shot in both hands for several years where he has had to have them split open, the tendons split so that he could have movement in his fingers. Of course, he has had cataract surgery for his eyes. Yet he still works at the age of 70; day in, day out. He does not stop. I suspect there are millions of Americans who would do the same. Let us pass this bill.

Mr. HULSHOF. May I inquire, Mr. Speaker, of the time remaining.

The SPEAKER pro tempore. The gentleman from Missouri (Mr. HULSHOF) has 6½ minutes remaining. The gentleman from California (Mr. MATSUI) has 2 minutes remaining.

Mr. HULSHOF. Mr. Speaker, I yield myself 1½ minutes.

Mr. Speaker, 50 years ago, the only President of the United States from the show-me State, Harry S. Truman, set a goal for our Nation to give every American with a disability the chance to play a full part in strengthening our Nation and sharing in the greatest satisfaction of American life, that being independence and the right to self-supporting and self-reliance.

But, yet, even as we continue to enjoy low unemployment, as the gentleman from Maryland mentioned at the very beginning of this debate, three out of four individuals with disabilities remain unemployed. The vast majority want to go back to work. How often do we have a segment of the population that comes to Washington to say we want to be taxpayers?

Yet, as many Members have taken to the floor to talk about constituents, a constituent of mine, Rich Blakely from Columbia, Missouri, the former executive director of the Services for Independent Living, came to our committee at his own expense to talk about the barriers that are in place.

For instance, going to vocational rehabilitation, the question is, "Can you go back to work?" The answer to that one government agency is, "Yes, I can." Yet, in order to qualify for SSDI or SSI benefits, when that agency asks, "Can you work?," the answer has to be "no." So there is inconsistency even among these agencies as we try to help these individuals regain their independence.

Now, I think this bill is a major step forward, especially considering the ticket to work bill that we had on the floor last year. We made some strong concessions.

It happens that October is National Disability Employment Awareness Month, and I can think of no better way to celebrate that event than to pass this ticket to work bill. I urge its adoption.

Mr. MATSUI. Mr. Speaker, I yield 1 minute to the very distinguished gentleman from Maryland (Mr. HOYER).

Mr. HOYER. Mr. Speaker, I thank the gentleman from California for yielding me this time.

The gentleman from Missouri (Mr. HULSHOF) mentioned Harry Truman's remarks about the disabled community. I had the privilege of cosponsoring the Americans with Disabilities Act that President Bush signed in July of 1990. That bill said that we were going to give opportunity to 43 million Americans who were disabled.

What this bill does, as the gentleman from Missouri (Mr. HULSHOF) has pointed out and as the gentleman from California (Mr. MATSUI) has pointed out so well, is to facilitate the entry into the workplace for those who, but for this

bill, may not be able to risk it or afford it.

The good news is that the bill for a portion of time made optional the payment of some of these expenses. I want to thank the committee and those who worked on this bill to reinstall the mandatory nature under Medicaid of the payments that have been provided for. That is essential not to discriminate against those who might be disabled and who do, as the gentleman has said, want to enter the workplace, want to be taxpayers, and want to enjoy the full opportunities that America has to offer.

Mr. MATSUI. Mr. Speaker, I yield myself such time as I may consume to close now.

Mr. Speaker, I am just going to close by saying that everybody has really acted in good faith on this legislation. It has been a very, very difficult piece of legislation. It has had a number of committees involved in it. Obviously, feelings were very high, and there were a number of components to this legislation. But I think it is well taken on both sides of the aisle, both Republicans and Democrats have problems with some of the offsets.

When we get into conference, it is my hope that we will have time to vent some of these issues, find out what the implications of them are, which I am sure everybody will want to do, and then come up with a very good piece of legislation.

We should try to finish this before we leave, otherwise, undoubtedly, if we go into the year 2000, it could get stale, and advocacy groups will, maybe, lose some kind of involvement in it. So we need to finish this quickly. But we really need to know the implications of these offsets, because they have come up at the last minute.

I urge strong support of this legislation. Everybody works hard in good faith, and we need to do this for the disabled of America.

Mr. HULSHOF. Mr. Speaker, I yield the balance of our time to the gentleman from New York (Mr. LAZIO).

Mr. LAZIO. Mr. Speaker, I do not think in my four terms in the House that I have ever felt better or stronger about a piece of legislation than I do about this one.

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Nearly 7 months to the day I introduced H.R. 1180, and 5 days after that we had the first hearing on it. It was introduced with bipartisan spirit. And I want to thank the gentleman from California (Mr. MATSUI), the gentleman from California (Mr. WAXMAN), the gentleman from Virginia (Mr. BLILEY), and the gentleman from Texas (Mr. ARCHER) for their continued and sustained support throughout all the difficulties in bringing this bill forward.

In my mind's eye, Mr. Speaker, this is the most dramatic breakthrough for Americans with disabilities since the Americans with Disabilities Act. It is a major stride forward, and I think it is

one of the most important pieces of legislation that this House will consider not just this year but this entire session. Why? Because it opens up opportunities. Because it empowers Americans with disabilities. Because it says to people who would otherwise stay home that they can have the courage to go to work because we are going to extend their health care benefits and give them the peace of mind to know that when they go to work and become a taxpayer they will not leave their family or themselves destitute. That is a false choice, Mr. Speaker, and we reject it today.

I am proud of the 247 cosponsors on both sides of the aisle who have stepped up and cosponsored H.R. 1180. I am proud of their work. I am proud of their patience. I am proud of their perseverance. This bill is supported by over 100 health care organizations and disabilities groups. I could name many, but I want to name at least a few: The United Cerebral Palsy Association, the National Alliance for the Mentally Ill, and the National Association of Development Disability Councils. It is also supported by major business groups, including the U.S. Chamber of Commerce, which speaks to the fact that our economy needs Americans with disabilities in the work force.

Over the last 3 decades, Mr. Speaker, America has made tremendous progress when it comes to empowering people. We have helped them with housing. We have tried to empower them through the Tax Code. We have tried to empower that for people with disabilities, and now we move forward. We have provided disabled Americans with social services that dramatically improve the quality of their lives. We have passed legislation to make it illegal to discriminate against them. We have made sure our businesses and public spaces are accessible to everybody. But disabled Americans still face barriers to their full integration in society. Today we tear those barriers down.

Mr. Speaker, most disabled Americans are heavily reliant on Federal health care and social services, assistance that makes it possible for them to lead independent, productive lives. But we have conditioned that assistance on them not working. People with disabilities must get poor and stay poor if they are going to retain their health care benefits, and that is just plain wrong. It is a perverse system and we need to change it today.

That is why we introduced this Work Incentives Improvement Act. This bill will help provide hope and opportunity for millions of Americans who have disabilities. It will improve Federal job training by giving disabled people new freedom to choose from various public and private sector employment services. It will help people continue their health care benefits.

Mr. Speaker, a 1998 Harris Poll surveyed disabled Americans, and in that poll 72 percent of disabled Americans said they want to go to work. How

many who are disabled are actually able to go to work and get off public assistance? One-half of 1 percent. We can do better and we will do better.

In the meantime, in this age of technological explosion, all the recent innovations in the field of assistive technology have made it far easier for disabled people to hold on to good jobs. There are hands-free mice, word prediction programs, on-screen keyboards, and increasingly sophisticated voice recognition software. This is all aimed at helping people achieve a higher quality of life.

But in the end, this bill is simply about empowering people to change their lives. This bill is for people like Tom Deeley, a developmentally challenged young man who holds a part-time job performing custodial services in Virginia. He testified before our Committee on Commerce. He is limited to working only 2 days a week because working more would jeopardize his health care benefits. He is a star in our community. He is a hard worker. He is eager to work full time. And his employer would love to have him work full time.

As a matter of fact, Tom has been named employee of the year in his firm. He has been awarded a \$200 bonus. And guess what our system says to Tom Deeley, who is developmentally disabled and loves to work? It says that he has to give that \$200 bonus back, that he cannot accept it. What kind of a perverse system holds that as a rule?

We are going to change that today and bring that curtain down. We are going to let Tom Deeley and others like him accept their bonuses for their hard work. We are going to rip down bureaucratic walls.

Mr. Speaker, we have come a long way. It is time to remove the barriers to integration for disabled Americans into society. Millions of Americans, Mr. Speaker, are waiting for us to give them a chance to pursue the American Dream. Today, let us tell them that their wait is over. Let us pass the Work Incentives Improvement Act with a unanimous vote.

Ms. SCHAKOWSKY. Mr. Speaker, I am a cosponsor and strong supporter of H.R. 1180, the Work Incentives Improvement Act of 1999. Access to health care is important to all of us. To persons with disabilities, it is critical. Unfortunately, current policies penalize those persons with disabilities who are able to work but, by doing so, lose access to Medicare and Medical coverage.

The loss of health care is the major reason why persons with disabilities are locked out of the workplace. According to the report issued last fall by the President's Task Force on the Employment of Persons with Disabilities, "(a)ccess to health care is accepted as the primary barrier to keeping people with disabilities outside the world of work." While 72 percent of persons with disabilities want to work and could be productive members of the community, the loss of health care coverage keeps them from doing so. H.R. 1180, as originally introduced, corrects this situation. It would

allow persons with disabilities to return to work and retain access to a broad array of services.

The bill before us today, however, is significantly different from H.R. 1180 as introduced. While I will support this version, I strongly urge the conferees to improve the Work Incentives Improvement in order to bring it closer to the provisions of the original bill. I am concerned that, despite last minute negotiations, the bill does not provide full funding to ensure that services will be available to Medicaid beneficiaries who return to work. Because this bill has been rushed to the floor with little chance for review and no chance for amendments, it has been difficult to analyze fully the impacts of those funding sources that have been identified. There are numerous ways to fully fund the Work Incentives Improvement Act without taking funding from other essential programs. I hope that the original provisions of H.R. 1180 will be restored in conference, and that we find funding sources that do not jeopardize critical health care programs such as school-based health care.

I am also concerned that just as we are working to help persons with disabilities move into the workforce, the new 6.3 percent attorney tax will harm other persons with disabilities receive their Social Security benefits. Legal representation is critical in Social Security disability cases—it often makes the difference between whether a person receives or does not receive disability benefits. Taxing the attorneys who help persons with disabilities receive the benefits to which they are entitled may mean that those persons never receive their benefits. I believe that this is an unwise and dangerous provision, and I hope that the conferees will eliminate it from the final bill.

We can act now to give persons with disabilities the opportunity to be productive members of their community. We can provide sufficient funding so that those who move into the workforce receive comprehensive, quality health care. And we can find this major initiative in a manner that is fair. I urge my colleagues to work for improvements in H.R. 1180 so that its full promise will be realized.

Ms. ESHOO. Mr. Speaker, I'm proud to count myself among the cosponsors of H.R. 1180 as it will truly improve the lives of people with disabilities by helping them to achieve self-sufficiency through employment. People with disabilities want to work yet our current system discourages them from doing so by taking away their health care coverage. This bill will undo this practice and provide job opportunities for the estimated 72 percent of Americans with disabilities who want to work yet remain unemployed.

Under existing law, when a person with a disability takes a job, they lose health care coverage through the Medicare or Medicaid programs. Yet private sector health coverage is often unavailable or unaffordable for people with disabilities specifically because of their disability. H.R. 1180 would allow states to extend Medicaid health care coverage to working people with disabilities who would otherwise be eligible but for their income.

We should not be forcing Americans with disabilities to choose between work and losing their health benefits or forgoing work in order to maintain them. Now, more than ever, thanks to innovations in medicine and technology, people with disabilities can and should be able to work. People with disabilities deserve to be able to contribute their talents and

skills to society and to have broad options for obtaining the care and services they need to be productive workers.

H.R. 1180 provides these services—services like Medicaid coverage and Tickets to Work. The bill also provides grants to states to develop infrastructures for working people with disabilities and for outreach efforts aimed at getting more people with disabilities to work.

We took the first step toward significantly improving the lives of people with disabilities when we enacted the Americans with Disabilities Act (ADA) in 1990. Thanks to that law, people with disabilities can no longer be discriminated against in hiring. With passage of H.R. 1180, we will take the next important step to ensuring that the thousands of Americans with disabilities who are offered jobs this year will be able to take them.

Mr. SWEENEY. Mr. Speaker, I thank the gentleman for the opportunity to address this important issue for people with disabilities.

I rise in strong support of the Work Incentives Improvement Act.

This legislation gives Americans with disabilities the freedom to achieve self-sufficiency through employment.

As Labor commissioner in New York State I worked to ensure that individuals with disabilities were given ample opportunity to return to work thus freeing themselves from the despair of dependency.

In doing this they are able to experience the dignity of self sufficiency.

Currently, people with disabilities are actually given incentives to stay unemployed because they often can not obtain adequate health care if they receive outside income.

In 1998, the National Organization on Disability found that 72 percent of unemployed Americans with disabilities want to go to work.

However, only 1 in 500 people receiving Social Security Disability Insurance ever returns to work.

Mr. John T. Svingala from Hudson, New York is one of the 72 percent of unemployed Americans with disabilities who, in his words, "can't wait to become a tax payer instead of a recipient."

Mr. Svingala is a 42-year-old diabetic, kidney transplant recipient.

Mr. Svingala is an educated man who was a dedicated physical education teacher in Hudson and Catskill, New York until he was no longer able to work because of his illness.

Unfortunately, if Ms. Svingala were to return to work, he would lose all of his unearned income and half his wages in order to access personal assistance coverage under Medicaid.

To remedy such circumstances, H.R. 1180 provides states with incentive grants to set up their own affordable Medicaid buy-in programs when Mr. Svingala and thousands like him go to work.

Individuals with disabilities represent a major untapped resource in the workplace of the 21st century.

Now is the time to remove barriers and enable people like Mr. Svingala to work. Congress has an obligation to help people with disabilities achieve their American Dream.

I strongly urge my colleague to vote in favor of the Work Incentives Improvement Act.

Mr. DOOLITTLE. Mr. Speaker, the bill currently before the House, H.R. 1180, the Work Incentives Improvements Act of 1999, allows the disabled to retain healthcare coverage that they would lose if they went back to work.

Under current law, after a nine-month trial work period, a disabled worker who receives Social Security disability benefits but earns more than \$700 per month will lose his or her Medicare health coverage. In addition, workers who receive Supplemental Security Income (SSI) disability benefits will lose their Medicaid coverage once their earnings reach the basis SSI benefit level. As a result, current law tends to trap individuals with disabilities to the system. In essence, individuals who try to work lose cash benefits, along with access to medical coverage they so desperately need.

H.R. 1180 would revamp present law so that individuals receiving Social Security Disability and Supplemental Security Income could return to work without losing Medicare or Medicaid insurance. It would also create a system of vouchers that could be used to purchase job training and rehabilitation services from government or private sources.

I support providing legislative relief and feel that it would help remove some of the most significant barriers to the employment of people with disabilities. However, I am voting against this bill because of a provision that would require the Social Security Administration to impose fees upon attorneys who represent disability claimants during the appeals process.

At present, when an attorney successfully represents a disability claimant and that claimant is entitled to past-due benefits, SSA withholds a portion of those past-due benefits in order to pay the attorney for the services he or she provided. The Work Incentives Improvement Act seeks to impose an "assessment" of 6.3 percent on all such payments to attorneys. I believe that this "assessment" is unnecessary in the context of this bill, and would likely deter some attorneys from representing disability claimants. The reliance on a user fee assessed on attorneys' fees in Social Security case to fund the important work incentives bill is poor policy. It would hurt many of the very people that work incentives legislation is designed to help.

I strongly hope that these differences can be resolved when the House and Senate come together to work on a final version of this bill. We need to enact legislation that fulfills the promise of the Work Incentives Improvement Act and does not harm those people with disabilities whom the bill is designed to assist.

Mr. RODRIGUEZ. Mr. Speaker, I rise in support of HR 1180, the Work Incentives Improvement Act of 1999. More than 100 organizations dedicated to helping people with disabilities support this bill and I welcome the concept behind allowing those who face obstacles help themselves.

However, I have grave concerns with the funding mechanism for this bill. The 6.3 percent user fee on SSI claimant representatives represents a blow to those who need able counsel in filing and guiding their SSI claim. The extensive time, preparation and expense in filing a claim for SSI disability creates barriers for many, and we are taking a step in the wrong direction by imposing a fee on those who provide this assistance.

As this bill progresses, I look forward to working with my colleagues in eliminating this user fee which would have a disproportionate impact on those who need representation in order to pursue their claim.

Mr. STARK. Mr. Speaker, this bill is a vitally important for disabled people in our country. It

will finally make changes to the disability system that will assist beneficiaries' desires to return to or enter the workforce. This should have been done years ago—and we should be doing more now. That being said, there is no question that this bill is a tremendous improvement from the status quo.

The most significant component of this legislation is that it will provide disabled people with the ability to maintain their Medicare coverage for ten years after returning to work.

Under current law, a disabled beneficiary who returns to work loses Medicare coverage after 4 years. That reality keeps people from even thinking about entering the workforce because losing disability status is not an easy thing to reverse. Maintaining health insurance is a priority for anyone, but for someone who is disabled, health insurance coverage is a lifeline they cannot afford to mess around with.

Stretching that Medicare eligibility time period to 10 years is a giant step forward. Of course, the real solution is making Medicare coverage permanent for a disabled person regardless of work status. I wish we were voting on that full provision today and I will certainly continue working toward that goal.

It is also worth noting that the process for this bill reaching the House floor has been horrendous. The Republicans have continued to play political games with this legislation every step of the way.

Until just before this debate began, we weren't even sure if this bill would contain important Medicaid components that were in both the Senate-passed version of the legislation and the House Commerce Committee bill. Those two provisions directly appropriate funds for grants to states to establish support services for working individuals with disabilities and funds for demonstration projects to the states to extend Medicaid coverage to a wider group of workers with potentially severe disabilities.

Those two Medicaid improvements are very important—they expand the number of people helped by this legislation and they are both strongly supported by the disability community.

I am pleased that the bill before us today does now include those key provisions, but it has been a struggle to make sure that was the case.

The Senate passed their version of this legislation unanimously more than 4 months ago. I don't understand why it's taken 4 months for the House to act, but I am glad this day is finally here. Let's pass this bill, get to conference, and enact this law which will finally correct a serious problem in our disability system by empowering disabled people to enter the workforce without fear of losing their health coverage.

Mr. DINGELL. Mr. Speaker, I am pleased that the Work Incentives Improvement Act has finally made it to the floor. This bill had its origins in the 105th Congress and has been accumulating an impressive array of support ever since. H.R. 1180, the Work Incentives Act as introduced by my colleagues Mr. LAZIO and Mr. WAXMAN, has 247 cosponsors. The Senate passed a similar bill by a vote of 99 to 0. Finally, the people whom his bill would benefit—the disability groups—have shown us how important this legislation is by campaigning tirelessly for its passage.

During the past months, the House has seen many controversial pieces of legislation. However, no one disputes the value of the

Work Incentives Improvement Act. This bill helps people with disabilities who want to get off cash assistance and start working. The bill allows people to keep their Medicaid or Medicare health benefits when they return to work, so that they can stay healthy enough to keep working. It provides grants to states to help set up the kinds of personal services that working people with disabilities require. The bill creates a demonstration project that would give Medicaid coverage to working people with serious medical conditions—such as multiple sclerosis or Parkinson's disease—before their diseases become so disabling that they have to apply for cash assistance. This bill makes sense.

The only argument against the Work Incentives Act as it was originally introduced was its cost. The Commerce Committee has acted in a fiscally prudent manner by providing offsets for the provisions in its jurisdiction. However, these offsets are about 100 million dollars shy of fully funding the Work Incentives Improvement Act as reported by the Commerce Committee. Consequently, the bill before us today omits the Committee's improved Medicaid buy-in option and leaves the demonstration program partially funded.

But I do note that, just a few weeks ago, the House passed a measure to provide tax deductions for individuals to purchase health coverage. This bill would cost about \$43 billion, provided benefits mainly to the healthy and wealthy, and none of it was funded. This double standard for the disabled prevented us from passing the entire bill here today. I hope we can do better in conference.

Mr. DAVIS of Virginia. Mr. Speaker, I rise today to offer my strong support for H.R. 1180, and particularly the provisions within the bill that will help financially modernize the private student loan industry. Not only will we assure the future of the private student loan industry and protect student's interest rates, we will also be providing at least a \$20 million offset to help pay for other provisions in this very important bill.

The Federal Family Education Loan Program (FFELP), the largest source of federal student loans to college students and parents, has undergone a revolution in recent years. FFELP service providers are employing a range of new technologies, such as the Internet, to vastly improve the delivery of student loans. Intense competition among FFELP providers has generated efficiencies that have driven down cost to both education loan borrowers and to U.S. taxpayers. Regrettably, the gains in efficiency and cost-reduction are being hampered by an archaic federal financing system that does not promote the most modern, efficient practices for student loan providers.

Private student loan lenders and student loan secondary markets tap global capital markets to raise the \$25 billion needed annually to support new student loans. The job of raising this private capital is more difficult, because federal law ties student loan interest rates to the 91-day Treasury bill, which does not necessarily reflect supply and demand issues in private capital markets. The student loan program, and the students, families and colleges that rely on it, will benefit from a more reliable supply of funding if Congress adopts a true market-based index for determining lender yields on student loans.

Importantly, the fundamental improvement to the private sector student loan program can

be achieved with a savings to the U.S. taxpayer, Mr. Speaker, that bears repeating. We can vastly improve the ability of private student loan providers to more efficiently and cheaply deliver their products to student and family borrowers, while saving the America people more than \$20 million over the next four years alone. In addition, this proposal would not change the index or formula used for determining interest rates paid by student loan borrowers.

Ironically, Mr. Speaker, the necessity of this provision was not highlighted until our economy began booming and the Federal Government began operating with a non-Social Security surplus. The Treasury bill is not a market-based index. By definition, only the U.S. government borrows at the T-bill rate. Other than the federal government and Government-Sponsored Enterprises (GSEs), virtually no organizations issue market securities that are tied to the T-bill.

Unfortunately, private student loan lenders are statutorily required to raise the capital they need from private capital markets at the T-bill rate. The capital raised privately to fund student loans is typically pegged to market indices that do not necessarily move in tandem with the T-bill rate. This means that lenders and student loan secondary markets have to account for the risk that the T-bill rate and these market rates will be different. To do so, lenders partly protect themselves against this risk through hedging agreements, whereby others bear the risk. These hedging agreements inject uncertainty and add to the lenders' cost of funds.

When the difference between T-bill rates and market-based rates widen, lenders incur significant additional cost to finance student loans. This scenario was realized in the last half of 1998 when the wide spreads between T-bill rates and market-based rates effectively "dried up" the market for student loan asset-backed securities, which represent a major source of student loan funding. In essence, the Treasury Department stopped issuing T-bills and the supply disappeared.

Mr. Speaker, it is situations like these, that if allowed to continue, could drive private lenders out of the student loan business. That is why I am very grateful that this bill could include the provisions that will shift the index for determining lender yields on Federal Education Loans from the 91-day T-bill rate to the 90-day Commercial Paper rate. This is an important amendment. It will protect private student loans lenders, increase efficiency and reduce the cost of delivering the funds, save the taxpayer a minimum of \$20 million, while guaranteeing the interest rate student and family borrowers pay does not increase.

The SPEAKER pro tempore (Mr. BURR of North Carolina). The question is on the motion offered by the gentleman from Texas (Mr. ARCHER) that the House suspend the rules and pass the bill, H.R. 1180, as amended.

The question was taken.

Mr. HULSHOF. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the Chair's prior announcement, further proceedings on this motion will be postponed.

106TH CONGRESS
1ST SESSION

H. R. 1180

AN ACT

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

106TH CONGRESS
1ST SESSION

H. R. 1180

AN ACT

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
 2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) **SHORT TITLE.**—This Act may be cited as the
 5 “Ticket to Work and Work Incentives Improvement Act
 6 of 1999”.

7 (b) **TABLE OF CONTENTS.**—The table of contents is
 8 as follows:

Sec. 1. Short title; table of contents.

**TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND
 RELATED PROVISIONS**

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 111. Work activity standard as a basis for review of an individual’s dis-
 abled status.

Sec. 112. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 121. Work incentives outreach program.

Sec. 122. State grants for work incentives assistance to disabled beneficiaries.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 201. Expanding State options under the medicaid program for workers
 with disabilities.

Sec. 202. Extending medicare coverage for OASDI disability benefit recipients.

Sec. 203. Grants to develop and establish State infrastructures to support
 working individuals with disabilities.

Sec. 204. Demonstration of coverage under the medicaid program of workers
 with potentially severe disabilities.

Sec. 205. Election by disabled beneficiaries to suspend medigap insurance when
 covered under a group health plan.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Extension of disability insurance program demonstration project au-
 thority.

Sec. 302. Demonstration projects providing for reductions in disability insur-
 ance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

- Sec. 401. Technical amendments relating to drug addicts and alcoholics.
 Sec. 402. Treatment of prisoners.
 Sec. 403. Revocation by members of the clergy of exemption from social security coverage.
 Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
 Sec. 405. Authorization for State to permit annual wage reports.
 Sec. 406. Assessment on attorneys who receive their fees via the Social Security Administration.
 Sec. 407. Prevention of fraud and abuse associated with certain payments under the medicaid program.Extension of authority of State medicaid fraud control units.
 Sec. 408. Extension of authority of State medicaid fraud control units.
 Sec. 409. Special allowance adjustment for student loans.

1 **TITLE I—TICKET TO WORK AND**
 2 **SELF-SUFFICIENCY AND RE-**
 3 **LATED PROVISIONS**

4 **Subtitle A—Ticket to Work and**
 5 **Self-Sufficiency**

6 **SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND**
 7 **SELF-SUFFICIENCY PROGRAM.**

8 (a) IN GENERAL.—Part A of title XI of the Social
 9 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
 10 ing after section 1147 (as added by section 8 of the Non-
 11 citizen Benefit Clarification and Other Technical Amend-
 12 ments Act of 1998 (Public Law 105–306; 112 Stat.
 13 2928)) the following:

14 “THE TICKET TO WORK AND SELF-SUFFICIENCY
 15 PROGRAM

16 “SEC. 1148. (a) IN GENERAL.—The Commissioner
 17 of Social Security shall establish a Ticket to Work and
 18 Self-Sufficiency Program, under which a disabled bene-

1 beneficiary may use a ticket to work and self-sufficiency issued
2 by the Commissioner in accordance with this section to
3 obtain employment services, vocational rehabilitation serv-
4 ices, or other support services from an employment net-
5 work which is of the beneficiary's choice and which is will-
6 ing to provide such services to such beneficiary.

7 “(b) TICKET SYSTEM.—

8 “(1) DISTRIBUTION OF TICKETS.—The Com-
9 missioner of Social Security may issue a ticket to
10 work and self-sufficiency to disabled beneficiaries for
11 participation in the Program.

12 “(2) ASSIGNMENT OF TICKETS.—A disabled
13 beneficiary holding a ticket to work and self-suffi-
14 ciency may assign the ticket to any employment net-
15 work of the beneficiary's choice which is serving
16 under the Program and is willing to accept the as-
17 signment.

18 “(3) TICKET TERMS.—A ticket issued under
19 paragraph (1) shall consist of a document which evi-
20 dences the Commissioner's agreement to pay (as
21 provided in paragraph (4)) an employment network,
22 which is serving under the Program and to which
23 such ticket is assigned by the beneficiary, for such
24 employment services, vocational rehabilitation serv-

1 ices, and other support services as the employment
2 network may provide to the beneficiary.

3 “(4) PAYMENTS TO EMPLOYMENT NET-
4 WORKS.—The Commissioner shall pay an employ-
5 ment network under the Program in accordance with
6 the outcome payment system under subsection
7 (h)(2) or under the outcome-milestone payment sys-
8 tem under subsection (h)(3) (whichever is elected
9 pursuant to subsection (h)(1)). An employment net-
10 work may not request or receive compensation for
11 such services from the beneficiary.

12 “(c) STATE PARTICIPATION.—

13 “(1) IN GENERAL.—Each State agency admin-
14 istering or supervising the administration of the
15 State plan approved under title I of the Rehabilita-
16 tion Act of 1973 may elect to participate in the Pro-
17 gram as an employment network with respect to a
18 disabled beneficiary. If the State agency does elect
19 to participate in the Program, the State agency also
20 shall elect to be paid under the outcome payment
21 system or the outcome-milestone payment system in
22 accordance with subsection (h)(1). With respect to a
23 disabled beneficiary that the State agency does not
24 elect to have participate in the Program, the State
25 agency shall be paid for services provided to that

1 beneficiary under the system for payment applicable
2 under section 222(d) and subsections (d) and (e) of
3 section 1615. The Commissioner shall provide for
4 periodic opportunities for exercising such elections.

5 “(2) EFFECT OF PARTICIPATION BY STATE
6 AGENCY.—

7 “(A) STATE AGENCIES PARTICIPATING.—

8 In any case in which a State agency described
9 in paragraph (1) elects under that paragraph to
10 participate in the Program, the employment
11 services, vocational rehabilitation services, and
12 other support services which, upon assignment
13 of tickets to work and self-sufficiency, are pro-
14 vided to disabled beneficiaries by the State
15 agency acting as an employment network shall
16 be governed by plans for vocational rehabilita-
17 tion services approved under title I of the Reha-
18 bilitation Act of 1973.

19 “(B) STATE AGENCIES ADMINISTERING
20 MATERNAL AND CHILD HEALTH SERVICES PRO-
21 GRAMS.—Subparagraph (A) shall not apply
22 with respect to any State agency administering
23 a program under title V of this Act.

24 “(3) AGREEMENTS BETWEEN STATE AGENCIES
25 AND EMPLOYMENT NETWORKS.—State agencies and

1 employment networks shall enter into agreements re-
2 garding the conditions under which services will be
3 provided when an individual is referred by an em-
4 ployment network to a State agency for services.
5 The Commissioner of Social Security shall establish
6 by regulations the timeframe within which such
7 agreements must be entered into and the mecha-
8 nisms for dispute resolution between State agencies
9 and employment networks with respect to such
10 agreements.

11 “(d) RESPONSIBILITIES OF THE COMMISSIONER OF
12 SOCIAL SECURITY.—

13 “(1) SELECTION AND QUALIFICATIONS OF PRO-
14 GRAM MANAGERS.—The Commissioner of Social Se-
15 curity shall enter into agreements with 1 or more or-
16 ganizations in the private or public sector for service
17 as a program manager to assist the Commissioner in
18 administering the Program. Any such program man-
19 ager shall be selected by means of a competitive bid-
20 ding process, from among organizations in the pri-
21 vate or public sector with available expertise and ex-
22 perience in the field of vocational rehabilitation or
23 employment services.

24 “(2) TENURE, RENEWAL, AND EARLY TERMI-
25 NATION.—Each agreement entered into under para-

1 graph (1) shall provide for early termination upon
2 failure to meet performance standards which shall be
3 specified in the agreement and which shall be
4 weighted to take into account any performance in
5 prior terms. Such performance standards shall
6 include—

7 “(A) measures for ease of access by bene-
8 ficiaries to services; and

9 “(B) measures for determining the extent
10 to which failures in obtaining services for bene-
11 ficiaries fall within acceptable parameters, as
12 determined by the Commissioner.

13 “(3) PRECLUSION FROM DIRECT PARTICIPA-
14 TION IN DELIVERY OF SERVICES IN OWN SERVICE
15 AREA.—Agreements under paragraph (1) shall
16 preclude—

17 “(A) direct participation by a program
18 manager in the delivery of employment services,
19 vocational rehabilitation services, or other sup-
20 port services to beneficiaries in the service area
21 covered by the program manager’s agreement;
22 and

23 “(B) the holding by a program manager of
24 a financial interest in an employment network
25 or service provider which provides services in a

1 geographic area covered under the program
2 manager's agreement.

3 “(4) SELECTION OF EMPLOYMENT NET-
4 WORKS.—

5 “(A) IN GENERAL.—The Commissioner
6 shall select and enter into agreements with em-
7 ployment networks for service under the Pro-
8 gram. Such employment networks shall be in
9 addition to State agencies serving as employ-
10 ment networks pursuant to elections under sub-
11 section (c).

12 “(B) ALTERNATE PARTICIPANTS.—In any
13 State where the Program is being implemented,
14 the Commissioner shall enter into an agreement
15 with any alternate participant that is operating
16 under the authority of section 222(d)(2) in the
17 State as of the date of the enactment of this
18 section and chooses to serve as an employment
19 network under the Program.

20 “(5) TERMINATION OF AGREEMENTS WITH EM-
21 PLOYMENT NETWORKS.—The Commissioner shall
22 terminate agreements with employment networks for
23 inadequate performance, as determined by the Com-
24 missioner.

1 “(6) QUALITY ASSURANCE.—The Commissioner
2 shall provide for such periodic reviews as are nec-
3 essary to provide for effective quality assurance in
4 the provision of services by employment networks.
5 The Commissioner shall solicit and consider the
6 views of consumers and the program manager under
7 which the employment networks serve and shall con-
8 sult with providers of services to develop perform-
9 ance measurements. The Commissioner shall ensure
10 that the results of the periodic reviews are made
11 available to beneficiaries who are prospective service
12 recipients as they select employment networks. The
13 Commissioner shall ensure that the periodic surveys
14 of beneficiaries receiving services under the Program
15 are designed to measure customer service satisfac-
16 tion.

17 “(7) DISPUTE RESOLUTION.—The Commis-
18 sioner shall provide for a mechanism for resolving
19 disputes between beneficiaries and employment net-
20 works, between program managers and employment
21 networks, and between program managers and pro-
22 viders of services. The Commissioner shall afford a
23 party to such a dispute a reasonable opportunity for
24 a full and fair review of the matter in dispute.

25 “(e) PROGRAM MANAGERS.—

1 “(1) IN GENERAL.—A program manager shall
2 conduct tasks appropriate to assist the Commis-
3 sioner in carrying out the Commissioner’s duties in
4 administering the Program.

5 “(2) RECRUITMENT OF EMPLOYMENT NET-
6 WORKS.—A program manager shall recruit, and rec-
7 ommend for selection by the Commissioner, employ-
8 ment networks for service under the Program. The
9 program manager shall carry out such recruitment
10 and provide such recommendations, and shall mon-
11 itor all employment networks serving in the Program
12 in the geographic area covered under the program
13 manager’s agreement, to the extent necessary and
14 appropriate to ensure that adequate choices of serv-
15 ices are made available to beneficiaries. Employment
16 networks may serve under the Program only pursu-
17 ant to an agreement entered into with the Commis-
18 sioner under the Program incorporating the applica-
19 ble provisions of this section and regulations there-
20 under, and the program manager shall provide and
21 maintain assurances to the Commissioner that pay-
22 ment by the Commissioner to employment networks
23 pursuant to this section is warranted based on com-
24 pliance by such employment networks with the terms
25 of such agreement and this section. The program

1 manager shall not impose numerical limits on the
2 number of employment networks to be recommended
3 pursuant to this paragraph.

4 “(3) FACILITATION OF ACCESS BY BENE-
5 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
6 gram manager shall facilitate access by beneficiaries
7 to employment networks. The program manager
8 shall ensure that each beneficiary is allowed changes
9 in employment networks without being deemed to
10 have rejected services under the Program. When
11 such a change occurs, the program manager shall re-
12 assign the ticket based on the choice of the bene-
13 ficiary. Upon the request of the employment net-
14 work, the program manager shall make a determina-
15 tion of the allocation of the outcome or milestone-
16 outcome payments based on the services provided by
17 each employment network. The program manager
18 shall establish and maintain lists of employment net-
19 works available to beneficiaries and shall make such
20 lists generally available to the public. The program
21 manager shall ensure that all information provided
22 to disabled beneficiaries pursuant to this paragraph
23 is provided in accessible formats.

24 “(4) ENSURING AVAILABILITY OF ADEQUATE
25 SERVICES.—The program manager shall ensure that

1 employment services, vocational rehabilitation serv-
2 ices, and other support services are provided to
3 beneficiaries throughout the geographic area covered
4 under the program manager’s agreement, including
5 rural areas.

6 “(5) REASONABLE ACCESS TO SERVICES.—The
7 program manager shall take such measures as are
8 necessary to ensure that sufficient employment net-
9 works are available and that each beneficiary receiv-
10 ing services under the Program has reasonable ac-
11 cess to employment services, vocational rehabilitation
12 services, and other support services. Services pro-
13 vided under the Program may include case manage-
14 ment, work incentives planning, supported employ-
15 ment, career planning, career plan development, vo-
16 cational assessment, job training, placement, follow-
17 up services, and such other services as may be speci-
18 fied by the Commissioner under the Program. The
19 program manager shall ensure that such services are
20 available in each service area.

21 “(f) EMPLOYMENT NETWORKS.—

22 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
23 WORKS.—

24 “(A) IN GENERAL.—Each employment net-
25 work serving under the Program shall consist of

1 an agency or instrumentality of a State (or a
2 political subdivision thereof) or a private entity,
3 that assumes responsibility for the coordination
4 and delivery of services under the Program to
5 individuals assigning to the employment net-
6 work tickets to work and self-sufficiency issued
7 under subsection (b).

8 “(B) ONE-STOP DELIVERY SYSTEMS.—An
9 employment network serving under the Pro-
10 gram may consist of a one-stop delivery system
11 established under subtitle B of title I of the
12 Workforce Investment Act of 1998.

13 “(C) COMPLIANCE WITH SELECTION CRI-
14 TERIA.—No employment network may serve
15 under the Program unless it meets and main-
16 tains compliance with both general selection cri-
17 teria (such as professional and educational
18 qualifications, where applicable) and specific se-
19 lection criteria (such as substantial expertise
20 and experience in providing relevant employ-
21 ment services and supports).

22 “(D) SINGLE OR ASSOCIATED PROVIDERS
23 ALLOWED.—An employment network shall con-
24 sist of either a single provider of such services
25 or of an association of such providers organized

1 so as to combine their resources into a single
2 entity. An employment network may meet the
3 requirements of subsection (e)(4) by providing
4 services directly, or by entering into agreements
5 with other individuals or entities providing ap-
6 propriate employment services, vocational reha-
7 bilitation services, or other support services.

8 “(2) REQUIREMENTS RELATING TO PROVISION
9 OF SERVICES.—Each employment network serving
10 under the Program shall be required under the
11 terms of its agreement with the Commissioner to—

12 “(A) serve prescribed service areas; and

13 “(B) take such measures as are necessary
14 to ensure that employment services, vocational
15 rehabilitation services, and other support serv-
16 ices provided under the Program by, or under
17 agreements entered into with, the employment
18 network are provided under appropriate indi-
19 vidual work plans meeting the requirements of
20 subsection (g).

21 “(3) ANNUAL FINANCIAL REPORTING.—Each
22 employment network shall meet financial reporting
23 requirements as prescribed by the Commissioner.

24 “(4) PERIODIC OUTCOMES REPORTING.—Each
25 employment network shall prepare periodic reports,

1 on at least an annual basis, itemizing for the covered
2 period specific outcomes achieved with respect to
3 specific services provided by the employment net-
4 work. Such reports shall conform to a national
5 model prescribed under this section. Each employ-
6 ment network shall provide a copy of the latest re-
7 port issued by the employment network pursuant to
8 this paragraph to each beneficiary upon enrollment
9 under the Program for services to be received
10 through such employment network. Upon issuance of
11 each report to each beneficiary, a copy of the report
12 shall be maintained in the files of the employment
13 network. The program manager shall ensure that
14 copies of all such reports issued under this para-
15 graph are made available to the public under reason-
16 able terms.

17 “(g) INDIVIDUAL WORK PLANS.—

18 “(1) REQUIREMENTS.—Each employment net-
19 work shall—

20 “(A) take such measures as are necessary
21 to ensure that employment services, vocational
22 rehabilitation services, and other support serv-
23 ices provided under the Program by, or under
24 agreements entered into with, the employment
25 network are provided under appropriate indi-

1 individual work plans that meet the requirements of
2 subparagraph (C);

3 “(B) develop and implement each such in-
4 dividual work plan, in partnership with each
5 beneficiary receiving such services, in a manner
6 that affords such beneficiary the opportunity to
7 exercise informed choice in selecting an employ-
8 ment goal and specific services needed to
9 achieve that employment goal;

10 “(C) ensure that each individual work plan
11 includes at least—

12 “(i) a statement of the vocational goal
13 developed with the beneficiary, including,
14 as appropriate, goals for earnings and job
15 advancement;

16 “(ii) a statement of the services and
17 supports that have been deemed necessary
18 for the beneficiary to accomplish that goal;

19 “(iii) a statement of any terms and
20 conditions related to the provision of such
21 services and supports; and

22 “(iv) a statement of understanding re-
23 garding the beneficiary’s rights under the
24 Program (such as the right to retrieve the
25 ticket to work and self-sufficiency if the

1 beneficiary is dissatisfied with the services
2 being provided by the employment net-
3 work) and remedies available to the indi-
4 vidual, including information on the avail-
5 ability of advocacy services and assistance
6 in resolving disputes through the State
7 grant program authorized under section
8 1150;

9 “(D) provide a beneficiary the opportunity
10 to amend the individual work plan if a change
11 in circumstances necessitates a change in the
12 plan; and

13 “(E) make each beneficiary’s individual
14 work plan available to the beneficiary in, as ap-
15 propriate, an accessible format chosen by the
16 beneficiary.

17 “(2) EFFECTIVE UPON WRITTEN APPROVAL.—
18 A beneficiary’s individual work plan shall take effect
19 upon written approval by the beneficiary or a rep-
20 resentative of the beneficiary and a representative of
21 the employment network that, in providing such
22 written approval, acknowledges assignment of the
23 beneficiary’s ticket to work and self-sufficiency.

24 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

1 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
2 PLOYMENT NETWORKS.—

3 “(A) IN GENERAL.—The Program shall
4 provide for payment authorized by the Commis-
5 sioner to employment networks under either an
6 outcome payment system or an outcome-mile-
7 stone payment system. Each employment net-
8 work shall elect which payment system will be
9 utilized by the employment network, and, for
10 such period of time as such election remains in
11 effect, the payment system so elected shall be
12 utilized exclusively in connection with such em-
13 ployment network (except as provided in sub-
14 paragraph (B)).

15 “(B) NO CHANGE IN METHOD OF PAY-
16 MENT FOR BENEFICIARIES WITH TICKETS AL-
17 READY ASSIGNED TO THE EMPLOYMENT NET-
18 WORKS.—Any election of a payment system by
19 an employment network that would result in a
20 change in the method of payment to the em-
21 ployment network for services provided to a
22 beneficiary who is receiving services from the
23 employment network at the time of the election
24 shall not be effective with respect to payment
25 for services provided to that beneficiary and the

1 method of payment previously selected shall
2 continue to apply with respect to such services.

3 “(2) OUTCOME PAYMENT SYSTEM.—

4 “(A) IN GENERAL.—The outcome payment
5 system shall consist of a payment structure gov-
6 erning employment networks electing such sys-
7 tem under paragraph (1)(A) which meets the
8 requirements of this paragraph.

9 “(B) PAYMENTS MADE DURING OUTCOME
10 PAYMENT PERIOD.—The outcome payment sys-
11 tem shall provide for a schedule of payments to
12 an employment network, in connection with
13 each individual who is a beneficiary, for each
14 month, during the individual’s outcome pay-
15 ment period, for which benefits (described in
16 paragraphs (3) and (4) of subsection (k)) are
17 not payable to such individual because of work
18 or earnings.

19 “(C) COMPUTATION OF PAYMENTS TO EM-
20 PLOYMENT NETWORK.—The payment schedule
21 of the outcome payment system shall be de-
22 signed so that—

23 “(i) the payment for each month dur-
24 ing the outcome payment period for which
25 benefits (described in paragraphs (3) and

1 (4) of subsection (k)) are not payable is
2 equal to a fixed percentage of the payment
3 calculation base for the calendar year in
4 which such month occurs; and

5 “(ii) such fixed percentage is set at a
6 percentage which does not exceed 40 per-
7 cent.

8 “(3) OUTCOME-MILESTONE PAYMENT SYS-
9 TEM.—

10 “(A) IN GENERAL.—The outcome-mile-
11 stone payment system shall consist of a pay-
12 ment structure governing employment networks
13 electing such system under paragraph (1)(A)
14 which meets the requirements of this para-
15 graph.

16 “(B) EARLY PAYMENTS UPON ATTAIN-
17 MENT OF MILESTONES IN ADVANCE OF OUT-
18 COME PAYMENT PERIODS.—The outcome-mile-
19 stone payment system shall provide for 1 or
20 more milestones, with respect to beneficiaries
21 receiving services from an employment network
22 under the Program, that are directed toward
23 the goal of permanent employment. Such mile-
24 stones shall form a part of a payment structure
25 that provides, in addition to payments made

1 during outcome payment periods, payments
2 made prior to outcome payment periods in
3 amounts based on the attainment of such mile-
4 stones.

5 “(C) LIMITATION ON TOTAL PAYMENTS TO
6 EMPLOYMENT NETWORK.—The payment sched-
7 ule of the outcome milestone payment system
8 shall be designed so that the total of the pay-
9 ments to the employment network with respect
10 to each beneficiary is less than, on a net
11 present value basis (using an interest rate de-
12 termined by the Commissioner that appro-
13 priately reflects the cost of funds faced by pro-
14 viders), the total amount to which payments to
15 the employment network with respect to the
16 beneficiary would be limited if the employment
17 network were paid under the outcome payment
18 system.

19 “(4) DEFINITIONS.—In this subsection:

20 “(A) PAYMENT CALCULATION BASE.—The
21 term ‘payment calculation base’ means, for any
22 calendar year—

23 “(i) in connection with a title II dis-
24 ability beneficiary, the average disability
25 insurance benefit payable under section

1 223 for all beneficiaries for months during
2 the preceding calendar year; and

3 “(ii) in connection with a title XVI
4 disability beneficiary (who is not concur-
5 rently a title II disability beneficiary), the
6 average payment of supplemental security
7 income benefits based on disability payable
8 under title XVI (excluding State sup-
9 plementation) for months during the pre-
10 ceding calendar year to all beneficiaries
11 who have attained 18 years of age but
12 have not attained 65 years of age.

13 “(B) OUTCOME PAYMENT PERIOD.—The
14 term ‘outcome payment period’ means, in con-
15 nection with any individual who had assigned a
16 ticket to work and self-sufficiency to an employ-
17 ment network under the Program, a period—

18 “(i) beginning with the first month,
19 ending after the date on which such ticket
20 was assigned to the employment network,
21 for which benefits (described in paragraphs
22 (3) and (4) of subsection (k)) are not pay-
23 able to such individual by reason of en-
24 gagement in substantial gainful activity or

1 by reason of earnings from work activity;
2 and

3 “(ii) ending with the 60th month
4 (consecutive or otherwise), ending after
5 such date, for which such benefits are not
6 payable to such individual by reason of en-
7 gagement in substantial gainful activity or
8 by reason of earnings from work activity.

9 “(5) PERIODIC REVIEW AND ALTERATIONS OF
10 PRESCRIBED SCHEDULES.—

11 “(A) PERCENTAGES AND PERIODS.—The
12 Commissioner shall periodically review the per-
13 centage specified in paragraph (2)(C), the total
14 payments permissible under paragraph (3)(C),
15 and the period of time specified in paragraph
16 (4)(B) to determine whether such percentages,
17 such permissible payments, and such period
18 provide an adequate incentive for employment
19 networks to assist beneficiaries to enter the
20 workforce, while providing for appropriate
21 economies. The Commissioner may alter such
22 percentage, such total permissible payments, or
23 such period of time to the extent that the Com-
24 missioner determines, on the basis of the Com-
25 missioner’s review under this paragraph, that

1 such an alteration would better provide the in-
2 centive and economies described in the pre-
3 ceding sentence.

4 “(B) NUMBER AND AMOUNT OF MILE-
5 STONE PAYMENTS.—The Commissioner shall
6 periodically review the number and amounts of
7 milestone payments established by the Commis-
8 sioner pursuant to this section to determine
9 whether they provide an adequate incentive for
10 employment networks to assist beneficiaries to
11 enter the workforce, taking into account infor-
12 mation provided to the Commissioner by pro-
13 gram managers, the Ticket to Work and Work
14 Incentives Advisory Panel established by section
15 101(f) of the Ticket to Work and Work Incen-
16 tives Improvement Act of 1999, and other reli-
17 able sources. The Commissioner may from time
18 to time alter the number and amounts of mile-
19 stone payments initially established by the
20 Commissioner pursuant to this section to the
21 extent that the Commissioner determines that
22 such an alteration would allow an adequate in-
23 centive for employment networks to assist bene-
24 ficiaries to enter the workforce. Such alteration
25 shall be based on information provided to the

1 Commissioner by program managers, the Ticket
2 to Work and Work Incentives Advisory Panel
3 established by section 101(f) of the Ticket to
4 Work and Work Incentives Improvement Act of
5 1999, or other reliable sources.

6 “(C) REPORT ON THE ADEQUACY OF IN-
7 CENTIVES.—The Commissioner shall submit to
8 Congress not later than 36 months after the
9 date of the enactment of the Ticket to Work
10 and Work Incentives Improvement Act of 1999
11 a report with recommendations for a method or
12 methods to adjust payment rates under sub-
13 paragraphs (A) and (B), that would ensure ade-
14 quate incentives for the provision of services by
15 employment networks of—

16 “(i) individuals with a need for ongo-
17 ing support and services;

18 “(ii) individuals with a need for high-
19 cost accommodations;

20 “(iii) individuals who earn a submin-
21 imum wage; and

22 “(iv) individuals who work and receive
23 partial cash benefits.

24 The Commissioner shall consult with the Ticket
25 to Work and Work Incentives Advisory Panel

1 established under section 101(f) of the Ticket
2 to Work and Work Incentives Improvement Act
3 of 1999 during the development and evaluation
4 of the study. The Commissioner shall imple-
5 ment the necessary adjusted payment rates
6 prior to full implementation of the Ticket to
7 Work and Self-Sufficiency Program.

8 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
9 any period for which an individual is using, as defined by
10 the Commissioner, a ticket to work and self-sufficiency
11 issued under this section, the Commissioner (and any ap-
12 plicable State agency) may not initiate a continuing dis-
13 ability review or other review under section 221 of whether
14 the individual is or is not under a disability or a review
15 under title XVI similar to any such review under section
16 221.

17 “(j) AUTHORIZATIONS.—

18 “(1) PAYMENTS TO EMPLOYMENT NET-
19 WORKS.—

20 “(A) TITLE II DISABILITY BENE-
21 FICIARIES.—There are authorized to be trans-
22 ferred from the Federal Old-Age and Survivors
23 Insurance Trust Fund and the Federal Dis-
24 ability Insurance Trust Fund each fiscal year
25 such sums as may be necessary to make pay-

1 ments to employment networks under this sec-
2 tion. Money paid from the Trust Funds under
3 this section with respect to title II disability
4 beneficiaries who are entitled to benefits under
5 section 223 or who are entitled to benefits
6 under section 202(d) on the basis of the wages
7 and self-employment income of such bene-
8 ficiaries, shall be charged to the Federal Dis-
9 ability Insurance Trust Fund, and all other
10 money paid from the Trust Funds under this
11 section shall be charged to the Federal Old-Age
12 and Survivors Insurance Trust Fund.

13 “(B) TITLE XVI DISABILITY BENE-
14 FICIARIES.—Amounts authorized to be appro-
15 priated to the Social Security Administration
16 under section 1601 (as in effect pursuant to the
17 amendments made by section 301 of the Social
18 Security Amendments of 1972) shall include
19 amounts necessary to carry out the provisions
20 of this section with respect to title XVI dis-
21 ability beneficiaries.

22 “(2) ADMINISTRATIVE EXPENSES.—The costs
23 of administering this section (other than payments
24 to employment networks) shall be paid from
25 amounts made available for the administration of

1 title II and amounts made available for the adminis-
2 tration of title XVI, and shall be allocated among
3 such amounts as appropriate.

4 “(k) DEFINITIONS.—In this section:

5 “(1) COMMISSIONER.—The term ‘Commis-
6 sioner’ means the Commissioner of Social Security.

7 “(2) DISABLED BENEFICIARY.—The term ‘dis-
8 abled beneficiary’ means a title II disability bene-
9 ficiary or a title XVI disability beneficiary.

10 “(3) TITLE II DISABILITY BENEFICIARY.—The
11 term ‘title II disability beneficiary’ means an indi-
12 vidual entitled to disability insurance benefits under
13 section 223 or to monthly insurance benefits under
14 section 202 based on such individual’s disability (as
15 defined in section 223(d)). An individual is a title II
16 disability beneficiary for each month for which such
17 individual is entitled to such benefits.

18 “(4) TITLE XVI DISABILITY BENEFICIARY.—
19 The term ‘title XVI disability beneficiary’ means an
20 individual eligible for supplemental security income
21 benefits under title XVI on the basis of blindness
22 (within the meaning of section 1614(a)(2)) or dis-
23 ability (within the meaning of section 1614(a)(3)).
24 An individual is a title XVI disability beneficiary for

1 each month for which such individual is eligible for
2 such benefits.

3 “(5) SUPPLEMENTAL SECURITY INCOME BEN-
4 EFIT.—The term ‘supplemental security income ben-
5 efit under title XVI’ means a cash benefit under sec-
6 tion 1611 or 1619(a), and does not include a State
7 supplementary payment, administered federally or
8 otherwise.

9 “(l) REGULATIONS.—Not later than 1 year after the
10 date of the enactment of the Ticket to Work and Work
11 Incentives Improvement Act of 1999, the Commissioner
12 shall prescribe such regulations as are necessary to carry
13 out the provisions of this section.”.

14 (b) CONFORMING AMENDMENTS.—

15 (1) AMENDMENTS TO TITLE II.—

16 (A) Section 221(i) of the Social Security
17 Act (42 U.S.C. 421(i)) is amended by adding at
18 the end the following:

19 “(5) For suspension of reviews under this subsection
20 in the case of an individual using a ticket to work and
21 self-sufficiency, see section 1148(i).”.

22 (B) Section 222(a) of such Act (42 U.S.C.
23 422(a)) is repealed.

24 (C) Section 222(b) of such Act (42 U.S.C.
25 422(b)) is repealed.

1 (D) Section 225(b)(1) of such Act (42
2 U.S.C. 425(b)(1)) is amended by striking “a
3 program of vocational rehabilitation services”
4 and inserting “a program consisting of the
5 Ticket to Work and Self-Sufficiency Program
6 under section 1148 or another program of voca-
7 tional rehabilitation services, employment serv-
8 ices, or other support services”.

9 (2) AMENDMENTS TO TITLE XVI.—

10 (A) Section 1615(a) of such Act (42
11 U.S.C. 1382d(a)) is amended to read as follows:

12 “SEC. 1615. (a) In the case of any blind or disabled
13 individual who—

14 “(1) has not attained age 16; and

15 “(2) with respect to whom benefits are paid
16 under this title,

17 the Commissioner of Social Security shall make provision
18 for referral of such individual to the appropriate State
19 agency administering the State program under title V.”.

20 (B) Section 1615(c) of such Act (42
21 U.S.C. 1382d(c)) is repealed.

22 (C) Section 1631(a)(6)(A) of such Act (42
23 U.S.C. 1383(a)(6)(A)) is amended by striking
24 “a program of vocational rehabilitation serv-
25 ices” and inserting “a program consisting of

1 the Ticket to Work and Self-Sufficiency Pro-
2 gram under section 1148 or another program of
3 vocational rehabilitation services, employment
4 services, or other support services”.

5 (D) Section 1633(c) of such Act (42
6 U.S.C. 1383b(c)) is amended—

7 (i) by inserting “(1)” after “(c)”; and

8 (ii) by adding at the end the fol-
9 lowing:

10 “(2) For suspension of continuing disability reviews
11 and other reviews under this title similar to reviews under
12 section 221 in the case of an individual using a ticket to
13 work and self-sufficiency, see section 1148(i).”.

14 (c) EFFECTIVE DATE.—Subject to subsection (d),
15 the amendments made by subsections (a) and (b) shall
16 take effect with the first month following 1 year after the
17 date of the enactment of this Act.

18 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

19 (1) IN GENERAL.—Not later than 1 year after
20 the date of the enactment of this Act, the Commis-
21 sioner of Social Security shall commence implemen-
22 tation of the amendments made by this section
23 (other than paragraphs (1)(C) and (2)(B) of sub-
24 section (b)) in graduated phases at phase-in sites se-
25 lected by the Commissioner. Such phase-in sites

1 shall be selected so as to ensure, prior to full imple-
2 mentation of the Ticket to Work and Self-Suffi-
3 ciency Program, the development and refinement of
4 referral processes, payment systems, computer link-
5 ages, management information systems, and admin-
6 istrative processes necessary to provide for full im-
7 plementation of such amendments. Subsection (c)
8 shall apply with respect to paragraphs (1)(C) and
9 (2)(B) of subsection (b) without regard to this sub-
10 section.

11 (2) REQUIREMENTS.—Implementation of the
12 Program at each phase-in site shall be carried out
13 on a wide enough scale to permit a thorough evalua-
14 tion of the alternative methods under consideration,
15 so as to ensure that the most efficacious methods
16 are determined and in place for full implementation
17 of the Program on a timely basis.

18 (3) FULL IMPLEMENTATION.—The Commis-
19 sioner shall ensure that ability to provide tickets and
20 services to individuals under the Program exists in
21 every State as soon as practicable on or after the ef-
22 fective date specified in subsection (c) but not later
23 than 3 years after such date.

24 (4) ONGOING EVALUATION OF PROGRAM.—

1 (A) IN GENERAL.—The Commissioner
2 shall design and conduct a series of evaluations
3 to assess the cost-effectiveness of activities car-
4 ried out under this section and the amendments
5 made thereby, as well as the effects of this sec-
6 tion and the amendments made thereby on
7 work outcomes for beneficiaries receiving tickets
8 to work and self-sufficiency under the Program.

9 (B) CONSULTATION.—The Commissioner
10 shall design and carry out the series of evalua-
11 tions after receiving relevant advice from ex-
12 perts in the fields of disability, vocational reha-
13 bilitation, and program evaluation and individ-
14 uals using tickets to work and self-sufficiency
15 under the Program and consulting with the
16 Ticket to Work and Work Incentives Advisory
17 Panel established under section 101(f), the
18 Comptroller General of the United States, other
19 agencies of the Federal Government, and pri-
20 vate organizations with appropriate expertise.

21 (C) METHODOLOGY.—

22 (i) IMPLEMENTATION.—The Commis-
23 sioner, in consultation with the Ticket to
24 Work and Work Incentives Advisory Panel
25 established under section 101(f), shall en-

1 sure that plans for evaluations and data
2 collection methods under the Program are
3 appropriately designed to obtain detailed
4 employment information.

5 (ii) SPECIFIC MATTERS TO BE AD-
6 DRESSED.—Each such evaluation shall ad-
7 dress (but is not limited to)—

8 (I) the annual cost (including net
9 cost) of the Program and the annual
10 cost (including net cost) that would
11 have been incurred in the absence of
12 the Program;

13 (II) the determinants of return to
14 work, including the characteristics of
15 beneficiaries in receipt of tickets
16 under the Program;

17 (III) the types of employment
18 services, vocational rehabilitation serv-
19 ices, and other support services fur-
20 nished to beneficiaries in receipt of
21 tickets under the Program who return
22 to work and to those who do not re-
23 turn to work;

24 (IV) the duration of employment
25 services, vocational rehabilitation serv-

1 ices, and other support services fur-
2 nished to beneficiaries in receipt of
3 tickets under the Program who return
4 to work and the duration of such serv-
5 ices furnished to those who do not re-
6 turn to work and the cost to employ-
7 ment networks of furnishing such
8 services;

9 (V) the employment outcomes,
10 including wages, occupations, benefits,
11 and hours worked, of beneficiaries
12 who return to work after receiving
13 tickets under the Program and those
14 who return to work without receiving
15 such tickets;

16 (VI) the characteristics of indi-
17 viduals in possession of tickets under
18 the Program who are not accepted for
19 services and, to the extent reasonably
20 determinable, the reasons for which
21 such beneficiaries were not accepted
22 for services;

23 (VII) the characteristics of pro-
24 viders whose services are provided

1 within an employment network under
2 the Program;

3 (VIII) the extent (if any) to
4 which employment networks display a
5 greater willingness to provide services
6 to beneficiaries with a range of dis-
7 abilities;

8 (IX) the characteristics (includ-
9 ing employment outcomes) of those
10 beneficiaries who receive services
11 under the outcome payment system
12 and of those beneficiaries who receive
13 services under the outcome-milestone
14 payment system;

15 (X) measures of satisfaction
16 among beneficiaries in receipt of tick-
17 ets under the Program; and

18 (XI) reasons for (including com-
19 ments solicited from beneficiaries re-
20 garding) their choice not to use their
21 tickets or their inability to return to
22 work despite the use of their tickets.

23 (D) PERIODIC EVALUATION REPORTS.—

24 Following the close of the third and fifth fiscal
25 years ending after the effective date under sub-

1 section (c), and prior to the close of the seventh
2 fiscal year ending after such date, the Commis-
3 sioner shall transmit to the Committee on Ways
4 and Means of the House of Representatives and
5 the Committee on Finance of the Senate a re-
6 port containing the Commissioner's evaluation
7 of the progress of activities conducted under the
8 provisions of this section and the amendments
9 made thereby. Each such report shall set forth
10 the Commissioner's evaluation of the extent to
11 which the Program has been successful and the
12 Commissioner's conclusions on whether or how
13 the Program should be modified. Each such re-
14 port shall include such data, findings, materials,
15 and recommendations as the Commissioner may
16 consider appropriate.

17 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
18 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
19 AMENDMENTS IN SUCH STATE.—

20 (A) IN GENERAL.—In the case of any
21 State in which the amendments made by sub-
22 section (a) have not been fully implemented
23 pursuant to this subsection, the Commissioner
24 shall determine by regulation the extent to
25 which—

1 (i) the requirement under section
2 222(a) for prompt referrals to a State
3 agency; and

4 (ii) the authority of the Commissioner
5 under section 222(d)(2) of the Social Secu-
6 rity Act to provide vocational rehabilitation
7 services in such State by agreement or
8 contract with other public or private agen-
9 cies, organizations, institutions, or individ-
10 uals,

11 shall apply in such State.

12 (B) EXISTING AGREEMENTS.—Nothing in
13 subparagraph (A) or the amendments made by
14 subsection (a) shall be construed to limit, im-
15 pede, or otherwise affect any agreement entered
16 into pursuant to section 222(d)(2) of the Social
17 Security Act before the date of the enactment
18 of this Act with respect to services provided
19 pursuant to such agreement to beneficiaries re-
20 ceiving services under such agreement as of
21 such date, except with respect to services (if
22 any) to be provided after 3 years after the ef-
23 fective date provided in subsection (c).

24 (e) SPECIFIC REGULATIONS REQUIRED.—

1 (1) IN GENERAL.—The Commissioner of Social
2 Security shall prescribe such regulations as are nec-
3 essary to implement the amendments made by this
4 section.

5 (2) SPECIFIC MATTERS TO BE INCLUDED IN
6 REGULATIONS.—The matters which shall be ad-
7 dressed in such regulations shall include—

8 (A) the form and manner in which tickets
9 to work and self-sufficiency may be distributed
10 to beneficiaries pursuant to section 1148(b)(1)
11 of the Social Security Act;

12 (B) the format and wording of such tick-
13 ets, which shall incorporate by reference any
14 contractual terms governing service by employ-
15 ment networks under the Program;

16 (C) the form and manner in which State
17 agencies may elect participation in the Ticket to
18 Work and Self-Sufficiency Program pursuant to
19 section 1148(e)(1) of such Act and provision for
20 periodic opportunities for exercising such elec-
21 tions;

22 (D) the status of State agencies under sec-
23 tion 1148(e)(1) of such Act at the time that
24 State agencies exercise elections under that sec-
25 tion;

1 (E) the terms of agreements to be entered
2 into with program managers pursuant to sec-
3 tion 1148(d) of such Act, including—

4 (i) the terms by which program man-
5 agers are precluded from direct participa-
6 tion in the delivery of services pursuant to
7 section 1148(d)(3) of such Act;

8 (ii) standards which must be met by
9 quality assurance measures referred to in
10 paragraph (6) of section 1148(d) of such
11 Act and methods of recruitment of employ-
12 ment networks utilized pursuant to para-
13 graph (2) of section 1148(e) of such Act;
14 and

15 (iii) the format under which dispute
16 resolution will operate under section
17 1148(d)(7) of such Act;

18 (F) the terms of agreements to be entered
19 into with employment networks pursuant to sec-
20 tion 1148(d)(4) of such Act, including—

21 (i) the manner in which service areas
22 are specified pursuant to section
23 1148(f)(2)(A) of such Act;

24 (ii) the general selection criteria and
25 the specific selection criteria which are ap-

1 plicable to employment networks under
2 section 1148(f)(1)(C) of such Act in select-
3 ing service providers;

4 (iii) specific requirements relating to
5 annual financial reporting by employment
6 networks pursuant to section 1148(f)(3) of
7 such Act; and

8 (iv) the national model to which peri-
9 odic outcomes reporting by employment
10 networks must conform under section
11 1148(f)(4) of such Act;

12 (G) standards which must be met by indi-
13 vidual work plans pursuant to section 1148(g)
14 of such Act;

15 (H) standards which must be met by pay-
16 ment systems required under section 1148(h) of
17 such Act, including—

18 (i) the form and manner in which
19 elections by employment networks of pay-
20 ment systems are to be exercised pursuant
21 to section 1148(h)(1)(A) of such Act;

22 (ii) the terms which must be met by
23 an outcome payment system under section
24 1148(h)(2) of such Act;

1 (iii) the terms which must be met by
2 an outcome-milestone payment system
3 under section 1148(h)(3) of such Act;

4 (iv) any revision of the percentage
5 specified in paragraph (2)(C) of section
6 1148(h) of such Act or the period of time
7 specified in paragraph (4)(B) of such sec-
8 tion 1148(h) of such Act; and

9 (v) annual oversight procedures for
10 such systems; and

11 (I) procedures for effective oversight of the
12 Program by the Commissioner of Social Secu-
13 rity, including periodic reviews and reporting
14 requirements.

15 (f) THE TICKET TO WORK AND WORK INCENTIVES
16 ADVISORY PANEL.—

17 (1) ESTABLISHMENT.—There is established
18 within the Social Security Administration a panel to
19 be known as the “Ticket to Work and Work Incen-
20 tives Advisory Panel” (in this subsection referred to
21 as the “Panel”).

22 (2) DUTIES OF PANEL.—It shall be the duty of
23 the Panel to—

24 (A) advise the President, the Congress,
25 and the Commissioner of Social Security on

1 issues related to work incentives programs,
2 planning, and assistance for individuals with
3 disabilities, including work incentive provisions
4 under titles II, XI, XVI, XVIII, and XIX of the
5 Social Security Act (42 U.S.C. 401 et seq.,
6 1301 et seq., 1381 et seq., 1395 et seq., 1396
7 et seq.); and

8 (B) with respect to the Ticket to Work and
9 Self-Sufficiency Program established under sec-
10 tion 1148 of such Act—

11 (i) advise the Commissioner of Social
12 Security with respect to establishing phase-
13 in sites for such Program and fully imple-
14 menting the Program thereafter, the re-
15 finement of access of disabled beneficiaries
16 to employment networks, payment systems,
17 and management information systems, and
18 advise the Commissioner whether such
19 measures are being taken to the extent
20 necessary to ensure the success of the Pro-
21 gram;

22 (ii) advise the Commissioner regard-
23 ing the most effective designs for research
24 and demonstration projects associated with

1 the Program or conducted pursuant to sec-
2 tion 302 of this Act;

3 (iii) advise the Commissioner on the
4 development of performance measurements
5 relating to quality assurance under section
6 1148(d)(6) of the Social Security Act; and

7 (iv) furnish progress reports on the
8 Program to the Commissioner and each
9 House of Congress.

10 (3) MEMBERSHIP.—

11 (A) NUMBER AND APPOINTMENT.—The
12 Panel shall be composed of 12 members as fol-
13 lows:

14 (i) 4 members appointed by the Presi-
15 dent, not more than 2 of whom may be of
16 the same political party;

17 (ii) 2 members appointed by the
18 Speaker of the House of Representatives,
19 in consultation with the Chairman of the
20 Committee on Ways and Means of the
21 House of Representatives;

22 (iii) 2 members appointed by the mi-
23 nority leader of the House of Representa-
24 tives, in consultation with the ranking

1 member of the Committee on Ways and
2 Means of the House of Representatives;

3 (iv) 2 members appointed by the ma-
4 jority leader of the Senate, in consultation
5 with the Chairman of the Committee on
6 Finance of the Senate; and

7 (v) 2 members appointed by the mi-
8 nority leader of the Senate, in consultation
9 with the ranking member of the Committee
10 on Finance of the Senate.

11 (B) REPRESENTATION.—Of the members
12 appointed under subparagraph (A), at least 8
13 shall have experience or expert knowledge as a
14 recipient, provider, employer, or employee in the
15 fields of, or related to, employment services, vo-
16 cational rehabilitation services, and other sup-
17 port services, of whom—

18 (i) at least 2 shall represent the inter-
19 ests of recipients of employment services,
20 vocational rehabilitation services, and other
21 support services;

22 (ii) at least 2 shall represent the in-
23 terests of providers of employment serv-
24 ices, vocational rehabilitation services, and
25 other support services;

1 (iii) at least 2 shall represent the in-
2 terests of private employers; and

3 (iv) at least 2 shall represent the in-
4 terests of employees.

5 At least $\frac{1}{2}$ of the members described in each
6 clause of subparagraph (A) shall be individuals
7 with disabilities, or representatives of individ-
8 uals with disabilities, with consideration to cur-
9 rent or former title II disability beneficiaries or
10 title XVI disability beneficiaries (as such terms
11 are defined in section 1148(k) of the Social Se-
12 curity Act (as added by subsection (a))).

13 (C) TERMS.—

14 (i) IN GENERAL.—Each member shall
15 be appointed for a term of 4 years (or, if
16 less, for the remaining life of the Panel),
17 except as provided in clauses (ii) and (iii).
18 The initial members shall be appointed not
19 later than 90 days after the date of the en-
20 actment of this Act.

21 (ii) TERMS OF INITIAL AP-
22 POINTEES.—As designated by the Presi-
23 dent at the time of appointment, of the
24 members first appointed—

1 (I) 1/2 of the members appointed
2 under subparagraph (A) shall be ap-
3 pointed for a term of 2 years; and

4 (II) the remaining members ap-
5 pointed under subparagraph (A) shall
6 be appointed for a term of 4 years.

7 (iii) VACANCIES.—Any member ap-
8 pointed to fill a vacancy occurring before
9 the expiration of the term for which the
10 member's predecessor was appointed shall
11 be appointed only for the remainder of that
12 term. A member may serve after the expi-
13 ration of that member's term until a suc-
14 cesssor has taken office. A vacancy in the
15 Panel shall be filled in the manner in
16 which the original appointment was made.

17 (D) BASIC PAY.—Members shall each be
18 paid at a rate, and in a manner, that is con-
19 sistent with guidelines established under section
20 7 of the Federal Advisory Committee Act (5
21 U.S.C. App.).

22 (E) TRAVEL EXPENSES.—Each member
23 shall receive travel expenses, including per diem
24 in lieu of subsistence, in accordance with sec-

1 tions 5702 and 5703 of title 5, United States
2 Code.

3 (F) QUORUM.—8 members of the Panel
4 shall constitute a quorum but a lesser number
5 may hold hearings.

6 (G) CHAIRPERSON.—The Chairperson of
7 the Panel shall be designated by the President.
8 The term of office of the Chairperson shall be
9 4 years.

10 (H) MEETINGS.—The Panel shall meet at
11 least quarterly and at other times at the call of
12 the Chairperson or a majority of its members.

13 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
14 AND CONSULTANTS.—

15 (A) DIRECTOR.—The Panel shall have a
16 Director who shall be appointed by the Panel,
17 and paid at a rate, and in a manner, that is
18 consistent with guidelines established under sec-
19 tion 7 of the Federal Advisory Committee Act
20 (5 U.S.C. App.).

21 (B) STAFF.—Subject to rules prescribed
22 by the Commissioner of Social Security, the Di-
23 rector may appoint and fix the pay of additional
24 personnel as the Director considers appropriate.

1 (C) EXPERTS AND CONSULTANTS.—Sub-
2 ject to rules prescribed by the Commissioner of
3 Social Security, the Director may procure tem-
4 porary and intermittent services under section
5 3109(b) of title 5, United States Code.

6 (D) STAFF OF FEDERAL AGENCIES.—
7 Upon request of the Panel, the head of any
8 Federal department or agency may detail, on a
9 reimbursable basis, any of the personnel of that
10 department or agency to the Panel to assist it
11 in carrying out its duties under this Act.

12 (5) POWERS OF PANEL.—

13 (A) HEARINGS AND SESSIONS.—The Panel
14 may, for the purpose of carrying out its duties
15 under this subsection, hold such hearings, sit
16 and act at such times and places, and take such
17 testimony and evidence as the Panel considers
18 appropriate.

19 (B) POWERS OF MEMBERS AND AGENTS.—
20 Any member or agent of the Panel may, if au-
21 thorized by the Panel, take any action which
22 the Panel is authorized to take by this section.

23 (C) MAILS.—The Panel may use the
24 United States mails in the same manner and

1 under the same conditions as other departments
2 and agencies of the United States.

3 (6) REPORTS.—

4 (A) INTERIM REPORTS.—The Panel shall
5 submit to the President and the Congress in-
6 terim reports at least annually.

7 (B) FINAL REPORT.—The Panel shall
8 transmit a final report to the President and the
9 Congress not later than eight years after the
10 date of the enactment of this Act. The final re-
11 port shall contain a detailed statement of the
12 findings and conclusions of the Panel, together
13 with its recommendations for legislation and ad-
14 ministrative actions which the Panel considers
15 appropriate.

16 (7) TERMINATION.—The Panel shall terminate
17 30 days after the date of the submission of its final
18 report under paragraph (6)(B).

19 (8) AUTHORIZATION OF APPROPRIATIONS.—
20 There are authorized to be appropriated from the
21 Federal Old-Age and Survivors Insurance Trust
22 Fund, the Federal Disability Insurance Trust Fund,
23 and the general fund of the Treasury, as appro-
24 priate, such sums as are necessary to carry out this
25 subsection.

1 **Subtitle B—Elimination of Work**
2 **Disincentives**

3 **SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR RE-**
4 **VIEW OF AN INDIVIDUAL’S DISABLED STATUS.**

5 (a) IN GENERAL.—Section 221 of the Social Security
6 Act (42 U.S.C. 421) is amended by adding at the end the
7 following:

8 “(m)(1) In any case where an individual entitled to
9 disability insurance benefits under section 223 or to
10 monthly insurance benefits under section 202 based on
11 such individual’s disability (as defined in section 223(d))
12 has received such benefits for at least 24 months—

13 “(A) no continuing disability review conducted
14 by the Commissioner may be scheduled for the indi-
15 vidual solely as a result of the individual’s work ac-
16 tivity;

17 “(B) no work activity engaged in by the indi-
18 vidual may be used as evidence that the individual
19 is no longer disabled; and

20 “(C) no cessation of work activity by the indi-
21 vidual may give rise to a presumption that the indi-
22 vidual is unable to engage in work.

23 “(2) An individual to which paragraph (1) applies
24 shall continue to be subject to—

1 “(A) continuing disability reviews on a regularly
2 scheduled basis that is not triggered by work; and

3 “(B) termination of benefits under this title in
4 the event that the individual has earnings that ex-
5 ceed the level of earnings established by the Com-
6 missioner to represent substantial gainful activity.”.

7 (b) EFFECTIVE DATE.—The amendment made by
8 subsection (a) shall take effect on January 1, 2003.

9 **SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY**
10 **BENEFITS.**

11 (a) OASDI BENEFITS.—Section 223 of the Social
12 Security Act (42 U.S.C. 423) is amended—

13 (1) by redesignating subsection (i) as subsection
14 (j); and

15 (2) by inserting after subsection (h) the fol-
16 lowing:

17 “Reinstatement of Entitlement

18 “(i)(1)(A) Entitlement to benefits described in sub-
19 paragraph (B)(i)(I) shall be reinstated in any case where
20 the Commissioner determines that an individual described
21 in subparagraph (B) has filed a request for reinstatement
22 meeting the requirements of paragraph (2)(A) during the
23 period prescribed in subparagraph (C). Reinstatement of
24 such entitlement shall be in accordance with the terms of
25 this subsection.

1 “(B) An individual is described in this subparagraph
2 if—

3 “(i) prior to the month in which the individual
4 files a request for reinstatement—

5 “(I) the individual was entitled to benefits
6 under this section or section 202 on the basis
7 of disability pursuant to an application filed
8 therefor; and

9 “(II) such entitlement terminated due to
10 the performance of substantial gainful activity;

11 “(ii) the individual is under a disability and the
12 physical or mental impairment that is the basis for
13 the finding of disability is the same as (or related
14 to) the physical or mental impairment that was the
15 basis for the finding of disability that gave rise to
16 the entitlement described in clause (i); and

17 “(iii) the individual’s disability renders the indi-
18 vidual unable to perform substantial gainful activity.

19 “(C)(i) Except as provided in clause (ii), the period
20 prescribed in this subparagraph with respect to an indi-
21 vidual is 60 consecutive months beginning with the month
22 following the most recent month for which the individual
23 was entitled to a benefit described in subparagraph
24 (B)(i)(I) prior to the entitlement termination described in
25 subparagraph (B)(i)(II).

1 “(ii) In the case of an individual who fails to file a
2 reinstatement request within the period prescribed in
3 clause (i), the Commissioner may extend the period if the
4 Commissioner determines that the individual had good
5 cause for the failure to so file.

6 “(2)(A)(i) A request for reinstatement shall be filed
7 in such form, and containing such information, as the
8 Commissioner may prescribe.

9 “(ii) A request for reinstatement shall include express
10 declarations by the individual that the individual meets the
11 requirements specified in clauses (ii) and (iii) of para-
12 graph (1)(B).

13 “(B) A request for reinstatement filed in accordance
14 with subparagraph (A) may constitute an application for
15 benefits in the case of any individual who the Commis-
16 sioner determines is not entitled to reinstated benefits
17 under this subsection.

18 “(3) In determining whether an individual meets the
19 requirements of paragraph (1)(B)(ii), the provisions of
20 subsection (f) shall apply.

21 “(4)(A)(i) Subject to clause (ii), entitlement to bene-
22 fits reinstated under this subsection shall commence with
23 the benefit payable for the month in which a request for
24 reinstatement is filed.

1 “(ii) An individual whose entitlement to a benefit for
2 any month would have been reinstated under this sub-
3 section had the individual filed a request for reinstatement
4 before the end of such month shall be entitled to such ben-
5 efit for such month if such request for reinstatement is
6 filed before the end of the twelfth month immediately suc-
7 ceeding such month.

8 “(B)(i) Subject to clauses (ii) and (iii), the amount
9 of the benefit payable for any month pursuant to the rein-
10 statement of entitlement under this subsection shall be de-
11 termined in accordance with the provisions of this title.

12 “(ii) For purposes of computing the primary insur-
13 ance amount of an individual whose entitlement to benefits
14 under this section is reinstated under this subsection, the
15 date of onset of the individual’s disability shall be the date
16 of onset used in determining the individual’s most recent
17 period of disability arising in connection with such benefits
18 payable on the basis of an application.

19 “(iii) Benefits under this section or section 202 pay-
20 able for any month pursuant to a request for reinstatement
21 filed in accordance with paragraph (2) shall be re-
22 duced by the amount of any provisional benefit paid to
23 such individual for such month under paragraph (7).

24 “(C) No benefit shall be payable pursuant to an enti-
25 tlement reinstated under this subsection to an individual

1 for any month in which the individual engages in substan-
2 tial gainful activity.

3 “(D) The entitlement of any individual that is rein-
4 stated under this subsection shall end with the benefits
5 payable for the month preceding whichever of the following
6 months is the earliest:

7 “(i) The month in which the individual dies.

8 “(ii) The month in which the individual attains
9 retirement age.

10 “(iii) The third month following the month in
11 which the individual’s disability ceases.

12 “(5) Whenever an individual’s entitlement to benefits
13 under this section is reinstated under this subsection, enti-
14 tlement to benefits payable on the basis of such individ-
15 ual’s wages and self-employment income may be reinstated
16 with respect to any person previously entitled to such ben-
17 efits on the basis of an application if the Commissioner
18 determines that such person satisfies all the requirements
19 for entitlement to such benefits except requirements re-
20 lated to the filing of an application. The provisions of
21 paragraph (4) shall apply to the reinstated entitlement of
22 any such person to the same extent that they apply to
23 the reinstated entitlement of such individual.

24 “(6) An individual to whom benefits are payable
25 under this section or section 202 pursuant to a reinstatement

1 ment of entitlement under this subsection for 24 months
2 (whether or not consecutive) shall, with respect to benefits
3 so payable after such twenty-fourth month, be deemed for
4 purposes of paragraph (1)(B)(i)(I) and the determination,
5 if appropriate, of the termination month in accordance
6 with subsection (a)(1) of this section, or subsection (d)(1),
7 (e)(1), or (f)(1) of section 202, to be entitled to such bene-
8 fits on the basis of an application filed therefor.

9 “(7)(A) An individual described in paragraph (1)(B)
10 who files a request for reinstatement in accordance with
11 the provisions of paragraph (2)(A) shall be entitled to pro-
12 visional benefits payable in accordance with this para-
13 graph, unless the Commissioner determines that the indi-
14 vidual does not meet the requirements of paragraph
15 (1)(B)(i) or that the individual’s declaration under para-
16 graph (2)(A)(ii) is false. Any such determination by the
17 Commissioner shall be final and not subject to review
18 under subsection (b) or (g) of section 205.

19 “(B) The amount of a provisional benefit for a month
20 shall equal the amount of the last monthly benefit payable
21 to the individual under this title on the basis of an applica-
22 tion increased by an amount equal to the amount, if any,
23 by which such last monthly benefit would have been in-
24 creased as a result of the operation of section 215(i).

1 “(C)(i) Provisional benefits shall begin with the
2 month in which a request for reinstatement is filed in ac-
3 cordance with paragraph (2)(A).

4 “(ii) Provisional benefits shall end with the earliest
5 of—

6 “(I) the month in which the Commissioner
7 makes a determination regarding the individual’s en-
8 titlement to reinstated benefits;

9 “(II) the fifth month following the month de-
10 scribed in clause (i);

11 “(III) the month in which the individual per-
12 forms substantial gainful activity; or

13 “(IV) the month in which the Commissioner de-
14 termines that the individual does not meet the re-
15 quirements of paragraph (1)(B)(i) or that the indi-
16 vidual’s declaration made in accordance with para-
17 graph (2)(A)(ii) is false.

18 “(D) In any case in which the Commissioner deter-
19 mines that an individual is not entitled to reinstated bene-
20 fits, any provisional benefits paid to the individual under
21 this paragraph shall not be subject to recovery as an over-
22 payment unless the Commissioner determines that the in-
23 dividual knew or should have known that the individual
24 did not meet the requirements of paragraph (1)(B).”.

25 (b) SSI BENEFITS.—

1 “(ii) the individual is blind or disabled and the
2 physical or mental impairment that is the basis for
3 the finding of blindness or disability is the same as
4 (or related to) the physical or mental impairment
5 that was the basis for the finding of blindness or
6 disability that gave rise to the eligibility described in
7 clause (i);

8 “(iii) the individual’s blindness or disability ren-
9 ders the individual unable to perform substantial
10 gainful activity; and

11 “(iv) the individual satisfies the nonmedical re-
12 quirements for eligibility for benefits under this title.

13 “(C)(i) Except as provided in clause (ii), the period
14 prescribed in this subparagraph with respect to an indi-
15 vidual is 60 consecutive months beginning with the month
16 following the most recent month for which the individual
17 was eligible for a benefit under this title (including section
18 1619) prior to the period of ineligibility described in sub-
19 paragraph (B)(i)(II).

20 “(ii) In the case of an individual who fails to file a
21 reinstatement request within the period prescribed in
22 clause (i), the Commissioner may extend the period if the
23 Commissioner determines that the individual had good
24 cause for the failure to so file.

1 “(2)(A)(i) A request for reinstatement shall be filed
2 in such form, and containing such information, as the
3 Commissioner may prescribe.

4 “(ii) A request for reinstatement shall include express
5 declarations by the individual that the individual meets the
6 requirements specified in clauses (ii) through (iv) of para-
7 graph (1)(B).

8 “(B) A request for reinstatement filed in accordance
9 with subparagraph (A) may constitute an application for
10 benefits in the case of any individual who the Commis-
11 sioner determines is not eligible for reinstated benefits
12 under this subsection.

13 “(3) In determining whether an individual meets the
14 requirements of paragraph (1)(B)(ii), the provisions of
15 section 1614(a)(4) shall apply.

16 “(4)(A) Eligibility for benefits reinstated under this
17 subsection shall commence with the benefit payable for the
18 month following the month in which a request for rein-
19 statement is filed.

20 “(B)(i) Subject to clause (ii), the amount of the ben-
21 efit payable for any month pursuant to the reinstatement
22 of eligibility under this subsection shall be determined in
23 accordance with the provisions of this title.

24 “(ii) The benefit under this title payable for any
25 month pursuant to a request for reinstatement filed in ac-

1 cordance with paragraph (2) shall be reduced by the
2 amount of any provisional benefit paid to such individual
3 for such month under paragraph (7).

4 “(C) Except as otherwise provided in this subsection,
5 eligibility for benefits under this title reinstated pursuant
6 to a request filed under paragraph (2) shall be subject
7 to the same terms and conditions as eligibility established
8 pursuant to an application filed therefor.

9 “(5) Whenever an individual’s eligibility for benefits
10 under this title is reinstated under this subsection, eligi-
11 bility for such benefits shall be reinstated with respect to
12 the individual’s spouse if such spouse was previously an
13 eligible spouse of the individual under this title and the
14 Commissioner determines that such spouse satisfies all the
15 requirements for eligibility for such benefits except re-
16 quirements related to the filing of an application. The pro-
17 visions of paragraph (4) shall apply to the reinstated eligi-
18 bility of the spouse to the same extent that they apply
19 to the reinstated eligibility of such individual.

20 “(6) An individual to whom benefits are payable
21 under this title pursuant to a reinstatement of eligibility
22 under this subsection for twenty-four months (whether or
23 not consecutive) shall, with respect to benefits so payable
24 after such twenty-fourth month, be deemed for purposes

1 of paragraph (1)(B)(i)(I) to be eligible for such benefits
2 on the basis of an application filed therefor.

3 “(7)(A) An individual described in paragraph (1)(B)
4 who files a request for reinstatement in accordance with
5 the provisions of paragraph (2)(A) shall be eligible for pro-
6 visional benefits payable in accordance with this para-
7 graph, unless the Commissioner determines that the indi-
8 vidual does not meet the requirements of paragraph
9 (1)(B)(i) or that the individual’s declaration under para-
10 graph (2)(A)(ii) is false. Any such determination by the
11 Commissioner shall be final and not subject to review
12 under paragraph (1) or (3) of subsection (c).

13 “(B)(i) Except as otherwise provided in clause (ii),
14 the amount of a provisional benefit for a month shall equal
15 the amount of the monthly benefit that would be payable
16 to an eligible individual under this title with the same kind
17 and amount of income.

18 “(ii) If the individual has a spouse who was pre-
19 viously an eligible spouse of the individual under this title
20 and the Commissioner determines that such spouse satis-
21 fies all the requirements of section 1614(b) except require-
22 ments related to the filing of an application, the amount
23 of a provisional benefit for a month shall equal the amount
24 of the monthly benefit that would be payable to an eligible

1 individual and eligible spouse under this title with the
2 same kind and amount of income.

3 “(C)(i) Provisional benefits shall begin with the
4 month following the month in which a request for rein-
5 statement is filed in accordance with paragraph (2)(A).

6 “(ii) Provisional benefits shall end with the earliest
7 of—

8 “(I) the month in which the Commissioner
9 makes a determination regarding the individual’s eli-
10 gibility for reinstated benefits;

11 “(II) the fifth month following the month for
12 which provisional benefits are first payable under
13 clause (i); or

14 “(III) the month in which the Commissioner de-
15 termines that the individual does not meet the re-
16 quirements of paragraph (1)(B)(i) or that the indi-
17 vidual’s declaration made in accordance with para-
18 graph (2)(A)(ii) is false.

19 “(D) In any case in which the Commissioner deter-
20 mines that an individual is not eligible for reinstated bene-
21 fits, any provisional benefits paid to the individual under
22 this paragraph shall not be subject to recovery as an over-
23 payment unless the Commissioner determines that the in-
24 dividual knew or should have known that the individual
25 did not meet the requirements of paragraph (1)(B).

1 “(8) For purposes of this subsection other than para-
2 graph (7), the term ‘benefits under this title’ includes
3 State supplementary payments made pursuant to an
4 agreement under section 1616(a) of this Act or section
5 212(b) of Public Law 93–66.”.

6 (2) CONFORMING AMENDMENTS.—

7 (A) Section 1631(j)(1) of such Act (42
8 U.S.C. 1383(j)(1)) is amended by striking the
9 period and inserting “, or has filed a request
10 for reinstatement of eligibility under subsection
11 (p)(2) and been determined to be eligible for re-
12 instatement.”.

13 (B) Section 1631(j)(2)(A)(i)(I) of such Act
14 (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by
15 inserting “(other than pursuant to a request for
16 reinstatement under subsection (p))” after “eli-
17 gible”.

18 (c) EFFECTIVE DATE.—

19 (1) IN GENERAL.—The amendments made by
20 this section shall take effect on the first day of the
21 thirteenth month beginning after the date of the en-
22 actment of this Act.

23 (2) LIMITATION.—No benefit shall be payable
24 under title II or XVI on the basis of a request for
25 reinstatement filed under section 223(i) or 1631(p)

1 of the Social Security Act before the effective date
2 described in paragraph (1).

3 **Subtitle C—Work Incentives**
4 **Planning, Assistance, and Outreach**

5 **SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.**

6 Part A of title XI of the Social Security Act (42
7 U.S.C. 1301 et seq.), as amended by section 101, is
8 amended by adding after section 1148 the following:

9 “WORK INCENTIVES OUTREACH PROGRAM

10 “SEC. 1149. (a) ESTABLISHMENT.—

11 “(1) IN GENERAL.—The Commissioner, in con-
12 sultation with the Ticket to Work and Work Incen-
13 tives Advisory Panel established under section 101(f)
14 of the Ticket to Work and Work Incentives Improve-
15 ment Act of 1999, shall establish a community-based
16 work incentives planning and assistance program for
17 the purpose of disseminating accurate information to
18 disabled beneficiaries on work incentives programs
19 and issues related to such programs.

20 “(2) GRANTS, COOPERATIVE AGREEMENTS,
21 CONTRACTS, AND OUTREACH.—Under the program
22 established under this section, the Commissioner
23 shall—

24 “(A) establish a competitive program of
25 grants, cooperative agreements, or contracts to
26 provide benefits planning and assistance, in-

1 including information on the availability of pro-
2 tection and advocacy services, to disabled bene-
3 ficiaries, including individuals participating in
4 the Ticket to Work and Self-Sufficiency Pro-
5 gram established under section 1148, the pro-
6 gram established under section 1619, and other
7 programs that are designed to encourage dis-
8 abled beneficiaries to work;

9 “(B) conduct directly, or through grants,
10 cooperative agreements, or contracts, ongoing
11 outreach efforts to disabled beneficiaries (and
12 to the families of such beneficiaries) who are
13 potentially eligible to participate in Federal or
14 State work incentive programs that are de-
15 signed to assist disabled beneficiaries to work,
16 including—

17 “(i) preparing and disseminating in-
18 formation explaining such programs; and

19 “(ii) working in cooperation with
20 other Federal, State, and private agencies
21 and nonprofit organizations that serve dis-
22 abled beneficiaries, and with agencies and
23 organizations that focus on vocational re-
24 habilitation and work-related training and
25 counseling;

1 “(C) establish a corps of trained, acces-
2 sible, and responsive work incentives specialists
3 within the Social Security Administration who
4 will specialize in disability work incentives
5 under titles II and XVI for the purpose of dis-
6 seminating accurate information with respect to
7 inquiries and issues relating to work incentives
8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
11 and XVI; and

12 “(iii) individuals or entities awarded
13 grants under subparagraphs (A) or (B);
14 and

15 “(D) provide—

16 “(i) training for work incentives spe-
17 cialists and individuals providing planning
18 assistance described in subparagraph (C);
19 and

20 “(ii) technical assistance to organiza-
21 tions and entities that are designed to en-
22 courage disabled beneficiaries to return to
23 work.

24 “(3) COORDINATION WITH OTHER PRO-
25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), a one-stop de-
15 livery system established under subtitle B of title I
16 of the Workforce Investment Act of 1998, and other
17 services.

18 “(b) CONDITIONS.—

19 “(1) SELECTION OF ENTITIES.—

20 “(A) APPLICATION.—An entity shall sub-
21 mit an application for a grant, cooperative
22 agreement, or contract to provide benefits plan-
23 ning and assistance to the Commissioner at
24 such time, in such manner, and containing such
25 information as the Commissioner may deter-

1 mine is necessary to meet the requirements of
2 this section.

3 “(B) STATEWIDENESS.—The Commis-
4 sioner shall ensure that the planning, assist-
5 ance, and information described in paragraph
6 (2) shall be available on a statewide basis.

7 “(C) ELIGIBILITY OF STATES AND PRI-
8 VATE ORGANIZATIONS.—

9 “(i) IN GENERAL.—The Commissioner
10 may award a grant, cooperative agreement,
11 or contract under this section to a State or
12 a private agency or organization (other
13 than Social Security Administration Field
14 Offices and the State agency administering
15 the State medicaid program under title
16 XIX, including any agency or entity de-
17 scribed in clause (ii), that the Commis-
18 sioner determines is qualified to provide
19 the planning, assistance, and information
20 described in paragraph (2)).

21 “(ii) AGENCIES AND ENTITIES DE-
22 SCRIBED.—The agencies and entities de-
23 scribed in this clause are the following:

24 “(I) Any public or private agency
25 or organization (including Centers for

1 Independent Living established under
2 title VII of the Rehabilitation Act of
3 1973, protection and advocacy organi-
4 zations, client assistance programs es-
5 tablished in accordance with section
6 112 of the Rehabilitation Act of 1973,
7 and State Developmental Disabilities
8 Councils established in accordance
9 with section 124 of the Developmental
10 Disabilities Assistance and Bill of
11 Rights Act (42 U.S.C. 6024)) that the
12 Commissioner determines satisfies the
13 requirements of this section.

14 “(II) The State agency admin-
15 istering the State program funded
16 under part A of title IV.

17 “(D) EXCLUSION FOR CONFLICT OF IN-
18 TEREST.—The Commissioner may not award a
19 grant, cooperative agreement, or contract under
20 this section to any entity that the Commissioner
21 determines would have a conflict of interest if
22 the entity were to receive a grant, cooperative
23 agreement, or contract under this section.

24 “(2) SERVICES PROVIDED.—A recipient of a
25 grant, cooperative agreement, or contract to provide

1 benefits planning and assistance shall select individ-
2 uals who will act as planners and provide informa-
3 tion, guidance, and planning to disabled beneficiaries
4 on the—

5 “(A) availability and interrelation of any
6 Federal or State work incentives programs de-
7 signed to assist disabled beneficiaries that the
8 individual may be eligible to participate in;

9 “(B) adequacy of any health benefits cov-
10 erage that may be offered by an employer of
11 the individual and the extent to which other
12 health benefits coverage may be available to the
13 individual; and

14 “(C) availability of protection and advo-
15 cacy services for disabled beneficiaries and how
16 to access such services.

17 “(3) AMOUNT OF GRANTS, COOPERATIVE
18 AGREEMENTS, OR CONTRACTS.—

19 “(A) BASED ON POPULATION OF DIS-
20 ABLED BENEFICIARIES.—Subject to subpara-
21 graph (B), the Commissioner shall award a
22 grant, cooperative agreement, or contract under
23 this section to an entity based on the percent-
24 age of the population of the State where the en-
25 tity is located who are disabled beneficiaries.

1 “(B) LIMITATIONS.—

2 “(i) PER GRANT.—No entity shall re-
3 ceive a grant, cooperative agreement, or
4 contract under this section for a fiscal year
5 that is less than \$50,000 or more than
6 \$300,000.

7 “(ii) TOTAL AMOUNT FOR ALL
8 GRANTS, COOPERATIVE AGREEMENTS, AND
9 CONTRACTS.—The total amount of all
10 grants, cooperative agreements, and con-
11 tracts awarded under this section for a fis-
12 cal year may not exceed \$23,000,000.

13 “(4) ALLOCATION OF COSTS.—The costs of car-
14 rying out this section shall be paid from amounts
15 made available for the administration of title II and
16 amounts made available for the administration of
17 title XVI, and shall be allocated among those
18 amounts as appropriate.

19 “(c) DEFINITIONS.—In this section:

20 “(1) COMMISSIONER.—The term ‘Commis-
21 sioner’ means the Commissioner of Social Security.

22 “(2) DISABLED BENEFICIARY.—The term ‘dis-
23 abled beneficiary’ has the meaning given that term
24 in section 1148(k)(2).

1 “(c) APPLICATION.—In order to receive payments
2 under this section, a protection and advocacy system shall
3 submit an application to the Commissioner, at such time,
4 in such form and manner, and accompanied by such infor-
5 mation and assurances as the Commissioner may require.

6 “(d) AMOUNT OF PAYMENTS.—

7 “(1) IN GENERAL.—Subject to the amount ap-
8 propriated for a fiscal year for making payments
9 under this section, a protection and advocacy system
10 shall not be paid an amount that is less than—

11 “(A) in the case of a protection and advoca-
12 cacy system located in a State (including the
13 District of Columbia and Puerto Rico) other
14 than Guam, American Samoa, the United
15 States Virgin Islands, and the Commonwealth
16 of the Northern Mariana Islands, the greater
17 of—

18 “(i) \$100,000; or

19 “(ii) $\frac{1}{3}$ of 1 percent of the amount
20 available for payments under this section;
21 and

22 “(B) in the case of a protection and advoca-
23 cacy system located in Guam, American Samoa,
24 the United States Virgin Islands, and the Com-

1 monwealth of the Northern Mariana Islands,
2 \$50,000.

3 “(2) INFLATION ADJUSTMENT.—For each fiscal
4 year in which the total amount appropriated to carry
5 out this section exceeds the total amount appro-
6 priated to carry out this section in the preceding fis-
7 cal year, the Commissioner shall increase each min-
8 imum payment under subparagraphs (A) and (B) of
9 paragraph (1) by a percentage equal to the percent-
10 age increase in the total amount so appropriated to
11 carry out this section.

12 “(e) ANNUAL REPORT.—Each protection and advo-
13 cacy system that receives a payment under this section
14 shall submit an annual report to the Commissioner and
15 the Ticket to Work and Work Incentives Advisory Panel
16 established under section 101(f) of the Ticket to Work and
17 Work Incentives Improvement Act of 1999 on the services
18 provided to individuals by the system.

19 “(f) FUNDING.—

20 “(1) ALLOCATION OF PAYMENTS.—Payments
21 under this section shall be made from amounts made
22 available for the administration of title II and
23 amounts made available for the administration of
24 title XVI, and shall be allocated among those
25 amounts as appropriate.

1 “(2) CARRYOVER.—Any amounts allotted for
2 payment to a protection and advocacy system under
3 this section for a fiscal year shall remain available
4 for payment to or on behalf of the protection and
5 advocacy system until the end of the succeeding fis-
6 cal year.

7 “(g) DEFINITIONS.—In this section:

8 “(1) COMMISSIONER.—The term ‘Commis-
9 sioner’ means the Commissioner of Social Security.

10 “(2) DISABLED BENEFICIARY.—The term ‘dis-
11 abled beneficiary’ has the meaning given that term
12 in section 1148(k)(2).

13 “(3) PROTECTION AND ADVOCACY SYSTEM.—
14 The term ‘protection and advocacy system’ means a
15 protection and advocacy system established pursuant
16 to part C of title I of the Developmental Disabilities
17 Assistance and Bill of Rights Act (42 U.S.C. 6041
18 et seq.).

19 “(h) AUTHORIZATION OF APPROPRIATIONS.—There
20 is authorized to be appropriated to carry out this section
21 \$7,000,000 for each of the fiscal years 2000 through
22 2004.”.

1 **TITLE II—EXPANDED AVAIL-**
2 **ABILITY OF HEALTH CARE**
3 **SERVICES**

4 **SEC. 201. EXPANDING STATE OPTIONS UNDER THE MED-**
5 **ICAID PROGRAM FOR WORKERS WITH DIS-**
6 **ABILITIES.**

7 (a) IN GENERAL.—

8 (1) STATE OPTION TO PROVIDE OPPORTUNITY
9 FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY
10 IMPROVED DISABILITY TO BUY INTO MEDICAID.—

11 (A) ELIGIBILITY.—Section
12 1902(a)(10)(A)(ii) of the Social Security Act
13 (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

14 (i) in subclause (XIII), by striking
15 “or” at the end;

16 (ii) in subclause (XIV), by adding
17 “or” at the end; and

18 (iii) by adding at the end the fol-
19 lowing:

20 “(XV) who are employed individ-
21 uals with a medically improved dis-
22 ability described in section 1905(v)(1)
23 and whose assets, resources, and
24 earned or unearned income (or both)
25 do not exceed such limitations (if any)

1 as the State may establish, but only if
2 the State provides medical assistance
3 to individuals described in subclause
4 (XIII);”.

5 (B) DEFINITION OF EMPLOYED INDIVID-
6 UALS WITH A MEDICALLY IMPROVED DIS-
7 ABILITY.—Section 1905 of the Social Security
8 Act (42 U.S.C. 1396d) is amended by adding at
9 the end the following:

10 “(v)(1) The term ‘employed individual with a medi-
11 cally improved disability’ means an individual who—

12 “(A) is at least 16, but less than 65, years of
13 age;

14 “(B) is employed (as defined in paragraph (2));

15 “(C) ceases to be eligible for medical assistance
16 under section 1902(a)(10)(A)(ii)(XIII) because the
17 individual, by reason of medical improvement, is de-
18 termined at the time of a regularly scheduled con-
19 tinuing disability review to no longer be eligible for
20 benefits under section 223(d) or 1614(a)(3); and

21 “(D) continues to have a severe medically deter-
22 minable impairment, as determined under regula-
23 tions of the Secretary.

24 “(2) For purposes of paragraph (1), an individual is
25 considered to be ‘employed’ if the individual—

1 “(A) is earning at least the applicable minimum
2 wage requirement under section 6 of the Fair Labor
3 Standards Act (29 U.S.C. 206) and working at least
4 40 hours per month; or

5 “(B) is engaged in a work effort that meets
6 substantial and reasonable threshold criteria for
7 hours of work, wages, or other measures, as defined
8 by the State and approved by the Secretary.”.

9 (C) CONFORMING AMENDMENT.—Section
10 1905(a) of such Act (42 U.S.C. 1396d(a)) is
11 amended in the matter preceding paragraph
12 (1)—

13 (i) in clause (x), by striking “or” at
14 the end;

15 (ii) in clause (xi), by adding “or” at
16 the end; and

17 (iii) by inserting after clause (xi), the
18 following:

19 “(xii) employed individuals with a medically im-
20 proved disability (as defined in subsection (v)),”.

21 (2) STATE AUTHORITY TO IMPOSE INCOME-RE-
22 LATED PREMIUMS AND COST-SHARING.—Section
23 1916 of such Act (42 U.S.C. 1396o) is amended—

1 (A) in subsection (a), by striking “The
2 State plan” and inserting “Subject to sub-
3 section (g), the State plan”; and

4 (B) by adding at the end the following:

5 “(g) With respect to individuals provided medical as-
6 sistance only under subclause (XV) of section
7 1902(a)(10)(A)(ii), a State may (in a uniform manner for
8 individuals described in either such subclause)—

9 “(1) require such individuals to pay premiums
10 or other cost-sharing charges set on a sliding scale
11 based on income that the State may determine; and

12 “(2) require payment of 100 percent of such
13 premiums in the case of such an individual who has
14 income that exceeds 250 percent of the income offi-
15 cial poverty line (referred to in subsection (c)(1)) ap-
16 plicable to a family of the size involved.”.

17 (3) PROHIBITION AGAINST SUPPLANTATION OF
18 STATE FUNDS AND STATE FAILURE TO MAINTAIN
19 EFFORT.—Section 1903(i) of such Act (42 U.S.C.
20 1396b(i)) is amended—

21 (A) by striking the period at the end of
22 paragraph (19) and inserting “; or”; and

23 (B) by inserting after such paragraph the
24 following:

1 apply to medical assistance for items and services
2 furnished on or after October 1, 1999.

3 (2) RETROACTIVITY OF CONFORMING AMEND-
4 MENT.—The amendment made by subsection (b)(2)
5 takes effect as if included in the enactment of the
6 Balanced Budget Act of 1997.

7 **SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI**
8 **DISABILITY BENEFIT RECIPIENTS.**

9 (a) IN GENERAL.—The next to last sentence of sec-
10 tion 226(b) of the Social Security Act (42 U.S.C. 426)
11 is amended by striking “24” and inserting “96”.

12 (b) EFFECTIVE DATE.—The amendment made by
13 subsection (a) shall be effective on and after October 1,
14 2000.

15 (c) GAO REPORT.—Not later than 5 years after the
16 date of the enactment of this Act, the Comptroller General
17 of the United States shall submit a report to the Congress
18 that—

19 (1) examines the effectiveness and cost of the
20 amendment made by subsection (a);

21 (2) examines the necessity and effectiveness of
22 providing continuation of medicare coverage under
23 section 226(b) of the Social Security Act to individ-
24 uals whose annual income exceeds the contribution

1 and benefit base (as determined under section 230
2 of such Act);

3 (3) examines the viability of providing the con-
4 tinuation of medicare coverage under such section
5 226(b) based on a sliding scale premium for individ-
6 uals whose annual income exceeds such contribution
7 and benefit base;

8 (4) examines the viability of providing the con-
9 tinuation of medicare coverage under such section
10 226(b) based on a premium buy-in by the bene-
11 ficiary's employer in lieu of coverage under private
12 health insurance;

13 (5) examines the interrelation between the use
14 of the continuation of medicare coverage under such
15 section 226(b) and the use of private health insur-
16 ance coverage by individuals during the extended pe-
17 riod; and

18 (6) recommends such legislative or administra-
19 tive changes relating to the continuation of medicare
20 coverage for recipients of social security disability
21 benefits as the Comptroller General determines are
22 appropriate.

1 **SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
2 **FRASTRUCTURES TO SUPPORT WORKING IN-**
3 **DIVIDUALS WITH DISABILITIES.**

4 (a) ESTABLISHMENT.—

5 (1) IN GENERAL.—The Secretary of Health and
6 Human Services (in this section referred to as the
7 “Secretary”) shall award grants described in sub-
8 section (b) to States to support the design, establish-
9 ment, and operation of State infrastructures that
10 provide items and services to support working indi-
11 viduals with disabilities.

12 (2) APPLICATION.—In order to be eligible for
13 an award of a grant under this section, a State shall
14 submit an application to the Secretary at such time,
15 in such manner, and containing such information as
16 the Secretary shall require.

17 (3) DEFINITION OF STATE.—In this section,
18 the term “State” means each of the 50 States, the
19 District of Columbia, Puerto Rico, Guam, the
20 United States Virgin Islands, American Samoa, and
21 the Commonwealth of the Northern Mariana Is-
22 lands.

23 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
24 REACH.—

1 (1) IN GENERAL.—Out of the funds appro-
2 priated under subsection (e), the Secretary shall
3 award grants to States to—

4 (A) support the establishment, implemen-
5 tation, and operation of the State infrastruc-
6 tures described in subsection (a); and

7 (B) conduct outreach campaigns regarding
8 the existence of such infrastructures.

9 (2) ELIGIBILITY FOR GRANTS.—

10 (A) IN GENERAL.—No State may receive a
11 grant under this subsection unless the State—

12 (i) has an approved amendment to the
13 State plan under title XIX of the Social
14 Security Act (42 U.S.C. 1396 et seq.) that
15 provides medical assistance under such
16 plan to individuals described in section
17 1902(a)(10)(A)(ii)(XIII) of the Social Se-
18 curity Act (42 U.S.C.
19 1396a(a)(10)(A)(ii)(XIII)); and

20 (ii) demonstrates to the satisfaction of
21 the Secretary that the State makes per-
22 sonal assistance services available under
23 the State plan under title XIX of the So-
24 cial Security Act (42 U.S.C. 1396 et seq.)
25 to the extent necessary to enable individ-

1 uals described in clause (i) to remain em-
2 ployed (as determined under section
3 1905(v)(2) of the Social Security Act (42
4 U.S.C. 1396d(v)(2))).

5 (B) DEFINITION OF PERSONAL ASSIST-
6 ANCE SERVICES.—In this paragraph, the term
7 “personal assistance services” means a range of
8 services, provided by 1 or more persons, de-
9 signed to assist an individual with a disability
10 to perform daily activities on and off the job
11 that the individual would typically perform if
12 the individual did not have a disability. Such
13 services shall be designed to increase the indi-
14 vidual’s control in life and ability to perform ev-
15 eryday activities on or off the job.

16 (3) DETERMINATION OF AWARDS.—

17 (A) IN GENERAL.—Subject to subpara-
18 graph (B), the Secretary shall determine a for-
19 mula for awarding grants to States under this
20 section that provides special consideration to
21 States that provide medical assistance under
22 title XIX of the Social Security Act to individ-
23 uals described in section
24 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
25 1396a(a)(10)(A)(ii)(XV)).

1 (B) AWARD LIMITS.—

2 (i) MINIMUM AWARDS.—

3 (I) IN GENERAL.—Subject to
4 subclause (II), no State with an ap-
5 proved application under this section
6 shall receive a grant for a fiscal year
7 that is less than \$500,000.

8 (II) PRO RATA REDUCTIONS.—If
9 the funds appropriated under sub-
10 section (e) for a fiscal year are not
11 sufficient to pay each State with an
12 application approved under this sec-
13 tion the minimum amount described
14 in subclause (I), the Secretary shall
15 pay each such State an amount equal
16 to the pro rata share of the amount
17 made available.

18 (ii) MAXIMUM AWARDS.—No State
19 with an application that has been approved
20 under this section shall receive a grant for
21 a fiscal year that exceeds 15 percent of the
22 total expenditures by the State (including
23 the reimbursed Federal share of such ex-
24 penditures) for medical assistance for indi-
25 viduals eligible under subclause (XIII) or

1 (XV) of section 1902(a)(10)(A)(ii) of the
2 Social Security Act (42 U.S.C.
3 1396a(a)(10)(A)(ii)), as estimated by the
4 State and approved by the Secretary.

5 (c) AVAILABILITY OF FUNDS.—

6 (1) FUNDS AWARDED TO STATES.—Funds
7 awarded to a State under a grant made under this
8 section for a fiscal year shall remain available until
9 expended.

10 (2) FUNDS NOT AWARDED TO STATES.—Funds
11 not awarded to States in the fiscal year for which
12 they are appropriated shall remain available in suc-
13 ceeding fiscal years for awarding by the Secretary.

14 (d) ANNUAL REPORT.—A State that is awarded a
15 grant under this section shall submit an annual report to
16 the Secretary on the use of funds provided under the
17 grant. Each report shall include the percentage increase
18 in the number of title II disability beneficiaries, as defined
19 in section 1148(k)(3) of the Social Security Act (as
20 amended by section 101(a)) in the State, and title XVI
21 disability beneficiaries, as defined in section 1148(k)(4) of
22 the Social Security Act (as so amended) in the State who
23 return to work.

24 (e) APPROPRIATION.—

1 (1) IN GENERAL.—Out of any funds in the
2 Treasury not otherwise appropriated, there is appro-
3 priated to make grants under this section—

4 (A) for fiscal year 2000, \$20,000,000;

5 (B) for fiscal year 2001, \$25,000,000;

6 (C) for fiscal year 2002, \$30,000,000;

7 (D) for fiscal year 2003, \$35,000,000;

8 (E) for fiscal year 2004, \$40,000,000; and

9 (F) for each of fiscal years 2005 through
10 2010, the amount appropriated for the pre-
11 ceding fiscal year increased by the percentage
12 increase (if any) in the Consumer Price Index
13 for All Urban Consumers (United States city
14 average) for the preceding fiscal year.

15 (2) BUDGET AUTHORITY.—This subsection con-
16 stitutes budget authority in advance of appropria-
17 tions Acts and represents the obligation of the Fed-
18 eral Government to provide for the payment of the
19 amounts appropriated under paragraph (1).

20 (f) RECOMMENDATION.—Not later than October 1,
21 2009, the Secretary, in consultation with the Work Incen-
22 tives Advisory Panel established under section 201(f),
23 shall submit a recommendation to the Committee on Com-
24 merce of the House of Representatives and the Committee
25 on Finance of the Senate regarding whether the grant pro-

1 gram established under this section should be continued
2 after fiscal year 2010.

3 **SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE**
4 **MEDICAID PROGRAM OF WORKERS WITH PO-**
5 **TENTIALLY SEVERE DISABILITIES.**

6 (a) STATE APPLICATION.—A State may apply to the
7 Secretary of Health and Human Services (in this section
8 referred to as the “Secretary”) for approval of a dem-
9 onstration project (in this section referred to as a “dem-
10 onstration project”) under which up to a specified max-
11 imum number of individuals who are workers with a po-
12 tentially severe disability (as defined in subsection (b)(1))
13 are provided medical assistance equal to that provided
14 under section 1905(a) of the Social Security Act (42
15 U.S.C. 1396d(a)) to individuals described in section
16 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C.
17 1396a(a)(10)(A)(ii)(XIII)).

18 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
19 ABILITY DEFINED.—For purposes of this section—

20 (1) IN GENERAL.—The term “worker with a
21 potentially severe disability” means, with respect to
22 a demonstration project, an individual who—

23 (A) is at least 16, but less than 65, years
24 of age;

1 (B) has a specific physical or mental im-
2 pairment that, as defined by the State under
3 the demonstration project, is reasonably ex-
4 pected, but for the receipt of items and services
5 described in section 1905(a) of the Social Secu-
6 rity Act (42 U.S.C. 1396d(a)), to become blind
7 or disabled (as defined under section 1614(a) of
8 the Social Security Act (42 U.S.C. 1382c(a)));
9 and

10 (C) is employed (as defined in paragraph
11 (2)).

12 (2) DEFINITION OF EMPLOYED.—An individual
13 is considered to be “employed” if the individual—

14 (A) is earning at least the applicable min-
15 imum wage requirement under section 6 of the
16 Fair Labor Standards Act (29 U.S.C. 206) and
17 working at least 40 hours per month; or

18 (B) is engaged in a work effort that meets
19 substantial and reasonable threshold criteria for
20 hours of work, wages, or other measures, as de-
21 fined under the demonstration project and ap-
22 proved by the Secretary.

23 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

24 (1) IN GENERAL.—Subject to paragraph (3),
25 the Secretary shall approve applications under sub-

1 section (a) that meet the requirements of paragraph
2 (2) and such additional terms and conditions as the
3 Secretary may require. The Secretary may waive the
4 requirement of section 1902(a)(1) of the Social Se-
5 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
6 State demonstrations.

7 (2) TERMS AND CONDITIONS OF DEMONSTRA-
8 TION PROJECTS.—The Secretary may not approve a
9 demonstration project under this section unless the
10 State provides assurances satisfactory to the Sec-
11 retary that the following conditions are or will be
12 met:

13 (A) ELECTION OF OPTIONAL CATEGORY.—

14 The State has elected to provide coverage under
15 its plan under title XIX of the Social Security
16 Act of individuals described in section
17 1902(a)(10)(A)(ii)(XIII) of the Social Security
18 Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)).

19 (B) MAINTENANCE OF STATE EFFORT.—

20 Federal funds paid to a State pursuant to this
21 section must be used to supplement, but not
22 supplant, the level of State funds expended for
23 workers with potentially severe disabilities
24 under programs in effect for such individuals at

1 the time the demonstration project is approved
2 under this section.

3 (C) INDEPENDENT EVALUATION.—The
4 State provides for an independent evaluation of
5 the project.

6 (3) LIMITATIONS ON FEDERAL FUNDING.—

7 (A) APPROPRIATION.—

8 (i) IN GENERAL.—Out of any funds in
9 the Treasury not otherwise appropriated,
10 there is appropriated to carry out this sec-
11 tion for the 5-fiscal-year period beginning
12 with fiscal year 2000, \$56,000,000.

13 (ii) BUDGET AUTHORITY.—Clause (i)
14 constitutes budget authority in advance of
15 appropriations Acts and represents the ob-
16 ligation of the Federal Government to pro-
17 vide for the payment of the amounts ap-
18 propriated under clause (i).

19 (B) LIMITATION ON PAYMENTS.—In no
20 case may—

21 (i) the aggregate amount of payments
22 made by the Secretary to States under this
23 section exceed \$56,000,000; or

1 (ii) payments be provided by the Sec-
2 retary for a fiscal year after fiscal year
3 2005.

4 (C) FUNDS ALLOCATED TO STATES.—The
5 Secretary shall allocate funds to States based
6 on their applications and the availability of
7 funds. Funds allocated to a State under a grant
8 made under this section for a fiscal year shall
9 remain available until expended.

10 (D) FUNDS NOT ALLOCATED TO STATES.—
11 Funds not allocated to States in the fiscal year
12 for which they are appropriated shall remain
13 available in succeeding fiscal years for alloca-
14 tion by the Secretary using the allocation for-
15 mula established under this section.

16 (E) PAYMENTS TO STATES.—The Sec-
17 retary shall pay to each State with a dem-
18 onstration project approved under this section,
19 from its allocation under subparagraph (C), an
20 amount for each quarter equal to the Federal
21 medical assistance percentage (as defined in
22 section 1905(b) of the Social Security Act (42
23 U.S.C. 1395d(b)) of expenditures in the quarter
24 for medical assistance provided to workers with
25 a potentially severe disability.

1 (d) RECOMMENDATION.—Not later than October 1,
2 2002, the Secretary shall submit a recommendation to the
3 Committee on Commerce of the House of Representatives
4 and the Committee on Finance of the Senate regarding
5 whether the demonstration project established under this
6 section should be continued after fiscal year 2003.

7 (e) STATE DEFINED.—In this section, the term
8 “State” has the meaning given such term for purposes of
9 title XIX of the Social Security Act (42 U.S.C. 1396 et
10 seq.).

11 **SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUS-**
12 **PEND MEDIGAP INSURANCE WHEN COVERED**
13 **UNDER A GROUP HEALTH PLAN.**

14 (a) IN GENERAL.—Section 1882(q) of the Social Se-
15 curity Act (42 U.S.C. 1395ss(q)) is amended—

16 (1) in paragraph (5)(C), by inserting “or para-
17 graph (6)” after “this paragraph”; and

18 (2) by adding at the end the following new
19 paragraph:

20 “(6) Each medicare supplemental policy shall
21 provide that benefits and premiums under the policy
22 shall be suspended at the request of the policyholder
23 if the policyholder is entitled to benefits under sec-
24 tion 226(b) and is covered under a group health
25 plan (as defined in section 1862(b)(1)(A)(v)). If

1 such suspension occurs and if the policyholder or
 2 certificate holder loses coverage under the group
 3 health plan, such policy shall be automatically re-
 4 instituted (effective as of the date of such loss of
 5 coverage) under terms described in subsection
 6 (n)(6)(A)(ii) as of the loss of such coverage if the
 7 policyholder provides notice of loss of such coverage
 8 within 90 days after the date of such loss.”.

9 (b) EFFECTIVE DATE.—The amendments made by
 10 subsection (a) apply with respect to requests made after
 11 the date of the enactment of this Act.

12 **TITLE III—DEMONSTRATION** 13 **PROJECTS AND STUDIES**

14 **SEC. 301. EXTENSION OF DISABILITY INSURANCE PRO-** 15 **GRAM DEMONSTRATION PROJECT AUTHOR-** 16 **ITY.**

17 (a) EXTENSION OF AUTHORITY.—Title II of the So-
 18 cial Security Act (42 U.S.C. 401 et seq.) is amended by
 19 adding at the end the following:

20 “DEMONSTRATION PROJECT AUTHORITY

21 “SEC. 234. (a) AUTHORITY.—

22 “(1) IN GENERAL.—The Commissioner of So-
 23 cial Security (in this section referred to as the ‘Com-
 24 missioner’) shall develop and carry out experiments
 25 and demonstration projects designed to determine
 26 the relative advantages and disadvantages of—

1 “(A) various alternative methods of treat-
2 ing the work activity of individuals entitled to
3 disability insurance benefits under section 223
4 or to monthly insurance benefits under section
5 202 based on such individual’s disability (as de-
6 fined in section 223(d)), including such meth-
7 ods as a reduction in benefits based on earn-
8 ings, designed to encourage the return to work
9 of such individuals;

10 “(B) altering other limitations and condi-
11 tions applicable to such individuals (including
12 lengthening the trial work period (as defined in
13 section 222(c)), altering the 24-month waiting
14 period for hospital insurance benefits under sec-
15 tion 226, altering the manner in which the pro-
16 gram under this title is administered, earlier re-
17 ferral of such individuals for rehabilitation, and
18 greater use of employers and others to develop,
19 perform, and otherwise stimulate new forms of
20 rehabilitation); and

21 “(C) implementing sliding scale benefit off-
22 sets using variations in—

23 “(i) the amount of the offset as a pro-
24 portion of earned income;

1 “(ii) the duration of the offset period;

2 and

3 “(iii) the method of determining the

4 amount of income earned by such individ-

5 uals,

6 to the end that savings will acerue to the Trust

7 Funds, or to otherwise promote the objectives or fa-

8 cilitate the administration of this title.

9 “(2) AUTHORITY FOR EXPANSION OF SCOPE.—

10 The Commissioner may expand the scope of any

11 such experiment or demonstration project to include

12 any group of applicants for benefits under the pro-

13 gram established under this title with impairments

14 that reasonably may be presumed to be disabling for

15 purposes of such demonstration project, and may

16 limit any such demonstration project to any such

17 group of applicants, subject to the terms of such

18 demonstration project which shall define the extent

19 of any such presumption.

20 “(b) REQUIREMENTS.—The experiments and dem-

21 onstration projects developed under subsection (a) shall be

22 of sufficient scope and shall be carried out on a wide

23 enough scale to permit a thorough evaluation of the alter-

24 native methods under consideration while giving assurance

25 that the results derived from the experiments and projects

1 will obtain generally in the operation of the disability in-
2 surance program under this title without committing such
3 program to the adoption of any particular system either
4 locally or nationally.

5 “(c) AUTHORITY TO WAIVE COMPLIANCE WITH
6 BENEFITS REQUIREMENTS.—In the case of any experi-
7 ment or demonstration project conducted under subsection
8 (a), the Commissioner may waive compliance with the ben-
9 efit requirements of this title and the requirements of sec-
10 tion 1148 as they relate to the program established under
11 this title, and the Secretary may (upon the request of the
12 Commissioner) waive compliance with the benefits require-
13 ments of title XVIII, insofar as is necessary for a thorough
14 evaluation of the alternative methods under consideration.
15 No such experiment or project shall be actually placed in
16 operation unless at least 90 days prior thereto a written
17 report, prepared for purposes of notification and informa-
18 tion only and containing a full and complete description
19 thereof, has been transmitted by the Commissioner to the
20 Committee on Ways and Means of the House of Rep-
21 resentatives and to the Committee on Finance of the Sen-
22 ate. Periodic reports on the progress of such experiments
23 and demonstration projects shall be submitted by the
24 Commissioner to such committees. When appropriate,
25 such reports shall include detailed recommendations for

1 changes in administration or law, or both, to carry out
2 the objectives stated in subsection (a).

3 “(d) REPORTS.—

4 “(1) INTERIM REPORTS.—On or before June 9
5 of each year, the Commissioner shall submit to the
6 Committee on Ways and Means of the House of
7 Representatives and to the Committee on Finance of
8 the Senate an annual interim report on the progress
9 of the experiments and demonstration projects car-
10 ried out under this subsection together with any re-
11 lated data and materials that the Commissioner may
12 consider appropriate.

13 “(2) TERMINATION AND FINAL REPORT.—The
14 authority under the preceding provisions of this sec-
15 tion (including any waiver granted pursuant to sub-
16 section (c)) shall terminate 5 years after the date of
17 the enactment of this Act. Not later than 90 days
18 after the termination of any experiment or dem-
19 onstration project carried out under this section, the
20 Commissioner shall submit to the Committee on
21 Ways and Means of the House of Representatives
22 and to the Committee on Finance of the Senate a
23 final report with respect to that experiment or dem-
24 onstration project.”

1 (b) CONFORMING AMENDMENTS; TRANSFER OF
2 PRIOR AUTHORITY.—

3 (1) CONFORMING AMENDMENTS.—

4 (A) REPEAL OF PRIOR AUTHORITY.—Para-
5 graphs (1) through (4) of subsection (a) and
6 subsection (c) of section 505 of the Social Secu-
7 rity Disability Amendments of 1980 (42 U.S.C.
8 1310 note) are repealed.

9 (B) CONFORMING AMENDMENT REGARD-
10 ING FUNDING.—Section 201(k) of the Social
11 Security Act (42 U.S.C. 401(k)) is amended by
12 striking “section 505(a) of the Social Security
13 Disability Amendments of 1980” and inserting
14 “section 234”.

15 (2) TRANSFER OF PRIOR AUTHORITY.—With
16 respect to any experiment or demonstration project
17 being conducted under section 505(a) of the Social
18 Security Disability Amendments of 1980 (42 U.S.C.
19 1310 note) as of the date of the enactment of this
20 Act, the authority to conduct such experiment or
21 demonstration project (including the terms and con-
22 ditions applicable to the experiment or demonstra-
23 tion project) shall be treated as if that authority
24 (and such terms and conditions) had been estab-

1 lished under section 234 of the Social Security Act,
2 as added by subsection (a).

3 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
4 **DUCTIONS IN DISABILITY INSURANCE BENE-**
5 **FITS BASED ON EARNINGS.**

6 (a) **AUTHORITY.**—The Commissioner of Social Secu-
7 rity shall conduct demonstration projects for the purpose
8 of evaluating, through the collection of data, a program
9 for title II disability beneficiaries (as defined in section
10 1148(k)(3) of the Social Security Act) under which bene-
11 fits payable under section 223 of such Act, or under sec-
12 tion 202 of such Act based on the beneficiary's disability,
13 are reduced by \$1 for each \$2 of the beneficiary's earnings
14 that is above a level to be determined by the Commis-
15 sioner. Such projects shall be conducted at a number of
16 localities which the Commissioner shall determine is suffi-
17 cient to adequately evaluate the appropriateness of na-
18 tional implementation of such a program. Such projects
19 shall identify reductions in Federal expenditures that may
20 result from the permanent implementation of such a pro-
21 gram.

22 (b) **SCOPE AND SCALE AND MATTERS TO BE DETER-**
23 **MINED.**—

24 (1) **IN GENERAL.**—The demonstration projects
25 developed under subsection (a) shall be of sufficient

1 duration, shall be of sufficient scope, and shall be
2 carried out on a wide enough scale to permit a thor-
3 ough evaluation of the project to determine—

4 (A) the effects, if any, of induced entry
5 into the project and reduced exit from the
6 project;

7 (B) the extent, if any, to which the project
8 being tested is affected by whether it is in oper-
9 ation in a locality within an area under the ad-
10 ministration of the Ticket to Work and Self-
11 Sufficiency Program established under section
12 1148 of the Social Security Act; and

13 (C) the savings that accrue to the Federal
14 Old-Age and Survivors Insurance Trust Fund,
15 the Federal Disability Insurance Trust Fund,
16 and other Federal programs under the project
17 being tested.

18 The Commissioner shall take into account advice
19 provided by the Ticket to Work and Work Incentives
20 Advisory Panel pursuant to section 101(f)(2)(B)(ii)
21 of this Act.

22 (2) ADDITIONAL MATTERS.—The Commissioner
23 shall also determine with respect to each project—

24 (A) the annual cost (including net cost) of
25 the project and the annual cost (including net

1 cost) that would have been incurred in the ab-
2 sence of the project;

3 (B) the determinants of return to work, in-
4 cluding the characteristics of the beneficiaries
5 who participate in the project; and

6 (C) the employment outcomes, including
7 wages, occupations, benefits, and hours worked,
8 of beneficiaries who return to work as a result
9 of participation in the project.

10 The Commissioner may include within the matters
11 evaluated under the project the merits of trial work
12 periods and periods of extended eligibility.

13 (c) WAIVERS.—The Commissioner may waive compli-
14 ance with the benefit provisions of title II of the Social
15 Security Act, and the Secretary of Health and Human
16 Services may waive compliance with the benefit require-
17 ments of title XVIII of such Act, insofar as is necessary
18 for a thorough evaluation of the alternative methods under
19 consideration. No such project shall be actually placed in
20 operation unless at least 90 days prior thereto a written
21 report, prepared for purposes of notification and informa-
22 tion only and containing a full and complete description
23 thereof, has been transmitted by the Commissioner to the
24 Committee on Ways and Means of the House of Rep-
25 resentatives and to the Committee on Finance of the Sen-

1 ate. Periodic reports on the progress of such projects shall
2 be submitted by the Commissioner to such committees.
3 When appropriate, such reports shall include detailed rec-
4 ommendations for changes in administration or law, or
5 both, to carry out the objectives stated in subsection (a).

6 (d) INTERIM REPORTS.—Not later than 2 years after
7 the date of the enactment of this Act, and annually there-
8 after, the Commissioner of Social Security shall submit
9 to Congress an interim report on the progress of the dem-
10 onstration projects carried out under this subsection to-
11 gether with any related data and materials that the Com-
12 missioner of Social Security may consider appropriate.

13 (e) FINAL REPORT.—The Commissioner of Social Se-
14 curity shall submit to Congress a final report with respect
15 to all demonstration projects carried out under this section
16 not later than 1 year after their completion.

17 (f) EXPENDITURES.—Expenditures made for dem-
18 onstration projects under this section shall be made from
19 the Federal Disability Insurance Trust Fund and the Fed-
20 eral Old-Age and Survivors Insurance Trust Fund, as de-
21 termined appropriate by the Commissioner of Social Secu-
22 rity, and from the Federal Hospital Insurance Trust Fund
23 and the Federal Supplementary Medical Insurance Trust
24 Fund, as determined appropriate by the Secretary of

1 Health and Human Services, to the extent provided in ad-
2 vance in appropriation Acts.

3 **SEC. 303. STUDIES AND REPORTS.**

4 (a) STUDY BY GENERAL ACCOUNTING OFFICE OF
5 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
6 TIVES.—

7 (1) STUDY.—As soon as practicable after the
8 date of the enactment of this Act, the Comptroller
9 General of the United States shall undertake a study
10 to assess existing tax credits and other disability-re-
11 lated employment incentives under the Americans
12 with Disabilities Act of 1990 and other Federal
13 laws. In such study, the Comptroller General shall
14 specifically address the extent to which such credits
15 and other incentives would encourage employers to
16 hire and retain individuals with disabilities.

17 (2) REPORT.—Not later than 3 years after the
18 date of the enactment of this Act, the Comptroller
19 General shall transmit to the Committee on Ways
20 and Means of the House of Representatives and the
21 Committee on Finance of the Senate a written re-
22 port presenting the results of the Comptroller Gen-
23 eral's study conducted pursuant to this subsection,
24 together with such recommendations for legislative

1 or administrative changes as the Comptroller Gen-
2 eral determines are appropriate.

3 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
4 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
5 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
6 ING CONCURRENT ENTITLEMENT.—

7 (1) STUDY.—As soon as practicable after the
8 date of the enactment of this Act, the Comptroller
9 General of the United States shall undertake a study
10 to evaluate the coordination under current law of the
11 disability insurance program under title II of the So-
12 cial Security Act and the supplemental security in-
13 come program under title XVI of such Act, as such
14 programs relate to individuals entering or leaving
15 concurrent entitlement under such programs. In
16 such study, the Comptroller General shall specifically
17 address the effectiveness of work incentives under
18 such programs with respect to such individuals and
19 the effectiveness of coverage of such individuals
20 under titles XVIII and XIX of such Act.

21 (2) REPORT.—Not later than 3 years after the
22 date of the enactment of this Act, the Comptroller
23 General shall transmit to the Committee on Ways
24 and Means of the House of Representatives and the
25 Committee on Finance of the Senate a written re-

1 port presenting the results of the Comptroller Gen-
2 eral's study conducted pursuant to this subsection,
3 together with such recommendations for legislative
4 or administrative changes as the Comptroller Gen-
5 eral determines are appropriate.

6 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
7 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
8 LIMIT ON RETURN TO WORK.—

9 (1) STUDY.—As soon as practicable after the
10 date of the enactment of this Act, the Comptroller
11 General of the United States shall undertake a study
12 of the substantial gainful activity level applicable as
13 of that date to recipients of benefits under section
14 223 of the Social Security Act (42 U.S.C. 423) and
15 under section 202 of such Act (42 U.S.C. 402) on
16 the basis of a recipient having a disability, and the
17 effect of such level as a disincentive for those recipi-
18 ents to return to work. In the study, the Comptroller
19 General also shall address the merits of increasing
20 the substantial gainful activity level applicable to
21 such recipients of benefits and the rationale for not
22 yearly indexing that level to inflation.

23 (2) REPORT.—Not later than 2 years after the
24 date of the enactment of this Act, the Comptroller
25 General shall transmit to the Committee on Ways

1 and Means of the House of Representatives and the
2 Committee on Finance of the Senate a written re-
3 port presenting the results of the Comptroller Gen-
4 eral's study conducted pursuant to this subsection,
5 together with such recommendations for legislative
6 or administrative changes as the Comptroller Gen-
7 eral determines are appropriate.

8 (d) REPORT ON DISREGARDS UNDER THE DI AND
9 SSI PROGRAMS.—Not later than 90 days after the date
10 of the enactment of this Act, the Commissioner of Social
11 Security shall submit to the Committee on Ways and
12 Means of the House of Representatives and the Committee
13 on Finance of the Senate a report that—

14 (1) identifies all income, assets, and resource
15 disregards (imposed under statutory or regulatory
16 authority) that are applicable to individuals receiving
17 benefits under title II or XVI of the Social Security
18 Act (42 U.S.C. 401 et seq., 1381 et seq.);

19 (2) with respect to each such disregard—

20 (A) specifies the most recent statutory or
21 regulatory modification of the disregard; and

22 (B) recommends whether further statutory
23 or regulatory modification of the disregard
24 would be appropriate; and

1 (3) with respect to the disregard described in
2 section 1612(b)(7) of such Act (42 U.S.C.
3 1382a(b)(7)) (relating to grants, scholarships, or fel-
4 lowships received for use in paying the cost of tui-
5 tion and fees at any educational (including technical
6 or vocational education) institution)—

7 (A) identifies the number of individuals re-
8 ceiving benefits under title XVI of such Act (42
9 U.S.C. 1381 et seq.) who have attained age 22
10 and have not had any portion of any grant,
11 scholarship, or fellowship received for use in
12 paying the cost of tuition and fees at any edu-
13 cational (including technical or vocational edu-
14 cation) institution excluded from their income
15 in accordance with that section;

16 (B) recommends whether the age at which
17 such grants, scholarships, or fellowships are ex-
18 cluded from income for purposes of determining
19 eligibility under title XVI of such Act should be
20 increased to age 25; and

21 (C) recommends whether such disregard
22 should be expanded to include any such grant,
23 scholarship, or fellowship received for use in
24 paying the cost of room and board at any such
25 institution.

1 (e) STUDY BY THE GENERAL ACCOUNTING OFFICE
2 OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY IN-
3 SURANCE PROGRAM DEMONSTRATION AUTHORITY.—

4 (1) STUDY.—As soon as practicable after the
5 date of the enactment of this Act, the Comptroller
6 General of the United States shall undertake a study
7 to assess the results of the Social Security Adminis-
8 tration's efforts to conduct disability demonstrations
9 authorized under prior law as well as under section
10 301 of this Act.

11 (2) REPORT.—Not later than 5 years after the
12 date of the enactment of this Act, the Comptroller
13 General shall transmit to the Committee on Ways
14 and Means of the House of Representatives and the
15 Committee on Finance of the Senate a written re-
16 port presenting the results of the Comptroller Gen-
17 eral's study conducted pursuant to this section, to-
18 gether with a recommendation as to whether the
19 demonstration authority authorized under section
20 301 of this Act should be made permanent.

1 **TITLE IV—MISCELLANEOUS AND**
2 **TECHNICAL AMENDMENTS**

3 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
4 **ADDICTS AND ALCOHOLICS.**

5 (a) CLARIFICATION RELATING TO THE EFFECTIVE
6 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
7 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
8 tion 105(a)(5) of the Contract with America Advancement
9 Act of 1996 (42 U.S.C. 405 note) is amended—

10 (1) in subparagraph (A), by striking “by the
11 Commissioner of Social Security” and “by the Com-
12 missioner”; and

13 (2) by adding at the end the following:

14 “(D) For purposes of this paragraph, an
15 individual’s claim, with respect to benefits
16 under title II based on disability, which has
17 been denied in whole before the date of the en-
18 actment of this Act, may not be considered to
19 be finally adjudicated before such date if, on or
20 after such date—

21 “(i) there is pending a request for ei-
22 ther administrative or judicial review with
23 respect to such claim; or

24 “(ii) there is pending, with respect to
25 such claim, a readjudication by the Com-

1 missioner of Social Security pursuant to
2 relief in a class action or implementation
3 by the Commissioner of a court remand
4 order.

5 “(E) Notwithstanding the provisions of
6 this paragraph, with respect to any individual
7 for whom the Commissioner of Social Security
8 does not perform the entitlement redetermina-
9 tion before the date prescribed in subparagraph
10 (C), the Commissioner shall perform such enti-
11 tlement redetermination in lieu of a continuing
12 disability review whenever the Commissioner de-
13 termines that the individual’s entitlement is
14 subject to redetermination based on the pre-
15 ceding provisions of this paragraph, and the
16 provisions of section 223(f) shall not apply to
17 such redetermination.”.

18 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
19 SIONS CONCERNING REPRESENTATIVE PAYEES AND
20 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
21 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
22 Section 105(a)(5)(B) of the Contract with America Ad-
23 vancement Act of 1996 (42 U.S.C. 405 note) is amended
24 to read as follows:

1 “(B) The amendments made by para-
2 graphs (2) and (3) shall take effect on July 1,
3 1996, with respect to any individual—

4 “(i) whose claim for benefits is finally
5 adjudicated on or after the date of the en-
6 actment of this Act; or

7 “(ii) whose entitlement to benefits is
8 based upon an entitlement redetermination
9 made pursuant to subparagraph (C).”.

10 (c) EFFECTIVE DATES.—The amendments made by
11 this section shall take effect as if included in the enact-
12 ment of section 105 of the Contract with America Ad-
13 vancement Act of 1996 (Public Law 104–121; 110 Stat.
14 852 et seq.).

15 **SEC. 402. TREATMENT OF PRISONERS.**

16 (a) IMPLEMENTATION OF PROHIBITION AGAINST
17 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

18 (1) IN GENERAL.—Section 202(x)(3) of the So-
19 cial Security Act (42 U.S.C. 402(x)(3)) is
20 amended—

21 (A) by inserting “(A)” after “(3)”; and

22 (B) by adding at the end the following:

23 “(B)(i) The Commissioner shall enter into an agree-
24 ment under this subparagraph with any interested State
25 or local institution comprising a jail, prison, penal institu-

1 tion, or correctional facility, or comprising any other insti-
2 tution a purpose of which is to confine individuals as de-
3 scribed in paragraph (1)(A)(ii). Under such agreement—

4 “(I) the institution shall provide to the Com-
5 missioner, on a monthly basis and in a manner spec-
6 ified by the Commissioner, the names, Social Secu-
7 rity account numbers, dates of birth, confinement
8 commencement dates, and, to the extent available to
9 the institution, such other identifying information
10 concerning the individuals confined in the institution
11 as the Commissioner may require for the purpose of
12 carrying out paragraph (1) and other provisions of
13 this title; and

14 “(II) the Commissioner shall pay to the institu-
15 tion, with respect to information described in sub-
16 clause (I) concerning each individual who is confined
17 therein as described in paragraph (1)(A), who re-
18 ceives a benefit under this title for the month pre-
19 ceeding the first month of such confinement, and
20 whose benefit under this title is determined by the
21 Commissioner to be not payable by reason of con-
22 finement based on the information provided by the
23 institution, \$400 (subject to reduction under clause
24 (ii)) if the institution furnishes the information to
25 the Commissioner within 30 days after the date such

1 individual's confinement in such institution begins,
2 or \$200 (subject to reduction under clause (ii)) if
3 the institution furnishes the information after 30
4 days after such date but within 90 days after such
5 date.

6 “(ii) The dollar amounts specified in clause (i)(II)
7 shall be reduced by 50 percent if the Commissioner is also
8 required to make a payment to the institution with respect
9 to the same individual under an agreement entered into
10 under section 1611(e)(1)(I).

11 “(iii) There are authorized to be transferred from the
12 Federal Old-Age and Survivors Insurance Trust Fund and
13 the Federal Disability Insurance Trust Fund, as appro-
14 priate, such sums as may be necessary to enable the Com-
15 missioner to make payments to institutions required by
16 clause (i)(II).

17 “(iv) The Commissioner shall maintain, and shall
18 provide on a reimbursable basis, information obtained pur-
19 suant to agreements entered into under this paragraph to
20 any agency administering a Federal or federally-assisted
21 cash, food, or medical assistance program for eligibility
22 and other administrative purposes under such program.”.

23 (2) CONFORMING AMENDMENTS TO THE PRI-
24 VACY ACT.—Section 552a(a)(8)(B) of title 5, United
25 States Code, is amended—

1 (A) in clause (vi), by striking “or” at the
2 end;

3 (B) in clause (vii), by adding “or” at the
4 end; and

5 (C) by adding at the end the following:

6 “(viii) matches performed pursuant to
7 section 202(x)(3) or 1611(e)(1) of the So-
8 cial Security Act (42 U.S.C. 402(x)(3),
9 1382(e)(1));”.

10 (3) CONFORMING AMENDMENTS TO TITLE
11 XVI.—

12 (A) Section 1611(e)(1)(I)(i)(I) of the So-
13 cial Security Act (42 U.S.C. 1382(e)(1)(I)(i)(I))
14 is amended by striking “; and” and inserting
15 “and the other provisions of this title; and”.

16 (B) Section 1611(e)(1)(I)(ii)(II) of such
17 Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amend-
18 ed by striking “is authorized to provide, on a
19 reimbursable basis,” and inserting “shall main-
20 tain, and shall provide on a reimbursable
21 basis,”.

22 (4) EFFECTIVE DATE.—The amendments made
23 by this subsection shall apply to individuals whose
24 period of confinement in an institution commences

1 on or after the first day of the fourth month begin-
2 ning after the month in which this Act is enacted.

3 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
4 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
5 PRISONMENT FOR MORE THAN 1 YEAR.—

6 (1) IN GENERAL.—Section 202(x)(1)(A) of the
7 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
8 amended—

9 (A) in the matter preceding clause (i), by
10 striking “during which” and inserting “ending
11 with or during or beginning with or during a
12 period of more than 30 days throughout all of
13 which”;

14 (B) in clause (i), by striking “an offense
15 punishable by imprisonment for more than 1
16 year (regardless of the actual sentence im-
17 posed)” and inserting “a criminal offense”; and

18 (C) in clause (ii)(I), by striking “an of-
19 fense punishable by imprisonment for more
20 than 1 year” and inserting “a criminal of-
21 fense”.

22 (2) EFFECTIVE DATE.—The amendments made
23 by this subsection shall apply to individuals whose
24 period of confinement in an institution commences

1 on or after the first day of the fourth month begin-
2 ning after the month in which this Act is enacted.

3 (c) CONFORMING TITLE XVI AMENDMENTS.—

4 (1) 50 PERCENT REDUCTION IN TITLE XVI PAY-
5 MENT IN CASE INVOLVING COMPARABLE TITLE II
6 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
7 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

8 (A) in clause (i)(II), by inserting “(subject
9 to reduction under clause (ii))” after “\$400”
10 and after “\$200”;

11 (B) by redesignating clauses (ii) and (iii)
12 as clauses (iii) and (iv) respectively; and

13 (C) by inserting after clause (i) the fol-
14 lowing:

15 “(ii) The dollar amounts specified in clause (i)(II)
16 shall be reduced by 50 percent if the Commissioner is also
17 required to make a payment to the institution with respect
18 to the same individual under an agreement entered into
19 under section 202(x)(3)(B).”.

20 (2) EXPANSION OF CATEGORIES OF INSTITU-
21 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
22 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
23 such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in
24 the matter preceding subclause (I) by striking “in-
25 stitution” and all that follows through “section

1 202(x)(1)(A),” and inserting “institution comprising
2 a jail, prison, penal institution, or correctional facil-
3 ity, or with any other interested State or local insti-
4 tution a purpose of which is to confine individuals
5 as described in section 202(x)(1)(A)(ii),”.

6 (3) ELIMINATION OF OVERLY BROAD EXEMP-
7 TION.—Section 1611(e)(1)(I)(iii) of such Act (as re-
8 designated by paragraph (1)(B)) is amended
9 further—

10 (A) by striking “(I) The provisions” and
11 all that follows through “(II)”; and

12 (B) by striking “eligibility purposes” and
13 inserting “eligibility and other administrative
14 purposes under such program”.

15 (4) EFFECTIVE DATE.—The amendments made
16 by this subsection shall take effect as if included in
17 the enactment of section 203(a) of the Personal Re-
18 sponsibility and Work Opportunity Reconciliation
19 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
20 The reference to section 202(x)(1)(A)(ii) in section
21 1611(e)(1)(I)(i) of the Social Security Act as
22 amended by paragraph (2) shall be deemed a ref-
23 erence to such section 202(x)(1)(A)(ii) of such Act
24 as amended by subsection (b)(1)(C).

1 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
2 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
3 TIONS UPON COMPLETION OF PRISON TERM.—

4 (1) IN GENERAL.—Section 202(x)(1)(A) of the
5 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
6 amended—

7 (A) in clause (i), by striking “or” at the
8 end;

9 (B) in clause (ii)(IV), by striking the pe-
10 riod and inserting “, or”; and

11 (C) by adding at the end the following new
12 clause:

13 “(iii) immediately upon completion of confine-
14 ment as described in clause (i) pursuant to convic-
15 tion of a criminal offense an element of which is sex-
16 ual activity, is confined by court order in an institu-
17 tion at public expense pursuant to a finding that the
18 individual is a sexually dangerous person or a sexual
19 predator or a similar finding.”.

20 (2) CONFORMING AMENDMENT.—Section
21 202(x)(1)(B)(ii) of such Act (42 U.S.C.
22 402(x)(1)(B)(ii)) is amended by striking “clause
23 (ii)” and inserting “clauses (ii) and (iii)”.

24 (3) EFFECTIVE DATE.—The amendments made
25 by this subsection shall apply with respect to bene-

1 fits for months ending after the date of the enact-
2 ment of this Act.

3 **SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
4 **EXEMPTION FROM SOCIAL SECURITY COV-**
5 **ERAGE.**

6 (a) IN GENERAL.—Notwithstanding section
7 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
8 emption which has been received under section 1402(e)(1)
9 of such Code by a duly ordained, commissioned, or li-
10 censed minister of a church, a member of a religious order,
11 or a Christian Science practitioner, and which is effective
12 for the taxable year in which this Act is enacted, may be
13 revoked by filing an application therefor (in such form and
14 manner, and with such official, as may be prescribed by
15 the Commissioner of Internal Revenue), if such applica-
16 tion is filed no later than the due date of the Federal in-
17 come tax return (including any extension thereof) for the
18 applicant's second taxable year beginning after December
19 31, 1999. Any such revocation shall be effective (for pur-
20 poses of chapter 2 of the Internal Revenue Code of 1986
21 and title II of the Social Security Act), as specified in the
22 application, either with respect to the applicant's first tax-
23 able year beginning after December 31, 1999, or with re-
24 spect to the applicant's second taxable year beginning
25 after such date, and for all succeeding taxable years; and

1 the applicant for any such revocation may not thereafter
2 again file application for an exemption under such section
3 1402(e)(1). If the application is filed after the due date
4 of the applicant's Federal income tax return for a taxable
5 year and is effective with respect to that taxable year, it
6 shall include or be accompanied by payment in full of an
7 amount equal to the total of the taxes that would have
8 been imposed by section 1401 of the Internal Revenue
9 Code of 1986 with respect to all of the applicant's income
10 derived in that taxable year which would have constituted
11 net earnings from self-employment for purposes of chapter
12 2 of such Code (notwithstanding paragraphs (4) and (5)
13 of section 1402(c)) except for the exemption under section
14 1402(e)(1) of such Code.

15 (b) EFFECTIVE DATE.—Subsection (a) shall apply
16 with respect to service performed (to the extent specified
17 in such subsection) in taxable years beginning after De-
18 cember 31, 1999, and with respect to monthly insurance
19 benefits payable under title II on the basis of the wages
20 and self-employment income of any individual for months
21 in or after the calendar year in which such individual's
22 application for revocation (as described in such sub-
23 section) is effective (and lump-sum death payments pay-
24 able under such title on the basis of such wages and self-

1 employment income in the case of deaths occurring in or
2 after such calendar year).

3 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
4 **TO COOPERATIVE RESEARCH OR DEM-**
5 **ONSTRATION PROJECTS UNDER TITLES II**
6 **AND XVI.**

7 (a) IN GENERAL.—Section 1110(a)(3) of the Social
8 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
9 ing “title XVI” and inserting “title II or XVI”.

10 (b) EFFECTIVE DATE.—The amendment made by
11 subsection (a) shall take effect as if included in the enact-
12 ment of the Social Security Independence and Program
13 Improvements Act of 1994 (Public Law 103–296; 108
14 Stat. 1464).

15 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
16 **WAGE REPORTS.**

17 (a) IN GENERAL.—Section 1137(a)(3) of the Social
18 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
19 inserting before the semicolon the following: “, and except
20 that in the case of wage reports with respect to domestic
21 service employment, a State may permit employers (as so
22 defined) that make returns with respect to such employ-
23 ment on a calendar year basis pursuant to section 3510
24 of the Internal Revenue Code of 1986 to make such re-
25 ports on an annual basis”.

1 (b) TECHNICAL AMENDMENTS.—Section 1137(a)(3)
2 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
3 amended—

4 (1) by striking “(as defined in section
5 453A(a)(2)(B)(iii))”; and

6 (2) by inserting “(as defined in section
7 453A(a)(2)(B))” after “employers” .

8 (c) EFFECTIVE DATE.—The amendments made by
9 this section shall apply to wage reports required to be sub-
10 mitted on and after the date of the enactment of this Act.

11 **SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE**
12 **THEIR FEES VIA THE SOCIAL SECURITY AD-**
13 **MINISTRATION.**

14 (a) IN GENERAL.—Section 206 of the Social Security
15 Act (42 U.S.C. 606) is amended by adding at the end the
16 following:

17 “(d) ASSESSMENT ON ATTORNEYS.—

18 “(1) IN GENERAL.—Whenever a fee for services
19 is required to be certified for payment to an attorney
20 from a claimant’s past-due benefits pursuant to sub-
21 section (a)(4)(A) or (b)(1)(A), the Commissioner
22 shall impose on the attorney an assessment cal-
23 culated in accordance with paragraph (2).

24 “(2) AMOUNT.—

1 “(A) The amount of an assessment under
2 paragraph (1) shall be equal to the product ob-
3 tained by multiplying the amount of the rep-
4 resentative’s fee that would be required to be so
5 certified by subsection (a)(4)(A) or (b)(1)(A)
6 before the application of this subsection, by the
7 percentage specified in subparagraph (B).

8 “(B) The percentage specified in this sub-
9 paragraph is—

10 “(i) for calendar years before 2001,
11 6.3 percent, and

12 “(ii) for calendar years after 2000,
13 6.3 percent or such different percentage
14 rate as the Commissioner determines is
15 necessary in order to achieve full recovery
16 of the costs of certifying fees to attorneys
17 from the past-due benefits of claimants.

18 “(3) COLLECTION.—The Commissioner may
19 collect the assessment imposed on an attorney under
20 paragraph (1) by offset from the amount of the fee
21 otherwise required by subsection (a)(4)(A) or
22 (b)(1)(A) to be certified for payment to the attorney
23 from a claimant’s past-due benefits.

24 “(4) PROHIBITION ON CLAIMANT REIMBURSE-
25 MENT.—An attorney subject to an assessment under

1 paragraph (1) may not, directly or indirectly, re-
2 quest or otherwise obtain reimbursement for such
3 assessment from the claimant whose claim gave rise
4 to the assessment.

5 “(5) DISPOSITION OF ASSESSMENTS.—Assess-
6 ments on attorneys collected under this subsection
7 shall be credited to the Federal Old-Age and Sur-
8 vivors Insurance Trust Fund and the Federal Dis-
9 ability Insurance Trust Fund, as appropriate.

10 “(6) AUTHORIZATION OF APPROPRIATIONS.—
11 The assessments authorized under this section shall
12 be collected and available for obligation only to the
13 extent and in the amount provided in advance in ap-
14 propriations Acts. Amounts so appropriated are au-
15 thorized to remain available until expended, for ad-
16 ministrative expenses in carrying out title II of the
17 Social Security Act and related laws.

18 (b) CONFORMING AMENDMENTS.—

19 (1) Section 206(a)(4)(A) of such Act (42
20 U.S.C. 606(a)(4)(A)) is amended by inserting “and
21 subsection (d)” after “subparagraph (B)”.

22 (2) Section 206(b)(1)(A) of such Act (42
23 U.S.C. 606(b)(1)(A)) is amended by inserting “, but
24 subject to subsection (d) of this section” after “sec-
25 tion 205(i)”.

1 (c) EFFECTIVE DATE.—The amendments made by
2 this section shall apply in the case of any attorney with
3 respect to whom a fee for services is required to be cer-
4 tified for payment from a claimant’s past-due benefits
5 pursuant to subsection (a)(4)(A) or (b)(4)(A) of section
6 206 of the Social Security Act after—

7 (1) December 31, 1999, or

8 (2) the last day of the first month beginning
9 after the month in which this Act is enacted.

10 **SEC. 407. PREVENTION OF FRAUD AND ABUSE ASSOCIATED**
11 **WITH CERTAIN PAYMENTS UNDER THE MED-**
12 **ICAID PROGRAM.**

13 (a) REQUIREMENTS FOR PAYMENTS.—Section
14 1903(i) of the Social Security Act (42 U.S.C. 1396b(i))
15 (as amended by section 201(a)(3)(B)) is amended
16 further—

17 (1) in paragraph (20), by striking the period at
18 the end and inserting “; or”; and

19 (2) by inserting immediately after paragraph
20 (20) the following:

21 “(21) with respect to any amount expended for
22 an item or service provided under the plan, or for
23 any administrative expense incurred to carry out the
24 plan, which is provided or incurred by, or on behalf
25 of, a State or local educational agency or school dis-

1 trict, unless payment for the item, service, or admin-
2 istrative expense is made in accordance with a meth-
3 odology approved in advance by the Secretary under
4 which—

5 “(A) in the case of payment for—

6 “(i) a group of individual items, serv-
7 ices, and administrative expenses, the
8 methodology—

9 “(I) provides for an itemization
10 to the Secretary that assures account-
11 ability of the cost of the grouped
12 items, services, and administrative ex-
13 penses and includes payment rates
14 and the methodologies underlying the
15 establishment of such rates;

16 “(II) has an actuarially sound
17 basis for determining the payment
18 rates and the methodologies; and

19 “(III) reconciles payments for
20 the grouped items, services, and ad-
21 ministrative expenses with items and
22 services provided and administrative
23 expenses incurred under this title; or

24 “(ii) an individual item, service, or ad-
25 ministrative expense, the amount of pay-

1 ment for the item, service, or administra-
2 tive expense does not exceed the amount
3 that would be paid for the item, service, or
4 administrative expense if the item, service,
5 or administrative expense were incurred by
6 an entity other than a State or local edu-
7 cational agency or school district, unless
8 the State can demonstrate to the satisfac-
9 tion of the Secretary a higher amount for
10 such item, service, or administrative ex-
11 pense; and

12 “(B) in the case of a transportation service
13 for an individual under age 21 who is eligible
14 for medical assistance under this title (whether
15 or not the child has an individualized education
16 program established pursuant to part B of the
17 Individuals with Disabilities Education Act)—

18 “(i) a medical need for transportation
19 is noted in such an individualized edu-
20 cation program (if any) for the individual,
21 including such an individual residing in a
22 geographic area within which school bus
23 transportation is otherwise not provided;

24 “(ii) in the case of a child with special
25 medical needs, the vehicle used to furnish

1 such transportation service is specially
2 equipped or staffed to accommodate indi-
3 viduals with special medical needs; and

4 “(iii) payment for such service only—

5 “(I) is made with respect to costs
6 directly attributable to the costs asso-
7 ciated with transporting such individ-
8 uals whose medical needs require
9 transport in such a vehicle; and

10 “(II) reflects the proportion of
11 transportation costs equal to the pro-
12 portion of the school day spent by
13 such individuals in activities relating
14 to the receipt of covered services
15 under this title or such other propor-
16 tion based on an allocation method
17 that the Secretary finds reasonable in
18 light of the benefit to the program
19 under this title and consistent with
20 the cost principles contained in OMB
21 Circular A-87; or

22 “(22) with respect to any amount expended for
23 an item or service under the plan or for any admin-
24 istrative expense to carry out the plan provided by
25 or on behalf of a State or local agency (including a

1 State or local educational agency or school district)
2 that enters into a contract or other arrangement
3 with a person or entity for, or in connection with,
4 the collection or submission of claims for such ex-
5 penditures, unless, notwithstanding section
6 1902(a)(32), the agency—

7 “(A) uses a competitive bidding process or
8 otherwise to contract with such person or entity
9 at a reasonable rate commensurate with the
10 services performed by the person or entity; and

11 “(B) requires that any fees (including any
12 administrative fees) to be paid to the person or
13 entity for the collection or submission of such
14 claims are identified as a non-contingent, speci-
15 fied dollar amount in the contract.”; and

16 (3) in the third sentence, by striking “(17), and
17 (18)” and inserting “(17), (18), (19), and (21)”.

18 (b) PROVISION OF ITEMS AND SERVICES THROUGH
19 MEDICAID MANAGED CARE ORGANIZATIONS.—

20 (1) CONTRACTUAL REQUIREMENT.—Section
21 1903(m)(2)(A) of the Social Security Act (42 U.S.C.
22 1396b(m)(2)(A)) is amended by redesignating clause
23 (xi) (as added by section 4701(c)(3) of the Balanced
24 Budget Act of 1997) as clause (xiii), by striking

1 “and” at the end of clause (xi), and by inserting
2 after clause (xi) the following:

3 “(xii) such contract provides that with respect
4 to payment for, and coverage of, such services, the
5 contract requires coordination between the State or
6 local educational agency or school district and the
7 medicaid managed care organization to prevent du-
8 plication of services and duplication of payments
9 under this title for such services.”

10 (2) PROHIBITION ON DUPLICATIVE PAY-
11 MENTS.—

12 (A) IN GENERAL.—Section 1903(i) of the
13 Social Security Act (42 U.S.C 1396b(i)), as
14 amended by subsection (a), is amended—

15 (i) in paragraph (22), by striking the
16 period and inserting “; or”; and

17 (ii) by adding at the end the fol-
18 lowing:

19 “(23) with respect to any amount ex-
20 pended under the plan for an item, service, or
21 administrative expense for which payment is or
22 may be made directly to a person or entity (in-
23 cluding a State or local educational agency or
24 school district) under the State plan if payment
25 for such item, service, or administrative expense

1 was included in the determination of a prepaid
2 capitation or other risk-based rate of payment
3 to an entity under a contract pursuant to sec-
4 tion 1903(m).”.

5 (B) CONFORMING AMENDMENT.—The
6 third sentence of section 1903(i) of such Act
7 (42 U.S.C. 1396b(i)), as amended by subsection
8 (a)(3), is amended by striking “and (21)” and
9 inserting “(21), and (23)”.

10 (c) ALLOWABLE SHARE OF FFP WITH RESPECT TO
11 PAYMENT FOR SERVICES FURNISHED IN SCHOOL SET-
12 TING.—Section 1903(w)(6) of the Social Security Act (42
13 U.S.C. 1396b(w)(6)) is amended—

14 (1) in subparagraph (A), by inserting “subject
15 to subparagraph (C),” after “subsection,”; and

16 (2) by adding at the end the following:

17 “(C) In the case of any Federal financial participa-
18 tion amount determined under subsection (a) with respect
19 to any expenditure for an item or service under the plan,
20 or for any administrative expense to carry out the plan,
21 that is furnished by a State or local educational agency
22 or school district, the State shall provide that there is paid
23 to the agency or district a percent of such amount that
24 is not less than the percentage of such expenditure or ex-
25 pense that is paid by such agency or district.”.

1 (d) UNIFORM METHODOLOGY FOR SCHOOL-BASED
2 ADMINISTRATIVE CLAIMS.—Not later than 90 days after
3 the date of the enactment of this Act, the Administrator
4 of the Health Care Financing Administration, in consulta-
5 tion with State medicaid and State educational agencies
6 and local school systems, shall develop and implement a
7 uniform methodology for claims for payment of adminis-
8 trative expenses furnished under title XIX of the Social
9 Security Act by State or local educational agencies or
10 school districts. Such methodology shall be based on
11 standards related to time studies and population estimates
12 and a national standard for determining payment for such
13 administrative expenses.

14 (e) EFFECTIVE DATE.—

15 (1) IN GENERAL.—The amendments made by
16 this section (other than by subsection (b)) shall
17 apply to items and services provided on and after
18 the date of the enactment of this Act, without re-
19 gard to whether implementing regulations are in ef-
20 fect.

21 (2) MANAGED CARE AMENDMENTS.—The
22 amendments made by subsection (b) shall apply to
23 contracts entered into or renewed on or after the
24 date of the enactment of this Act.

1 (1) by inserting “or under any Federal health
2 care program (as so defined)” after “plan”; and

3 (2) by adding at the end the following: “All
4 funds collected in accordance with this paragraph
5 shall be credited exclusively to, and available for ex-
6 penditure under, the Federal health care program
7 (including the State plan under this title) that was
8 subject to the activity that was the basis for the col-
9 lection.”.

10 (c) EXTENSION OF AUTHORITY TO INVESTIGATE
11 AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID
12 BOARD AND CARE FACILITIES.—Section 1903(q)(4) of
13 such Act (42 U.S.C. 1396b(q)(4)) is amended to read as
14 follows:

15 “(4)(A) The entity has—

16 “(i) procedures for reviewing complaints of
17 abuse or neglect of patients in health care fa-
18 cilities which receive payments under the State
19 plan under this title;

20 “(ii) at the option of the entity, procedures
21 for reviewing complaints of abuse or neglect of
22 patients residing in board and care facilities;
23 and

24 “(iii) procedures for acting upon such com-
25 plaints under the criminal laws of the State or

1 for referring such complaints to other State
2 agencies for action.

3 “(B) For purposes of this paragraph, the term
4 ‘board and care facility’ means a residential setting
5 which receives payment (regardless of whether such
6 payment is made under the State plan under this
7 title) from or on behalf of two or more unrelated
8 adults who reside in such facility, and for whom one
9 or both of the following is provided:

10 “(i) Nursing care services provided by, or
11 under the supervision of, a registered nurse, li-
12 censed practical nurse, or licensed nursing as-
13 sistant.

14 “(ii) A substantial amount of personal care
15 services that assist residents with the activities
16 of daily living, including personal hygiene,
17 dressing, bathing, eating, toileting, ambulation,
18 transfer, positioning, self-medication, body care,
19 travel to medical services, essential shopping,
20 meal preparation, laundry, and housework.”.

21 (d) EFFECTIVE DATE.—The amendments made by
22 this section take effect on the date of the enactment of
23 this Act.

1 **SEC. 409. SPECIAL ALLOWANCE ADJUSTMENT FOR STU-**
2 **DENT LOANS.**

3 (a) AMENDMENT.—Section 438(b)(2) of the Higher
4 Education Act of 1965 (20 U.S.C. 1087–1(b)(2)) is
5 amended—

6 (1) in subparagraph (A), by striking “(G), and
7 (H)” and inserting “(G), (H), and (I)”;

8 (2) in subparagraph (B)(iv), by striking “(G),
9 or (H)” and inserting “(G), (H), or (I)”;

10 (3) in subparagraph (C)(ii), by striking “(G)
11 and (H)” and inserting “(G), (H), and (I)”;

12 (4) in the heading of subparagraph (H), by
13 striking “JULY 1, 2003” and inserting “JANUARY 1,
14 2000”;

15 (5) in subparagraph (H), by striking “July 1,
16 2003,” each place it appears and inserting “January
17 1, 2000,”; and

18 (6) by inserting after subparagraph (H) the fol-
19 lowing new subparagraph:

20 “(I) LOANS DISBURSED ON OR AFTER JAN-
21 UARY 1, 2000, AND BEFORE JULY 1, 2003.—

22 “(i) IN GENERAL.—Notwithstanding
23 subparagraphs (G) and (H), but subject to
24 paragraph (4) and clauses (ii), (iii), and
25 (iv) of this subparagraph, and except as
26 provided in subparagraph (B), the special

1 allowance paid pursuant to this subsection
2 on loans for which the first disbursement
3 is made on or after January 1, 2000, and
4 before July 1, 2003, shall be computed—

5 “(I) by determining the average
6 of the bond equivalent rates of the
7 quotes of the 3-month commercial
8 paper (financial) rates in effect for
9 each of the days in such quarter as
10 reported by the Federal Reserve in
11 Publication H–15 (or its successor)
12 for such 3-month period;

13 “(II) by subtracting the applica-
14 ble interest rates on such loans from
15 such average bond equivalent rate;

16 “(III) by adding 2.34 percent to
17 the resultant percent; and

18 “(IV) by dividing the resultant
19 percent by 4.

20 “(ii) IN SCHOOL AND GRACE PE-
21 RIOD.—In the case of any loan for which
22 the first disbursement is made on or after
23 January 1, 2000, and before July 1, 2003,
24 and for which the applicable rate of inter-
25 est is described in section 427A(k)(2),

1 clause (i)(III) of this subparagraph shall
2 be applied by substituting ‘1.74 percent’
3 for ‘2.34 percent’.

4 “(iii) PLUS LOANS.—In the case of
5 any loan for which the first disbursement
6 is made on or after January 1, 2000, and
7 before July 1, 2003, and for which the ap-
8 plicable rate of interest is described in sec-
9 tion 427A(k)(3), clause (i)(III) of this sub-
10 subparagraph shall be applied by substituting
11 ‘2.64 percent’ for ‘2.34 percent’, subject to
12 clause (v) of this subparagraph.

13 “(iv) CONSOLIDATION LOANS.—In the
14 case of any consolidation loan for which
15 the application is received by an eligible
16 lender on or after January 1, 2000, and
17 before July 1, 2003, and for which the ap-
18 plicable interest rate is determined under
19 section 427A(k)(4), clause (i)(III) of this
20 subparagraph shall be applied by sub-
21 stituting ‘2.64 percent’ for ‘2.34 percent’,
22 subject to clause (vi) of this subparagraph.

23 “(v) LIMITATION ON SPECIAL ALLOW-
24 ANCES FOR PLUS LOANS.—In the case of
25 PLUS loans made under section 428B and

1 first disbursed on or after January 1,
2 2000, and before July 1, 2003, for which
3 the interest rate is determined under sec-
4 tion 427A(k)(3), a special allowance shall
5 not be paid for such loan during any 12-
6 month period beginning on July 1 and
7 ending on June 30 unless, on the June 1
8 preceding such July 1—

9 “(I) the bond equivalent rate of
10 91-day Treasury bills auctioned at the
11 final auction held prior to such June
12 1 (as determined by the Secretary for
13 purposes of such section); plus

14 “(II) 3.1 percent,
15 exceeds 9.0 percent.

16 “(vi) LIMITATION ON SPECIAL ALLOW-
17 ANCES FOR CONSOLIDATION LOANS.—In
18 the case of consolidation loans made under
19 section 428C and for which the application
20 is received on or after January 1, 2000,
21 and before July 1, 2003, for which the in-
22 terest rate is determined under section
23 427A(k)(4), a special allowance shall not
24 be paid for such loan during any 3-month

1 period ending March 31, June 30, Sep-
2 tember 30, or December 31 unless—

3 “(I) the average of the bond
4 equivalent rates of the quotes of the
5 3-month commercial paper (financial)
6 rates in effect for each of the days in
7 such quarter as reported by the Fed-
8 eral Reserve in Publication H-15 (or
9 its successor) for such 3-month pe-
10 riod; plus

11 “(II) 2.64 percent,
12 exceeds the rate determined under section
13 427A(k)(4).”.

14 (b) EFFECTIVE DATE.—Subparagraph (I) of section
15 438(b)(2) of the Higher Education Act of 1965 (20
16 U.S.C. 1087-1(b)(2)) as added by subsection (a) of this
17 section shall apply with respect to any payment pursuant
18 to such section with respect to any 3-month period begin-
19 ning on or after January 1, 2000, for loans for which the
20 first disbursement is made after such date.

Passed the House of Representatives October 19,
1999.

Attest:

Clerk.

106TH CONGRESS
1ST SESSION

S. 331

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JANUARY 28, 1999

Mr. JEFFORDS (for himself, Mr. KENNEDY, Mr. ROTH, Mr. MOYNIHAN, Mr. CHAFEE, Mr. GRASSLEY, Mr. HATCH, Mr. MURKOWSKI, Mr. BREAUX, Mr. GRAHAM, Mr. KERREY, Mr. ROBB, Mr. ROCKEFELLER, Mr. BINGAMAN, Mrs. BOXER, Mr. CLELAND, Ms. COLLINS, Mr. DASCHLE, Mr. DEWINE, Mr. DODD, Mr. DURBIN, Mr. ENZI, Mrs. FEINSTEIN, Mr. GRAMS, Mr. HARKIN, Mr. HOLLINGS, Mr. HUTCHINSON, Mr. INOUE, Mr. JOHNSON, Mr. KERRY, Ms. MIKULSKI, Mrs. MURRAY, Mr. REED, Mr. REID, Mr. SARBANES, Ms. SNOWE, Mr. STEVENS, Mr. TORRICELLI, and Mr. WELLSTONE) introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

2 (a) **SHORT TITLE.**—This Act may be cited as the
3 “Work Incentives Improvement Act of 1999”.

4 (b) **TABLE OF CONTENTS.**—The table of contents of
5 this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under medicaid for workers with disabilities.

Sec. 102. Continuation of medicare coverage for working individuals with disabilities.

Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 104. Demonstration of coverage of workers with potentially severe disabilities.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Sec. 202. Work Incentives Advisory Panel.

Subtitle B—Elimination of Work Disincentives

Sec. 211. Prohibition on using work activity as a basis for review of an individual’s disabled status.

Sec. 212. Expedited eligibility determinations for applications of former long-term beneficiaries that completed an extended period of eligibility.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 221. Work incentives outreach program.

Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Extension of disability insurance program demonstration project authority.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.

Sec. 303. Sense of Congress regarding additional demonstration projects.

Sec. 304. Studies and reports.

TITLE IV—TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics.

Sec. 402. Treatment of prisoners.

Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage.

Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.

Sec. 405. Authorization for State to permit annual wage reports.

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) FINDINGS.—Congress makes the following find-
3 ings:

4 (1) Health care is important to all Americans.

5 (2) Health care is particularly important to in-
6 dividuals with disabilities and special health care
7 needs who often cannot afford the insurance avail-
8 able to them through the private market, are unin-
9 surable by the plans available in the private sector,
10 and are at great risk of incurring very high and eco-
11 nomically devastating health care costs.

12 (3) Americans with significant disabilities often
13 are unable to obtain health care insurance that pro-
14 vides coverage of the services and supports that en-
15 able them to live independently and enter or rejoin
16 the workforce. Personal assistance services (such as
17 attendant services, personal assistance with trans-
18 portation to and from work, reader services, job
19 coaches, and related assistance) remove many of the
20 barriers between significant disability and work.
21 Coverage for such services, as well as for prescrip-
22 tion drugs, durable medical equipment, and basic
23 health care are powerful and proven tools for indi-

1 individuals with significant disabilities to obtain and re-
2 tain employment.

3 (4) For individuals with disabilities, the fear of
4 losing health care and related services is one of the
5 greatest barriers keeping the individuals from maxi-
6 mizing their employment, earning potential, and
7 independence.

8 (5) Individuals with disabilities who are bene-
9 ficiaries under title II or XVI of the Social Security
10 Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing
11 medicare or medicaid coverage that is linked to their
12 cash benefits, a risk that is an equal, or greater,
13 work disincentive than the loss of cash benefits asso-
14 ciated with working.

15 (6) Currently, less than $\frac{1}{2}$ of 1 percent of so-
16 cial security disability insurance and supplemental
17 security income beneficiaries cease to receive benefits
18 as a result of employment.

19 (7) Beneficiaries have cited the lack of adequate
20 employment training and placement services as an
21 additional barrier to employment.

22 (8) If an additional $\frac{1}{2}$ of 1 percent of the cur-
23 rent social security disability insurance (DI) and
24 supplemental security income (SSI) recipients were
25 to cease receiving benefits as a result of employ-

1 ment, the savings to the Social Security Trust
2 Funds in cash assistance would total
3 \$3,500,000,000 over the worklife of the individuals.

4 (b) PURPOSES.—The purposes of this Act are as fol-
5 lows:

6 (1) To provide health care and employment
7 preparation and placement services to individuals
8 with disabilities that will enable those individuals to
9 reduce their dependency on cash benefit programs.

10 (2) To encourage States to adopt the option of
11 allowing individuals with disabilities to purchase
12 medicaid coverage that is necessary to enable such
13 individuals to maintain employment.

14 (3) To provide individuals with disabilities the
15 option of maintaining medicare coverage while work-
16 ing.

17 (4) To establish a return to work ticket pro-
18 gram that will allow individuals with disabilities to
19 seek the services necessary to obtain and retain em-
20 ployment and reduce their dependency on cash bene-
21 fit programs.

1 **TITLE I—EXPANDED AVAILABIL-**
 2 **ITY OF HEALTH CARE SERV-**
 3 **ICES**

4 **SEC. 101. EXPANDING STATE OPTIONS UNDER MEDICAID**
 5 **FOR WORKERS WITH DISABILITIES.**

6 (a) STATE OPTION TO ELIMINATE INCOME, ASSETS,
 7 AND RESOURCE LIMITATIONS FOR WORKERS WITH DIS-
 8 ABILITIES BUYING INTO MEDICAID.—Section
 9 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C.
 10 1396a(a)(10)(A)(ii)) is amended—

11 (1) in subclause (XIII), by striking “or” at the
 12 end;

13 (2) in subclause (XIV), by adding “or” at the
 14 end; and

15 (3) by adding at the end the following:

16 “(XV) who, but for earnings in
 17 excess of the limit established under
 18 section 1905(q)(2)(B), and subject to
 19 limitations on assets, resources, or un-
 20 earned income that may be set by the
 21 State, would be considered to be re-
 22 ceiving supplemental security income
 23 (subject, notwithstanding section
 24 1916, to payment of premiums or
 25 other cost-sharing charges (set on a

1 sliding scale based on income that the
 2 State may determine and that may re-
 3 quire an individual with income that
 4 exceeds 250 percent of the income of-
 5 ficial poverty line (as defined by the
 6 Office of Management and Budget,
 7 and revised annually in accordance
 8 with section 673(2) of the Omnibus
 9 Budget Reconciliation Act of 1981)
 10 applicable to a family of the size in-
 11 volved to pay an amount equal to 100
 12 percent of the premium cost for pro-
 13 viding medical assistance to the indi-
 14 vidual), so long as any such premiums
 15 or other cost-sharing charges are the
 16 same as any premiums or other cost-
 17 sharing charges imposed for individ-
 18 uals described in subclause (XVI));”.

19 (b) STATE OPTION TO EXPAND OPPORTUNITIES FOR
 20 WORKERS WITH DISABILITIES TO BUY INTO MEDIC-
 21 AID.—

22 (1) ELIGIBILITY.—Section 1902(a)(10)(A)(ii)
 23 of the Social Security Act (42 U.S.C.
 24 1396a(a)(10)(A)(ii)), as amended by subsection (a),
 25 is amended—

1 (A) in subclause (XIV), by striking “or” at
2 the end;

3 (B) in subclause (XV), by adding “or” at
4 the end; and

5 (C) by adding at the end the following:

6 “(XVI) who are working individ-
7 uals with disabilities described in sec-
8 tion 1905(v) (subject, notwithstanding
9 section 1916, to payment of premiums
10 or other cost-sharing charges (set on
11 a sliding scale based on income) that
12 the State may determine so long as
13 any such premiums or other cost-shar-
14 ing charges are the same as any pre-
15 miums or other cost-sharing charges
16 imposed for individuals described in
17 subclause (XV)), but only if the State
18 provides medical assistance to individ-
19 uals described in subclause (XV);”.

20 (2) DEFINITION OF WORKING INDIVIDUALS
21 WITH DISABILITIES.—Section 1905 of the Social Se-
22 curity Act (42 U.S.C. 1396d) is amended by adding
23 at the end the following:

24 “(v)(1) The term ‘working individuals with disabil-
25 ities’ means individuals ages 16 through 64 who—

1 “(A) by reason of medical improvement, cease
2 to be eligible for benefits under section 223(d) or
3 1614(a)(3) at the time of a regularly scheduled con-
4 tinuing disability review but who continue to have a
5 severe medically determinable impairment; and

6 “(B) are employed.

7 “(2) An individual is considered to be ‘employed’ if
8 the individual—

9 “(A) is earning at least the applicable minimum
10 wage requirement under section 6 of the Fair Labor
11 Standards Act (29 U.S.C. 206) and working at least
12 40 hours per month; or

13 “(B) is engaged in a work effort that meets
14 substantial and reasonable threshold criteria for
15 hours of work, wages, or other measures, as defined
16 by the State and approved by the Secretary.”.

17 (3) CONFORMING AMENDMENT.—Section
18 1905(a) of the Social Security Act (42 U.S.C.
19 1396d(a)) is amended in the matter preceding para-
20 graph (1)—

21 (A) in clause (x), by striking “or” at the
22 end;

23 (B) in clause (xi), by adding “or” at the
24 end; and

1 (C) by inserting after clause (xi), the fol-
2 lowing:

3 “(xii) individuals described in subsection (v),”.

4 (c) PROHIBITION AGAINST SUPPLANTATION OF
5 STATE FUNDS; MAINTENANCE OF EFFORT REQUIRE-
6 MENT; CONDITION FOR APPROVAL OF STATE PLAN
7 AMENDMENT.—

8 (1) NO SUPPLANTATION OF STATE FUNDS.—

9 Federal funds paid to a State for medical assistance
10 provided to an individual described in subclause
11 (XV) or (XVI) of section 1902(a)(10)(A)(ii) of the
12 Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii))
13 must be used to supplement but not supplant the
14 level of State funds expended as of October 1, 1998
15 for programs to enable working individuals with dis-
16 abilities to work.

17 (2) MAINTENANCE OF EFFORT.—With respect
18 to a fiscal year quarter, no Federal funds may be
19 paid to a State for medical assistance provided to an
20 individual described in subclause (XV) or (XVI) of
21 section 1902(a)(10)(A)(ii) of the Social Security Act
22 (42 U.S.C. 1396a(a)(10)(A)(ii)) for such fiscal year
23 quarter if the Secretary of Health and Human Serv-
24 ices determines that the total of the State expendi-
25 tures for programs to enable working individuals

1 with disabilities to work for the preceding fiscal year
2 quarter is less than the total of such expenditures
3 for the same fiscal year quarter of the preceding fis-
4 cal year.

5 (3) CONDITION FOR APPROVAL OF STATE PLAN
6 AMENDMENTS.—No State plan amendment that pro-
7 poses to provide medical assistance to an individual
8 described in subclause (XV) or (XVI) of section
9 1902(a)(10)(A)(ii) of the Social Security Act (42
10 U.S.C. 1396a(a)(10)(A)(ii)) may be approved unless
11 the chief executive officer of the State certifies to
12 the Secretary of Health and Human Services that
13 the plan, as so amended, will satisfy the require-
14 ments of paragraphs (1) and (2) of this subsection.

15 (d) EFFECTIVE DATE.—

16 (1) IN GENERAL.—The amendments made by
17 this section shall apply on and after October 1,
18 1999.

19 (2) EXTENSION OF EFFECTIVE DATE FOR
20 STATE LAW AMENDMENT.—In the case of a State
21 plan under title XIX of the Social Security Act
22 which the Secretary of Health and Human Services
23 determines requires State legislation in order for the
24 plan to meet the additional requirements imposed by
25 the amendments made by this section, the State

1 plan shall not be regarded as failing to comply with
 2 the requirements of this section solely on the basis
 3 of its failure to meet these additional requirements
 4 before the first day of the first calendar quarter be-
 5 ginning after the close of the first regular session of
 6 the State legislature that begins after the date of en-
 7 actment of this Act. For purposes of the previous
 8 sentence, in the case of a State that has a 2-year
 9 legislative session, each year of the session is consid-
 10 ered to be a separate regular session of the State
 11 legislature.

12 **SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR**
 13 **WORKING INDIVIDUALS WITH DISABILITIES.**

14 (a) CONTINUATION OF COVERAGE.—Section 1818A
 15 of the Social Security Act (42 U.S.C. 1395i–2a) is amend-
 16 ed by adding at the end the following:

17 “(e)(1) During the 10-year period beginning with the
 18 first month that begins after the date of enactment of this
 19 subsection, this section shall apply—

20 “(A) in subsection (a), by inserting—

21 “(i) in paragraph (2)(C), “on or after the
 22 date of enactment of the Work Incentives Im-
 23 provement Act of 1999” after “ends”; and

24 “(ii) “without being subject to a premium”
 25 before the period; and

1 “(B) without regard to subsections (c)(2)(D)
2 and (d).

3 “(2) Any individual who, as of the date of enactment
4 of this subsection is enrolled in the medicare program
5 under this section and would, without regard to paragraph
6 (1), otherwise satisfy the eligibility requirements for en-
7 rollment set forth in subsection (a) shall be deemed to sat-
8 isfy the requirement of subsection (a)(2)(C) of that section
9 after the application of paragraph (1)(A)(i) for purposes
10 of not being subject to a premium for enrollment in the
11 medicare program under this section.

12 “(3) Notwithstanding paragraph (1), paragraph (1)
13 shall continue to apply after the termination of the 10-
14 year period described in that paragraph in the case of any
15 individual who is enrolled in the medicare program under
16 this section for the month that ends such 10-year period.”.

17 (b) GAO REPORT.—Not later than 8 years after the
18 date of enactment of this Act, the Comptroller General
19 of the United States shall submit a report to Congress
20 that—

21 (1) examines the effectiveness and cost of sec-
22 tion 1818A of the Social Security Act (42 U.S.C.
23 1395i–2a) as amended by subsection (a); and

24 (2) recommends whether that section should
25 continue to be applied, as so amended, beyond the

1 10-year period described in subsection (e) of that
2 section.

3 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
4 **FRASTRUCTURES TO SUPPORT WORKING IN-**
5 **DIVIDUALS WITH DISABILITIES.**

6 (a) ESTABLISHMENT.—

7 (1) IN GENERAL.—The Secretary of Health and
8 Human Services (in this section referred to as the
9 “Secretary”) shall award grants described in sub-
10 section (b) to States to support the design, establish-
11 ment, and operation of State infrastructures that
12 provide items and services to support working indi-
13 viduals with disabilities. A State may submit an ap-
14 plication for a grant authorized under this section at
15 such time, in such manner, and containing such in-
16 formation as the Secretary may determine.

17 (2) DEFINITION OF STATE.—In this section,
18 the term “State” means each of the 50 States, the
19 District of Columbia, Puerto Rico, Guam, the
20 United States Virgin Islands, American Samoa, and
21 the Commonwealth of the Northern Mariana Is-
22 lands.

23 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
24 REACH.—

1 (1) IN GENERAL.—Out of the funds appro-
2 priated under subsection (e), the Secretary shall
3 award grants to States to—

4 (A) support the establishment, implemen-
5 tation, and operation of the State infrastruc-
6 tures described in subsection (a); and

7 (B) conduct outreach campaigns regarding
8 the existence of such infrastructures.

9 (2) ELIGIBILITY FOR GRANTS.—

10 (A) IN GENERAL.—No State may receive a
11 grant under this subsection unless—

12 (i) the State has an approved amend-
13 ment to the State plan under title XIX of
14 the Social Security Act (42 U.S.C. 1396 et
15 seq.) that—

16 (I) provides medical assistance
17 under such plan to individuals de-
18 scribed in section
19 1902(a)(10)(A)(ii)(XV) of the Social
20 Security Act (42 U.S.C.
21 1396a(a)(10)(A)(ii)(XV)); or

22 (II) provides medical assistance
23 under such plan to individuals de-
24 scribed in subclauses (XV) and (XVI)
25 of section 1902(a)(10)(A)(ii) of the

1 Social Security Act (42 U.S.C.
2 1396a(a)(10)(A)(ii)); and

3 (ii) the State demonstrates to the sat-
4 isfaction of the Secretary that the State
5 makes personal assistance services avail-
6 able under the State plan under title XIX
7 of the Social Security Act (42 U.S.C. 1396
8 et seq.) to the extent necessary to enable
9 individuals described in subclause (I) or
10 (II) of clause (i) to remain employed (as
11 determined under section 1905(v)(2) of the
12 Social Security Act (42 U.S.C.
13 1396d(v)(2)).

14 (B) DEFINITION OF PERSONAL ASSIST-
15 ANCE SERVICES.—In this paragraph, the term
16 “personal assistance services” means a range of
17 services, provided by 1 or more persons, de-
18 signed to assist an individual with a disability
19 to perform daily activities on and off the job
20 that the individual would typically perform if
21 the individual did not have a disability. Such
22 services shall be designed to increase the indi-
23 vidual’s control in life and ability to perform ev-
24 eryday activities on or off the job.

25 (3) DETERMINATION OF AWARDS.—

1 (A) IN GENERAL.—Subject to subpara-
2 graph (B), the Secretary shall determine a for-
3 mula for awarding grants to States under this
4 section that provides special consideration to
5 States that provide medical assistance under
6 title XIX of the Social Security Act to individ-
7 uals described in section
8 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
9 1396a(a)(10)(A)(ii)(XVI)).

10 (B) AWARD LIMITS.—

11 (i) MINIMUM AWARDS.—No State that
12 submits an approved application for fund-
13 ing under this section shall receive a grant
14 for a fiscal year that is less than \$500,000.

15 (ii) MAXIMUM AWARDS.—No State
16 that submits an approved application for
17 funding under this section shall receive a
18 grant for a fiscal year that exceeds 15 per-
19 cent of the total expenditures by the State
20 (including the reimbursed Federal share of
21 such expenditures) for medical assistance
22 for individuals eligible under subclause
23 (XV) or (XVI) of section
24 1902(a)(10)(A)(ii), whichever is greater, as

1 estimated by the State and approved by
2 the Secretary.

3 (c) AVAILABILITY OF FUNDS.—

4 (1) FUNDS ALLOCATED TO STATES.—Funds al-
5 located to a State under a grant made under this
6 section for a fiscal year shall remain available until
7 expended.

8 (2) FUNDS NOT ALLOCATED TO STATES.—

9 Funds not allocated to States in the fiscal year for
10 which they are appropriated shall remain available
11 in succeeding fiscal years for allocation by the Sec-
12 retary using the allocation formula established by
13 the Secretary under subsection (c)(3)(A).

14 (d) ANNUAL REPORT.—A State that receives a grant
15 under this section shall submit an annual report to the
16 Secretary on the use of funds provided under the grant.
17 Each report shall include the percentage increase in the
18 number of title II disability beneficiaries, as defined in sec-
19 tion 1148(k)(3) of the Social Security Act (as amended
20 by section 201) in the State, and title XVI disability bene-
21 ficiaries, as defined in section 1148(k)(4) of the Social Se-
22 curity Act (as so amended) in the State who return to
23 work.

24 (e) APPROPRIATION.—Out of any funds in the Treas-
25 ury not otherwise appropriated, there is authorized to be

1 appropriated and there is appropriated to make grants
2 under this section—

3 (1) for fiscal year 2000, \$20,000,000;

4 (2) for fiscal year 2001, \$25,000,000;

5 (3) for fiscal year 2002, \$30,000,000;

6 (4) for fiscal year 2003, \$35,000,000;

7 (5) for fiscal year 2004, \$40,000,000; and

8 (6) for fiscal years 2005 through 2010, the
9 amount appropriated for the preceding fiscal year
10 increased by the percentage increase (if any) in the
11 Consumer Price Index for All Urban Consumers
12 (United States city average) for the preceding fiscal
13 year.

14 (f) RECOMMENDATION.—Not later than October 1,
15 2009, the Secretary of Health and Human Services, in
16 consultation with the Work Incentives Advisory Panel es-
17 tablished under section 202, shall submit a recommenda-
18 tion to the Committee on Commerce and the Committee
19 on Ways and Means of the House of Representatives and
20 the Committee on Finance of the Senate regarding wheth-
21 er the grant program established under this section should
22 be continued after fiscal year 2010.

1 **SEC. 104. DEMONSTRATION OF COVERAGE OF WORKERS**
 2 **WITH POTENTIALLY SEVERE DISABILITIES.**

3 (a) STATE APPLICATION.—A State may apply to the
 4 Secretary of Health and Human Services (in this section
 5 referred to as the “Secretary”) for approval of a dem-
 6 onstration project (in this section referred to as a “dem-
 7 onstration project”) under which up to a specified maxi-
 8 mum number of individuals who are workers with a poten-
 9 tially severe disability (as defined in subsection (b)(1)) are
 10 provided medical assistance equal to that provided under
 11 section 1905(a) of the Social Security Act (42 U.S.C.
 12 1396d(a)) to individuals described in section
 13 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
 14 1396a(a)(10)(A)(ii)(XV)).

15 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
 16 ABILITY DEFINED.—For purposes of this section—

17 (1) IN GENERAL.—The term “worker with a
 18 potentially severe disability” means, with respect to
 19 a demonstration project, an individual who—

20 (A) is at least 16, but less than 65, years
 21 of age;

22 (B) has a specific physical or mental im-
 23 pairment that, as defined by the State under
 24 the demonstration project, is reasonably ex-
 25 pected, but for the receipt of items and services
 26 described in section 1905(a) of the Social Secu-

1 rity Act, to become blind or disabled (as defined
2 under section 1614(a) of the Social Security
3 Act); and

4 (C) is employed (as defined in paragraph
5 (2)).

6 (2) DEFINITION OF EMPLOYED.—An individual
7 is considered to be “employed” if the individual—

8 (A) is earning at least the applicable mini-
9 mum wage requirement under section 6 of the
10 Fair Labor Standards Act (29 U.S.C. 206) and
11 working at least 40 hours per month; or

12 (B) is engaged in a work effort that meets
13 substantial and reasonable threshold criteria for
14 hours of work, wages, or other measures, as de-
15 fined under the demonstration project and ap-
16 proved by the Secretary.

17 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

18 (1) IN GENERAL.—Subject to paragraph (3),
19 the Secretary shall approve applications under sub-
20 section (a) that meet the requirements of paragraph
21 (2) and such additional terms and conditions as the
22 Secretary may require. The Secretary may waive the
23 requirement of section 1902(a)(1) of the Social Se-
24 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
25 State demonstrations.

1 (2) TERMS AND CONDITIONS OF DEMONSTRA-
2 TION PROJECTS.—The Secretary may not approve a
3 demonstration project under this section unless the
4 State provides assurances satisfactory to the Sec-
5 retary that the following conditions are or will be
6 met:

7 (A) ELECTION OF OPTIONAL CATEGORY.—
8 The State has elected to provide coverage under
9 its plan under title XIX of the Social Security
10 Act of individuals described in section
11 1902(a)(10)(A)(ii)(XV) of the Social Security
12 Act.

13 (B) MAINTENANCE OF STATE EFFORT.—
14 Federal funds paid to a State pursuant to this
15 section must be used to supplement, but not
16 supplant, the level of State funds expended for
17 workers with potentially severe disabilities
18 under programs in effect for such individuals at
19 the time the demonstration project is approved
20 under this section.

21 (C) INDEPENDENT EVALUATION.—The
22 State provides for an independent evaluation of
23 the project.

24 (3) LIMITATIONS ON FEDERAL FUNDING.—

1 (A) APPROPRIATION.—Out of any funds in
2 the Treasury not otherwise appropriated, there
3 is authorized to be appropriated and there is
4 appropriated to carry out this section—

5 (i) for fiscal year 2000, \$70,000,000;

6 (ii) for fiscal year 2001, \$73,000,000;

7 (iii) for fiscal year 2002, \$77,000,000;

8 and

9 (iv) for fiscal year 2003, \$80,000,000.

10 (B) LIMITATION ON PAYMENTS.—In no
11 case may—

12 (i) the aggregate amount of payment
13 made by the Secretary to States under this
14 section exceed \$300,000,000; or

15 (ii) payment be provided by the Sec-
16 retary for a fiscal year after fiscal year
17 2005.

18 (C) FUNDS ALLOCATED TO STATES.—The
19 Secretary shall allocate funds to States based
20 on their applications and the availability of
21 funds. Funds allocated to a State under a grant
22 made under this section for a fiscal year shall
23 remain available until expended.

24 (D) FUNDS NOT ALLOCATED TO STATES.—
25 Funds not allocated to States in the fiscal year

1 for which they are appropriated shall remain
2 available in succeeding fiscal years for alloca-
3 tion by the Secretary using the allocation for-
4 mula established under this section.

5 (E) PAYMENTS TO STATES.—Subject to
6 the succeeding provisions of this section, the
7 Secretary shall pay to each State with a dem-
8 onstration project approved under this section,
9 from its allocation under subparagraph (C), an
10 amount for each quarter equal to the Federal
11 medical assistance percentage (as defined in
12 section 1905(b) of the Social Security Act (42
13 U.S.C. 1395d(b)) of expenditures in the quarter
14 for medical assistance provided to workers with
15 a potentially severe disability.

16 (d) STATE DEFINED.—In this section, the term
17 “State” has the meaning given such term for purposes of
18 title XIX of the Social Security Act.

1 **TITLE II—TICKET TO WORK AND**
 2 **SELF-SUFFICIENCY AND RE-**
 3 **LATED PROVISIONS**

4 **Subtitle A—Ticket to Work and**
 5 **Self-Sufficiency**

6 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
 7 **SELF-SUFFICIENCY PROGRAM.**

8 (a) IN GENERAL.—Part A of title XI of the Social
 9 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
 10 ing after section 1147 (as added by section 8 of the Non-
 11 citizen Benefit Clarification and Other Technical Amend-
 12 ments Act of 1998 (Public Law 105–306; 112 Stat.
 13 2928)) the following:

14 “TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

15 “SEC. 1148. (a) IN GENERAL.—The Commissioner
 16 shall establish a Ticket to Work and Self-Sufficiency Pro-
 17 gram, under which a disabled beneficiary may use a ticket
 18 to work and self-sufficiency issued by the Commissioner
 19 in accordance with this section to obtain employment serv-
 20 ices, vocational rehabilitation services, or other support
 21 services from an employment network which is of the bene-
 22 ficiary’s choice and which is willing to provide such serv-
 23 ices to the beneficiary.

24 “(b) TICKET SYSTEM.—

1 “(1) DISTRIBUTION OF TICKETS.—The Com-
2 missioner may issue a ticket to work and self-suffi-
3 ciency to disabled beneficiaries for participation in
4 the Program.

5 “(2) ASSIGNMENT OF TICKETS.—A disabled
6 beneficiary holding a ticket to work and self-suffi-
7 ciency may assign the ticket to any employment net-
8 work of the beneficiary’s choice which is serving
9 under the Program and is willing to accept the as-
10 signment.

11 “(3) TICKET TERMS.—A ticket issued under
12 paragraph (1) shall consist of a document which evi-
13 dences the Commissioner’s agreement to pay (as
14 provided in paragraph (4)) an employment network,
15 which is serving under the Program and to which
16 such ticket is assigned by the beneficiary, for such
17 employment services, vocational rehabilitation serv-
18 ices, and other support services as the employment
19 network may provide to the beneficiary.

20 “(4) PAYMENTS TO EMPLOYMENT NET-
21 WORKS.—The Commissioner shall pay an employ-
22 ment network under the Program in accordance with
23 the outcome payment system under subsection
24 (h)(2) or under the outcome-milestone payment sys-
25 tem under subsection (h)(3) (whichever is elected

1 pursuant to subsection (h)(1)). An employment net-
2 work may not request or receive compensation for
3 such services from the beneficiary.

4 “(c) STATE PARTICIPATION.—

5 “(1) IN GENERAL.—Each State agency admin-
6 istering or supervising the administration of the
7 State plan approved under title I of the Rehabilita-
8 tion Act of 1973 may elect to participate in the Pro-
9 gram as an employment network with respect to a
10 disabled beneficiary. If the State agency does elect
11 to participate in the Program, the State agency also
12 shall elect to be paid under the outcome payment
13 system or the outcome-milestone payment system in
14 accordance with subsection (h)(1). With respect to a
15 disabled beneficiary that the State agency does not
16 elect to have participate in the Program, the State
17 agency shall be paid for services provided to that
18 beneficiary under the system for payment applicable
19 under section 222(d) and subsections (d) and (e) of
20 section 1615. The Commissioner shall provide for
21 periodic opportunities for exercising such elections
22 (and revocations).

23 “(2) EFFECT OF PARTICIPATION BY STATE
24 AGENCY.—

1 “(A) STATE AGENCIES PARTICIPATING.—

2 In any case in which a State agency described
3 in paragraph (1) elects under that paragraph to
4 participate in the Program, the employment
5 services, vocational rehabilitation services, and
6 other support services which, upon assignment
7 of tickets to work and self-sufficiency, are pro-
8 vided to disabled beneficiaries by the State
9 agency acting as an employment network shall
10 be governed by plans for vocational rehabilita-
11 tion services approved under title I of the Reha-
12 bilitation Act of 1973.

13 “(B) STATE AGENCIES ADMINISTERING
14 MATERNAL AND CHILD HEALTH SERVICES PRO-
15 GRAMS.—Subparagraph (A) shall not apply
16 with respect to any State agency administering
17 a program under title V of this Act.

18 “(3) SPECIAL REQUIREMENTS APPLICABLE TO
19 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

20 “(A) IN GENERAL.—In any case in which
21 an employment network has been assigned a
22 ticket to work and self-sufficiency by a disabled
23 beneficiary, no State agency shall be deemed re-
24 quired, under this section, title I of the Work-
25 force Investment Act of 1998, title I of the Re-

1 habilitation Act of 1973, or a State plan ap-
2 proved under such title, to accept any referral
3 of such disabled beneficiary from such employ-
4 ment network unless such employment network
5 and such State agency have entered into a writ-
6 ten agreement that meets the requirements of
7 subparagraph (B). Any beneficiary who has as-
8 signed a ticket to work and self-sufficiency to
9 an employment network that has not entered
10 into such a written agreement with such a
11 State agency may not access vocational rehabili-
12 tation services under title I of the Rehabilita-
13 tion Act of 1973 until such time as the bene-
14 ficiary is reassigned to a State vocational reha-
15 bilitation agency by the Program Manager.

16 “(B) TERMS OF AGREEMENT.—An agree-
17 ment required by subparagraph (A) shall speci-
18 fy, in accordance with regulations prescribed
19 pursuant to subparagraph (C)—

20 “(i) the extent (if any) to which the
21 employment network holding the ticket will
22 provide to the State agency—

23 “(I) reimbursement for costs in-
24 curred in providing services described

1 in subparagraph (A) to the disabled
2 beneficiary; and

3 “(II) other amounts from pay-
4 ments made by the Commissioner to
5 the employment network pursuant to
6 subsection (h); and

7 “(ii) any other conditions that may be
8 required by such regulations.

9 “(C) REGULATIONS.—The Commissioner
10 and the Secretary of Education shall jointly
11 prescribe regulations specifying the terms of
12 agreements required by subparagraph (A) and
13 otherwise necessary to carry out the provisions
14 of this paragraph.

15 “(D) PENALTY.—No payment may be
16 made to an employment network pursuant to
17 subsection (h) in connection with services pro-
18 vided to any disabled beneficiary if such em-
19 ployment network makes referrals described in
20 subparagraph (A) in violation of the terms of
21 the agreement required under subparagraph (A)
22 or without having entered into such an agree-
23 ment.

24 “(d) RESPONSIBILITIES OF THE COMMISSIONER.—

1 “(1) SELECTION AND QUALIFICATIONS OF PRO-
2 GRAM MANAGERS.—The Commissioner shall enter
3 into agreements with 1 or more organizations in the
4 private or public sector for service as a program
5 manager to assist the Commissioner in administer-
6 ing the Program. Any such program manager shall
7 be selected by means of a competitive bidding proc-
8 ess, from among organizations in the private or pub-
9 lic sector with available expertise and experience in
10 the field of vocational rehabilitation and employment
11 services.

12 “(2) TENURE, RENEWAL, AND EARLY TERMI-
13 NATION.—Each agreement entered into under para-
14 graph (1) shall provide for early termination upon
15 failure to meet performance standards which shall be
16 specified in the agreement and which shall be
17 weighted to take into account any performance in
18 prior terms. Such performance standards shall
19 include—

20 “(A) measures for ease of access by bene-
21 ficiaries to services; and

22 “(B) measures for determining the extent
23 to which failures in obtaining services for bene-
24 ficiaries fall within acceptable parameters, as
25 determined by the Commissioner.

1 “(3) PRECLUSION FROM DIRECT PARTICIPA-
2 TION IN DELIVERY OF SERVICES IN OWN SERVICE
3 AREA.—Agreements under paragraph (1) shall
4 preclude—

5 “(A) direct participation by a program
6 manager in the delivery of employment services,
7 vocational rehabilitation services, or other sup-
8 port services to beneficiaries in the service area
9 covered by the program manager’s agreement;
10 and

11 “(B) the holding by a program manager of
12 a financial interest in an employment network
13 or service provider which provides services in a
14 geographic area covered under the program
15 manager’s agreement.

16 “(4) SELECTION OF EMPLOYMENT NET-
17 WORKS.—

18 “(A) IN GENERAL.—The Commissioner
19 shall select and enter into agreements with em-
20 ployment networks for service under the Pro-
21 gram. Such employment networks shall be in
22 addition to State agencies serving as employ-
23 ment networks pursuant to elections under sub-
24 section (c).

1 “(B) ALTERNATE PARTICIPANTS.—In any
2 State where the Program is being implemented,
3 the Commissioner shall enter into an agreement
4 with any alternate participant that is operating
5 under the authority of section 222(d)(2) in the
6 State as of the date of enactment of this section
7 and chooses to serve as an employment network
8 under the Program.

9 “(5) TERMINATION OF AGREEMENTS WITH EM-
10 PLOYMENT NETWORKS.—The Commissioner shall
11 terminate agreements with employment networks for
12 inadequate performance, as determined by the Com-
13 missioner.

14 “(6) QUALITY ASSURANCE.—The Commissioner
15 shall provide for such periodic reviews as are nec-
16 essary to provide for effective quality assurance in
17 the provision of services by employment networks.
18 The Commissioner shall solicit and consider the
19 views of consumers and the program manager under
20 which the employment networks serve and shall con-
21 sult with providers of services to develop perform-
22 ance measurements. The Commissioner shall ensure
23 that the results of the periodic reviews are made
24 available to beneficiaries who are prospective service
25 recipients as they select employment networks. The

1 Commissioner shall ensure that the periodic surveys
2 of beneficiaries receiving services under the Program
3 are designed to measure customer service satisfac-
4 tion.

5 “(7) DISPUTE RESOLUTION.—The Commis-
6 sioner shall provide for a mechanism for resolving
7 disputes between beneficiaries and employment net-
8 works, between program managers and employment
9 networks, and between program managers and pro-
10 viders of services. The Commissioner shall afford a
11 party to such a dispute a reasonable opportunity for
12 a full and fair review of the matter in dispute.

13 “(e) PROGRAM MANAGERS.—

14 “(1) IN GENERAL.—A program manager shall
15 conduct tasks appropriate to assist the Commis-
16 sioner in carrying out the Commissioner’s duties in
17 administering the Program.

18 “(2) RECRUITMENT OF EMPLOYMENT NET-
19 WORKS.—A program manager shall recruit, and rec-
20 ommend for selection by the Commissioner, employ-
21 ment networks for service under the Program. The
22 program manager shall carry out such recruitment
23 and provide such recommendations, and shall mon-
24 itor all employment networks serving in the Program
25 in the geographic area covered under the program

1 manager's agreement, to the extent necessary and
2 appropriate to ensure that adequate choices of serv-
3 ices are made available to beneficiaries. Employment
4 networks may serve under the Program only pursu-
5 ant to an agreement entered into with the Commis-
6 sioner under the Program incorporating the applica-
7 ble provisions of this section and regulations there-
8 under, and the program manager shall provide and
9 maintain assurances to the Commissioner that pay-
10 ment by the Commissioner to employment networks
11 pursuant to this section is warranted based on com-
12 pliance by such employment networks with the terms
13 of such agreement and this section. The program
14 manager shall not impose numerical limits on the
15 number of employment networks to be recommended
16 pursuant to this paragraph.

17 “(3) FACILITATION OF ACCESS BY BENE-
18 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
19 gram manager shall facilitate access by beneficiaries
20 to employment networks. The program manager
21 shall ensure that each beneficiary is allowed changes
22 in employment networks for good cause, as deter-
23 mined by the Commissioner, without being deemed
24 to have rejected services under the Program. The
25 program manager shall establish and maintain lists

1 of employment networks available to beneficiaries
2 and shall make such lists generally available to the
3 public. The program manager shall ensure that all
4 information provided to disabled beneficiaries pursu-
5 ant to this paragraph is provided in accessible for-
6 mats.

7 “(4) ENSURING AVAILABILITY OF ADEQUATE
8 SERVICES.—The program manager shall ensure that
9 employment services, vocational rehabilitation serv-
10 ices, and other support services are provided to
11 beneficiaries throughout the geographic area covered
12 under the program manager’s agreement, including
13 rural areas.

14 “(5) REASONABLE ACCESS TO SERVICES.—The
15 program manager shall take such measures as are
16 necessary to ensure that sufficient employment net-
17 works are available and that each beneficiary receiv-
18 ing services under the Program has reasonable ac-
19 cess to employment services, vocational rehabilitation
20 services, and other support services. Services pro-
21 vided under the Program may include case manage-
22 ment, work incentives planning, supported employ-
23 ment, career planning, career plan development, vo-
24 cational assessment, job training, placement, follow-
25 up services, and such other services as may be speci-

1 fied by the Commissioner under the Program. The
2 program manager shall ensure that such services are
3 available in each service area.

4 “(f) EMPLOYMENT NETWORKS.—

5 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
6 WORKS.—

7 “(A) IN GENERAL.—Each employment net-
8 work serving under the Program shall consist of
9 an agency or instrumentality of a State (or a
10 political subdivision thereof) or a private entity
11 that assumes responsibility for the coordination
12 and delivery of services under the Program to
13 individuals assigning to the employment net-
14 work tickets to work and self-sufficiency issued
15 under subsection (b).

16 “(B) ONE-STOP DELIVERY SYSTEMS.—An
17 employment network serving under the Pro-
18 gram may consist of a one-stop delivery system
19 established under subtitle B of title I of the
20 Workforce Investment Act of 1998.

21 “(C) COMPLIANCE WITH SELECTION CRI-
22 TERIA.—No employment network may serve
23 under the Program unless it meets and main-
24 tains compliance with both general selection cri-
25 teria (such as professional and educational

1 qualifications (where applicable)) and specific
2 selection criteria (such as substantial expertise
3 and experience in providing relevant employ-
4 ment services and supports).

5 “(D) SINGLE OR ASSOCIATED PROVIDERS
6 ALLOWED.—An employment network shall con-
7 sist of either a single provider of such services
8 or of an association of such providers organized
9 so as to combine their resources into a single
10 entity. An employment network may meet the
11 requirements of subsection (e)(4) by providing
12 services directly, or by entering into agreements
13 with other individuals or entities providing ap-
14 propriate employment services, vocational reha-
15 bilitation services, or other support services.

16 “(2) REQUIREMENTS RELATING TO PROVISION
17 OF SERVICES.—Each employment network serving
18 under the Program shall be required under the
19 terms of its agreement with the Commissioner to—

20 “(A) serve prescribed service areas; and

21 “(B) take such measures as are necessary
22 to ensure that employment services, vocational
23 rehabilitation services, and other support serv-
24 ices provided under the Program by, or under
25 agreements entered into with, the employment

1 network are provided under appropriate individ-
2 ual work plans meeting the requirements of
3 subsection (g).

4 “(3) ANNUAL FINANCIAL REPORTING.—Each
5 employment network shall meet financial reporting
6 requirements as prescribed by the Commissioner.

7 “(4) PERIODIC OUTCOMES REPORTING.—Each
8 employment network shall prepare periodic reports,
9 on at least an annual basis, itemizing for the covered
10 period specific outcomes achieved with respect to
11 specific services provided by the employment net-
12 work. Such reports shall conform to a national
13 model prescribed under this section. Each employ-
14 ment network shall provide a copy of the latest re-
15 port issued by the employment network pursuant to
16 this paragraph to each beneficiary upon enrollment
17 under the Program for services to be received
18 through such employment network. Upon issuance of
19 each report to each beneficiary, a copy of the report
20 shall be maintained in the files of the employment
21 network. The program manager shall ensure that
22 copies of all such reports issued under this para-
23 graph are made available to the public under reason-
24 able terms.

25 “(g) INDIVIDUAL WORK PLANS.—

1 “(1) REQUIREMENTS.—Each employment net-
2 work shall—

3 “(A) take such measures as are necessary
4 to ensure that employment services, vocational
5 rehabilitation services, and other support serv-
6 ices provided under the Program by, or under
7 agreements entered into with, the employment
8 network are provided under appropriate individ-
9 ual work plans that meet the requirements of
10 subparagraph (C);

11 “(B) develop and implement each such in-
12 dividual work plan in partnership with each
13 beneficiary receiving such services in a manner
14 that affords the beneficiary the opportunity to
15 exercise informed choice in selecting an employ-
16 ment goal and specific services needed to
17 achieve that employment goal;

18 “(C) ensure that each individual work plan
19 includes at least—

20 “(i) a statement of the vocational goal
21 developed with the beneficiary;

22 “(ii) a statement of the services and
23 supports that have been deemed necessary
24 for the beneficiary to accomplish that goal;

1 “(iii) a statement of any terms and
2 conditions related to the provision of such
3 services and supports; and

4 “(iv) a statement of understanding re-
5 garding the beneficiary’s rights under the
6 Program (such as the right to retrieve the
7 ticket to work and self-sufficiency if the
8 beneficiary is dissatisfied with the services
9 being provided by the employment net-
10 work) and remedies available to the indi-
11 vidual, including information on the avail-
12 ability of advocacy services and assistance
13 in resolving disputes through the State
14 grant program authorized under section
15 1150;

16 “(D) provide a beneficiary the opportunity
17 to amend the individual work plan if a change
18 in circumstances necessitates a change in the
19 plan; and

20 “(E) make each beneficiary’s individual
21 work plan available to the beneficiary in, as ap-
22 propriate, an accessible format chosen by the
23 beneficiary.

24 “(2) EFFECTIVE UPON WRITTEN APPROVAL.—
25 A beneficiary’s individual work plan shall take effect

1 upon written approval by the beneficiary or a rep-
2 resentative of the beneficiary and a representative of
3 the employment network that, in providing such
4 written approval, acknowledges assignment of the
5 beneficiary's ticket to work and self-sufficiency.

6 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

7 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
8 PLOYMENT NETWORKS.—

9 “(A) IN GENERAL.—The Program shall
10 provide for payment authorized by the Commis-
11 sioner to employment networks under either an
12 outcome payment system or an outcome-mile-
13 stone payment system. Each employment net-
14 work shall elect which payment system will be
15 utilized by the employment network, and, for
16 such period of time as such election remains in
17 effect, the payment system so elected shall be
18 utilized exclusively in connection with such em-
19 ployment network (except as provided in sub-
20 paragraph (B)).

21 “(B) NO CHANGE IN METHOD OF PAY-
22 MENT FOR BENEFICIARIES WITH TICKETS AL-
23 READY ASSIGNED TO THE EMPLOYMENT NET-
24 WORKS.—Any election of a payment system by
25 an employment network that would result in a

1 change in the method of payment to the em-
2 ployment network for services provided to a
3 beneficiary who is receiving services from the
4 employment network at the time of the election
5 shall not be effective with respect to payment
6 for services provided to that beneficiary and the
7 method of payment previously selected shall
8 continue to apply with respect to such services.

9 “(2) OUTCOME PAYMENT SYSTEM.—

10 “(A) IN GENERAL.—The outcome payment
11 system shall consist of a payment structure gov-
12 erning employment networks electing such sys-
13 tem under paragraph (1)(A) which meets the
14 requirements of this paragraph.

15 “(B) PAYMENTS MADE DURING OUTCOME
16 PAYMENT PERIOD.—The outcome payment sys-
17 tem shall provide for a schedule of payments to
18 an employment network in connection with each
19 individual who is a beneficiary for each month
20 during the individual’s outcome payment period
21 for which benefits (described in paragraphs (3)
22 and (4) of subsection (k)) are not payable to
23 such individual because of work or earnings.

24 “(C) COMPUTATION OF PAYMENTS TO EM-
25 PLOYMENT NETWORK.—The payment schedule

1 of the outcome payment system shall be de-
2 signed so that—

3 “(i) the payment for each of the 60
4 months during the outcome payment pe-
5 riod for which benefits (described in para-
6 graphs (3) and (4) of subsection (k)) are
7 not payable is equal to a fixed percentage
8 of the payment calculation base for the cal-
9 endar year in which such month occurs;
10 and

11 “(ii) such fixed percentage is set at a
12 percentage which does not exceed 40 per-
13 cent.

14 “(3) OUTCOME-MILESTONE PAYMENT SYS-
15 TEM.—

16 “(A) IN GENERAL.—The outcome-mile-
17 stone payment system shall consist of a pay-
18 ment structure governing employment networks
19 electing such system under paragraph (1)(A)
20 which meets the requirements of this para-
21 graph.

22 “(B) EARLY PAYMENTS UPON ATTAIN-
23 MENT OF MILESTONES IN ADVANCE OF OUT-
24 COME PAYMENT PERIODS.—The outcome-mile-
25 stone payment system shall provide for 1 or

1 more milestones with respect to beneficiaries re-
2 ceiving services from an employment network
3 under the Program that are directed toward the
4 goal of permanent employment. Such milestones
5 shall form a part of a payment structure that
6 provides, in addition to payments made during
7 outcome payment periods, payments made prior
8 to outcome payment periods in amounts based
9 on the attainment of such milestones.

10 “(C) LIMITATION ON TOTAL PAYMENTS TO
11 EMPLOYMENT NETWORK.—The payment sched-
12 ule of the outcome-milestone payment system
13 shall be designed so that the total of the pay-
14 ments to the employment network with respect
15 to each beneficiary is less than, on a net
16 present value basis (using an interest rate de-
17 termined by the Commissioner that appro-
18 priately reflects the cost of funds faced by pro-
19 viders), the total amount to which payments to
20 the employment network with respect to the
21 beneficiary would be limited if the employment
22 network were paid under the outcome payment
23 system.

24 “(4) DEFINITIONS.—In this subsection:

1 “(A) PAYMENT CALCULATION BASE.—The
2 term ‘payment calculation base’ means, for any
3 calendar year—

4 “(i) in connection with a title II dis-
5 ability beneficiary, the average disability
6 insurance benefit payable under section
7 223 for all beneficiaries for months during
8 the preceding calendar year; and

9 “(ii) in connection with a title XVI
10 disability beneficiary (who is not concur-
11 rently a title II disability beneficiary), the
12 average payment of supplemental security
13 income benefits based on disability payable
14 under title XVI (excluding State sup-
15 plementation) for months during the pre-
16 ceding calendar year to all beneficiaries
17 who have attained age 18 but have not at-
18 tained age 65.

19 “(B) OUTCOME PAYMENT PERIOD.—The
20 term ‘outcome payment period’ means, in con-
21 nection with any individual who had assigned a
22 ticket to work and self-sufficiency to an employ-
23 ment network under the Program, a period—

24 “(i) beginning with the first month,
25 ending after the date on which such ticket

1 was assigned to the employment network,
2 for which benefits (described in paragraphs
3 (3) and (4) of subsection (k)) are not pay-
4 able to such individual by reason of en-
5 gagement in substantial gainful activity or
6 by reason of earnings from work activity;
7 and

8 “(ii) ending with the 60th month
9 (consecutive or otherwise), ending after
10 such date, for which such benefits are not
11 payable to such individual by reason of en-
12 gagement in substantial gainful activity or
13 by reason of earnings from work activity.

14 “(5) PERIODIC REVIEW AND ALTERATIONS OF
15 PRESCRIBED SCHEDULES.—

16 “(A) PERCENTAGES AND PERIODS.—The
17 Commissioner shall periodically review the per-
18 centage specified in paragraph (2)(C), the total
19 payments permissible under paragraph (3)(C),
20 and the period of time specified in paragraph
21 (4)(B) to determine whether such percentages,
22 such permissible payments, and such period
23 provide an adequate incentive for employment
24 networks to assist beneficiaries to enter the
25 workforce, while providing for appropriate

1 economies. The Commissioner may alter such
2 percentage, such total permissible payments, or
3 such period of time to the extent that the Com-
4 missioner determines, on the basis of the Com-
5 missioner's review under this paragraph, that
6 such an alteration would better provide the in-
7 centive and economies described in the preced-
8 ing sentence.

9 “(B) NUMBER AND AMOUNTS OF MILE-
10 STONE PAYMENTS.—The Commissioner shall
11 periodically review the number and amounts of
12 milestone payments established by the Commis-
13 sioner pursuant to this section to determine
14 whether they provide an adequate incentive for
15 employment networks to assist beneficiaries to
16 enter the workforce, taking into account infor-
17 mation provided to the Commissioner by pro-
18 gram managers, the Work Incentives Advisory
19 Panel established under section 202 of the
20 Work Incentives Improvement Act of 1999, and
21 other reliable sources. The Commissioner may
22 from time to time alter the number and
23 amounts of milestone payments initially estab-
24 lished by the Commissioner pursuant to this
25 section to the extent that the Commissioner de-

1 termines that such an alteration would allow an
2 adequate incentive for employment networks to
3 assist beneficiaries to enter the workforce. Such
4 alteration shall be based on information pro-
5 vided to the Commissioner by program man-
6 agers, the Work Incentives Advisory Panel es-
7 tablished under section 202 of the Work Incen-
8 tives Improvement Act of 1999, or other reli-
9 able sources.

10 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
11 any period for which an individual is using, as defined by
12 the Commissioner, a ticket to work and self-sufficiency
13 issued under this section, the Commissioner (and any ap-
14 plicable State agency) may not initiate a continuing dis-
15 ability review or other review under section 221 of whether
16 the individual is or is not under a disability or a review
17 under title XVI similar to any such review under section
18 221.

19 “(j) ALLOCATION OF COSTS.—

20 “(1) PAYMENTS TO EMPLOYMENT NET-
21 WORKS.—Payments to employment networks (in-
22 cluding State agencies that elect to participate in the
23 Program as an employment network) shall be made
24 from the Federal Old-Age and Survivors Insurance
25 Trust Fund or the Federal Disability Insurance

1 Trust Fund, as appropriate, in the case of ticketed
2 title II disability beneficiaries who return to work,
3 or from the appropriation made available for making
4 supplemental security income payments under title
5 XVI, in the case of title XVI disability beneficiaries
6 who return to work. With respect to ticketed bene-
7 ficiaries who concurrently are entitled to benefits
8 under title II and eligible for payments under title
9 XVI who return to work, the Commissioner shall al-
10 locate the cost of payments to employment networks
11 to which the tickets of such beneficiaries have been
12 assigned among such Trust Funds and appropria-
13 tion, as appropriate.

14 “(2) ADMINISTRATIVE EXPENSES.—The costs
15 of administering this section (other than payments
16 to employment networks) shall be paid from
17 amounts made available for the administration of
18 title II and amounts made available for the adminis-
19 tration of title XVI, and shall be allocated among
20 those amounts as appropriate.

21 “(k) DEFINITIONS.—In this section:

22 “(1) COMMISSIONER.—The term ‘Commis-
23 sioner’ means the Commissioner of Social Security.

1 “(2) DISABLED BENEFICIARY.—The term ‘dis-
2 abled beneficiary’ means a title II disability bene-
3 ficiary or a title XVI disability beneficiary.

4 “(3) TITLE II DISABILITY BENEFICIARY.—The
5 term ‘title II disability beneficiary’ means an individ-
6 ual entitled to disability insurance benefits under
7 section 223 or to monthly insurance benefits under
8 section 202 based on such individual’s disability (as
9 defined in section 223(d)). An individual is a title II
10 disability beneficiary for each month for which such
11 individual is entitled to such benefits.

12 “(4) TITLE XVI DISABILITY BENEFICIARY.—
13 The term ‘title XVI disability beneficiary’ means an
14 individual eligible for supplemental security income
15 benefits under title XVI on the basis of blindness
16 (within the meaning of section 1614(a)(2)) or dis-
17 ability (within the meaning of section 1614(a)(3)).
18 An individual is a title XVI disability beneficiary for
19 each month for which such individual is eligible for
20 such benefits.

21 “(5) SUPPLEMENTAL SECURITY INCOME BENE-
22 FIT UNDER TITLE XVI.—The term ‘supplemental se-
23 curity income benefit under title XVI’ means a cash
24 benefit under section 1611 or 1619(a), and does not

1 include a State supplementary payment, adminis-
2 tered federally or otherwise.

3 “(l) REGULATIONS.—Not later than 1 year after the
4 date of enactment of this section, the Commissioner shall
5 prescribe such regulations as are necessary to carry out
6 the provisions of this section.

7 “(m) SUNSET OF PROGRAM.—The Program estab-
8 lished under this section shall terminate on September 30,
9 2004.”

10 (b) CONFORMING AMENDMENTS.—

11 (1) AMENDMENTS TO TITLE II.—

12 (A) Section 221(i) of the Social Security
13 Act (42 U.S.C. 421(i)) is amended by adding at
14 the end the following:

15 “(5) For suspension of reviews under this subsection
16 in the case of an individual using a ticket to work and
17 self-sufficiency, see section 1148(i).”

18 (B) Section 222(a) of the Social Security
19 Act (42 U.S.C. 422(a)) is repealed.

20 (C) Section 222(b) of the Social Security
21 Act (42 U.S.C. 422(b)) is repealed.

22 (D) Section 225(b)(1) of the Social Secu-
23 rity Act (42 U.S.C. 425(b)(1)) is amended by
24 striking “a program of vocational rehabilitation
25 services” and inserting “a program consisting

1 of the Ticket to Work and Self-Sufficiency Pro-
2 gram under section 1148 or another program of
3 vocational rehabilitation services, employment
4 services, or other support services”.

5 (2) AMENDMENTS TO TITLE XVI.—

6 (A) Section 1615(a) of the Social Security
7 Act (42 U.S.C. 1382d(a)) is amended to read
8 as follows:

9 “SEC. 1615. (a) In the case of any blind or disabled
10 individual who—

11 “(1) has not attained age 16, and

12 “(2) with respect to whom benefits are paid
13 under this title,

14 the Commissioner of Social Security shall make provision
15 for referral of such individual to the appropriate State
16 agency administering the State program under title V.”.

17 (B) Section 1615(c) of the Social Security
18 Act (42 U.S.C. 1382d(c)) is repealed.

19 (C) Section 1631(a)(6)(A) of the Social
20 Security Act (42 U.S.C. 1383(a)(6)(A)) is
21 amended by striking “a program of vocational
22 rehabilitation services” and inserting “a pro-
23 gram consisting of the Ticket to Work and Self-
24 Sufficiency Program under section 1148 or an-
25 other program of vocational rehabilitation serv-

1 ices, employment services, or other support
2 services”.

3 (D) Section 1633(c) of the Social Security
4 Act (42 U.S.C. 1383b(c)) is amended—

5 (i) by inserting “(1)” after “(c)”; and

6 (ii) by adding at the end the follow-

7 ing:

8 “(2) For suspension of continuing disability reviews
9 and other reviews under this title similar to reviews under
10 section 221 in the case of an individual using a ticket to
11 work and self-sufficiency, see section 1148(i).”.

12 (c) EFFECTIVE DATE.—Subject to subsection (d),
13 the amendments made by subsections (a) and (b) shall
14 take effect with the first month following 1 year after the
15 date of enactment of this Act.

16 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

17 (1) IN GENERAL.—Not later than 1 year after
18 the date of enactment of this Act, the Commissioner
19 of Social Security shall commence implementation of
20 the amendments made by this section (other than
21 paragraphs (1)(C) and (2)(B) of subsection (b)) in
22 graduated phases at phase-in sites selected by the
23 Commissioner. Such phase-in sites shall be selected
24 so as to ensure, prior to full implementation of the
25 Ticket to Work and Self-Sufficiency Program, the

1 development and refinement of referral processes,
2 payment systems, computer linkages, management
3 information systems, and administrative processes
4 necessary to provide for full implementation of such
5 amendments. Subsection (c) shall apply with respect
6 to paragraphs (1)(C) and (2)(B) of subsection (b)
7 without regard to this subsection.

8 (2) REQUIREMENTS.—Implementation of the
9 Program at each phase-in site shall be carried out
10 on a wide enough scale to permit a thorough evalua-
11 tion of the alternative methods under consideration,
12 so as to ensure that the most efficacious methods
13 are determined and in place for full implementation
14 of the Program on a timely basis.

15 (3) FULL IMPLEMENTATION.—The Commis-
16 sioner shall ensure that the ability to provide tickets
17 and services to individuals under the Program exists
18 in every State as soon as practicable on or after the
19 effective date specified in subsection (c) but not later
20 than 3 years after such date.

21 (4) ONGOING EVALUATION OF PROGRAM.—

22 (A) IN GENERAL.—The Commissioner
23 shall design and conduct a series of evaluations
24 to assess the cost-effectiveness of activities car-
25 ried out under this section and the amendments

1 made thereby, as well as the effects of this sec-
2 tion and the amendments made thereby on
3 work outcomes for beneficiaries receiving tickets
4 to work and self-sufficiency under the Program.

5 (B) CONSULTATION.—The Commissioner
6 shall design and carry out the series of evalua-
7 tions after receiving relevant advice from ex-
8 perts in the fields of disability, vocational reha-
9 bilitation, and program evaluation and individ-
10 uals using tickets to work and self-sufficiency
11 under the Program and consulting with the
12 Work Incentives Advisory Panel established
13 under section 202, the Comptroller General of
14 the United States, other agencies of the Federal
15 Government, and private organizations with ap-
16 propriate expertise.

17 (C) METHODOLOGY.—

18 (i) IMPLEMENTATION.—The Commis-
19 sioner, in consultation with the Work In-
20 centives Advisory Panel established under
21 section 202, shall ensure that plans for
22 evaluations and data collection methods
23 under the Program are appropriately de-
24 signed to obtain detailed employment infor-
25 mation.

1 (ii) SPECIFIC MATTERS TO BE AD-
2 DRESSED.—Each such evaluation shall ad-
3 dress (but is not limited to)—

4 (I) the annual cost (including net
5 cost) of the Program and the annual
6 cost (including net cost) that would
7 have been incurred in the absence of
8 the Program;

9 (II) the determinants of return to
10 work, including the characteristics of
11 beneficiaries in receipt of tickets
12 under the Program;

13 (III) the types of employment
14 services, vocational rehabilitation serv-
15 ices, and other support services fur-
16 nished to beneficiaries in receipt of
17 tickets under the Program who return
18 to work and to those who do not re-
19 turn to work;

20 (IV) the duration of employment
21 services, vocational rehabilitation serv-
22 ices, and other support services fur-
23 nished to beneficiaries in receipt of
24 tickets under the Program who return
25 to work and the duration of such serv-

1 ices furnished to those who do not re-
2 turn to work and the cost to employ-
3 ment networks of furnishing such
4 services;

5 (V) the employment outcomes,
6 including wages, occupations, benefits,
7 and hours worked, of beneficiaries
8 who return to work after receiving
9 tickets under the Program and those
10 who return to work without receiving
11 such tickets;

12 (VI) the characteristics of provid-
13 ers whose services are provided within
14 an employment network under the
15 Program;

16 (VII) the extent (if any) to which
17 employment networks display a great-
18 er willingness to provide services to
19 beneficiaries with a range of disabil-
20 ities;

21 (VIII) the characteristics (includ-
22 ing employment outcomes) of those
23 beneficiaries who receive services
24 under the outcome payment system
25 and of those beneficiaries who receive

1 services under the outcome-milestone
2 payment system;

3 (IX) measures of satisfaction
4 among beneficiaries in receipt of tick-
5 ets under the Program; and

6 (X) reasons for (including com-
7 ments solicited from beneficiaries re-
8 garding) their choice not to use their
9 tickets or their inability to return to
10 work despite the use of their tickets.

11 (D) PERIODIC EVALUATION REPORTS.—

12 Following the close of the third and fifth fiscal
13 years ending after the effective date under sub-
14 section (c), and prior to the close of the seventh
15 fiscal year ending after such date, the Commis-
16 sioner shall transmit to the Committee on Ways
17 and Means of the House of Representatives and
18 the Committee on Finance of the Senate a re-
19 port containing the Commissioner's evaluation
20 of the progress of activities conducted under the
21 provisions of this section and the amendments
22 made thereby. Each such report shall set forth
23 the Commissioner's evaluation of the extent to
24 which the Program has been successful and the
25 Commissioner's conclusions on whether or how

1 the Program should be modified. Each such re-
2 port shall include such data, findings, materials,
3 and recommendations as the Commissioner may
4 consider appropriate.

5 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
6 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
7 AMENDMENTS IN SUCH STATE.—

8 (A) IN GENERAL.—In the case of any
9 State in which the amendments made by sub-
10 section (a) have not been fully implemented
11 pursuant to this subsection, the Commissioner
12 shall determine by regulation the extent to
13 which—

14 (i) the requirement under section
15 222(a) of the Social Security Act for
16 prompt referrals to a State agency, and

17 (ii) the authority of the Commissioner
18 under section 222(d)(2) of the Social Secu-
19 rity Act to provide vocational rehabilitation
20 services in such State by agreement or
21 contract with other public or private agen-
22 cies, organizations, institutions, or individ-
23 uals,

24 shall apply in such State.

1 (B) EXISTING AGREEMENTS.—Nothing in
2 subparagraph (A) or the amendments made by
3 subsection (a) shall be construed to limit, im-
4 pede, or otherwise affect any agreement entered
5 into pursuant to section 222(d)(2) of the Social
6 Security Act before the date of enactment of
7 this Act with respect to services provided pursu-
8 ant to such agreement to beneficiaries receiving
9 services under such agreement as of such date,
10 except with respect to services (if any) to be
11 provided after 3 years after the effective date
12 provided in subsection (c).

13 (e) SPECIFIC REGULATIONS REQUIRED.—

14 (1) IN GENERAL.—The Commissioner of Social
15 Security shall prescribe such regulations as are nec-
16 essary to implement the amendments made by this
17 section.

18 (2) SPECIFIC MATTERS TO BE INCLUDED IN
19 REGULATIONS.—The matters which shall be ad-
20 dressed in such regulations shall include—

21 (A) the form and manner in which tickets
22 to work and self-sufficiency may be distributed
23 to beneficiaries pursuant to section 1148(b)(1)
24 of the Social Security Act;

1 (B) the format and wording of such tick-
2 ets, which shall incorporate by reference any
3 contractual terms governing service by employ-
4 ment networks under the Program;

5 (C) the form and manner in which State
6 agencies may elect participation in the Ticket to
7 Work and Self-Sufficiency Program (and revoke
8 such an election) pursuant to section
9 1148(c)(1) of the Social Security Act and provi-
10 sion for periodic opportunities for exercising
11 such elections (and revocations);

12 (D) the status of State agencies under sec-
13 tion 1148(c)(1) at the time that State agencies
14 exercise elections (and revocations) under that
15 section;

16 (E) the terms of agreements to be entered
17 into with program managers pursuant to sec-
18 tion 1148(d) of the Social Security Act,
19 including—

20 (i) the terms by which program man-
21 agers are precluded from direct participa-
22 tion in the delivery of services pursuant to
23 section 1148(d)(3) of the Social Security
24 Act;

1 (ii) standards which must be met by
2 quality assurance measures referred to in
3 paragraph (6) of section 1148(d) and
4 methods of recruitment of employment net-
5 works utilized pursuant to paragraph (2)
6 of section 1148(e); and

7 (iii) the format under which dispute
8 resolution will operate under section
9 1148(d)(7);

10 (F) the terms of agreements to be entered
11 into with employment networks pursuant to sec-
12 tion 1148(d)(4) of the Social Security Act,
13 including—

14 (i) the manner in which service areas
15 are specified pursuant to section
16 1148(f)(2)(A) of the Social Security Act;

17 (ii) the general selection criteria and
18 the specific selection criteria which are ap-
19 plicable to employment networks under
20 section 1148(f)(1)(C) of the Social Secu-
21 rity Act in selecting service providers;

22 (iii) specific requirements relating to
23 annual financial reporting by employment
24 networks pursuant to section 1148(f)(3) of
25 the Social Security Act; and

1 (iv) the national model to which peri-
2 odic outcomes reporting by employment
3 networks must conform under section
4 1148(f)(4) of the Social Security Act;

5 (G) standards which must be met by indi-
6 vidual work plans pursuant to section 1148(g)
7 of the Social Security Act;

8 (H) standards which must be met by pay-
9 ment systems required under section 1148(h) of
10 the Social Security Act, including—

11 (i) the form and manner in which
12 elections by employment networks of pay-
13 ment systems are to be exercised pursuant
14 to section 1148(h)(1)(A);

15 (ii) the terms which must be met by
16 an outcome payment system under section
17 1148(h)(2);

18 (iii) the terms which must be met by
19 an outcome-milestone payment system
20 under section 1148(h)(3);

21 (iv) any revision of the percentage
22 specified in paragraph (2)(C) of section
23 1148(h) of the Social Security Act or the
24 period of time specified in paragraph
25 (4)(B) of such section 1148(h); and

1 (v) annual oversight procedures for
2 such systems; and

3 (I) procedures for effective oversight of the
4 Program by the Commissioner of Social Secu-
5 rity, including periodic reviews and reporting
6 requirements.

7 **SEC. 202. WORK INCENTIVES ADVISORY PANEL.**

8 (a) ESTABLISHMENT.—There is established within
9 the Social Security Administration a panel to be known
10 as the “Work Incentives Advisory Panel” (in this section
11 referred to as the “Panel”).

12 (b) DUTIES OF PANEL.—It shall be the duty of the
13 Panel to—

14 (1) advise the Secretary of Health and Human
15 Services, the Secretary of Labor, the Secretary of
16 Education, and the Commissioner of Social Security
17 on issues related to work incentives programs, plan-
18 ning, and assistance for individuals with disabilities,
19 including work incentive provisions under titles II,
20 XI, XVI, XVIII, and XIX of the Social Security Act
21 (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq.,
22 1395 et seq., 1396 et seq.); and

23 (2) with respect to the Ticket to Work and Self-
24 Sufficiency Program established under section 1148
25 of the Social Security Act—

1 (A) advise the Commissioner of Social Se-
2 curity with respect to establishing phase-in sites
3 for such Program and fully implementing the
4 Program thereafter, the refinement of access of
5 disabled beneficiaries to employment networks,
6 payment systems, and management information
7 systems, and advise the Commissioner whether
8 such measures are being taken to the extent
9 necessary to ensure the success of the Program;

10 (B) advise the Commissioner regarding the
11 most effective designs for research and dem-
12 onstration projects associated with the Program
13 or conducted pursuant to section 302;

14 (C) advise the Commissioner on the devel-
15 opment of performance measurements relating
16 to quality assurance under section 1148(d)(6)
17 of the Social Security Act; and

18 (D) furnish progress reports on the Pro-
19 gram to the Commissioner and each House of
20 Congress.

21 (c) MEMBERSHIP.—

22 (1) NUMBER AND APPOINTMENT.—The Panel
23 shall be composed of 12 members appointed by the
24 Commissioner of Social Security in consultation with
25 the Speaker of the House of Representatives, the

1 Minority Leader of the House of Representatives,
2 the Majority Leader of the Senate, and the Minority
3 Leader of the Senate.

4 (2) REPRESENTATION.—All members appointed
5 to the Panel shall have experience or expert knowl-
6 edge in the fields of, or related to, work incentive
7 programs, employment services, vocational rehabili-
8 tation services, health care services, and other sup-
9 port services for individuals with disabilities. At least
10 7 members of the Panel shall be individuals with dis-
11 abilities or representatives of individuals with dis-
12 abilities, except that, of those 7 members, at least 5
13 members shall be current or former title II disability
14 beneficiaries or title XVI disability beneficiaries (as
15 such terms are defined in section 1148(k) of the So-
16 cial Security Act (as added by section 201(a) of this
17 Act)).

18 (3) TERMS.—

19 (A) IN GENERAL.—Each member shall be
20 appointed for a term of 4 years (or, if less, for
21 the remaining life of the Panel), except as pro-
22 vided in subparagraphs (B) and (C). The initial
23 members shall be appointed not later than 90
24 days after the date of enactment of this Act.

1 (B) TERMS OF INITIAL APPOINTEES.—As
2 designated by the Commissioner at the time of
3 appointment, of the members first appointed—

4 (i) 6 of the members appointed under
5 paragraph (1) shall be appointed for a
6 term of 2 years, and

7 (ii) 6 of the members appointed under
8 paragraph (1) shall be appointed for a
9 term of 4 years.

10 (C) VACANCIES.—Any member appointed
11 to fill a vacancy occurring before the expiration
12 of the term for which the member's predecessor
13 was appointed shall be appointed only for the
14 remainder of that term. A member may serve
15 after the expiration of that member's term until
16 a successor has taken office. A vacancy in the
17 Panel shall be filled in the manner in which the
18 original appointment was made.

19 (4) BASIC PAY.—Members shall each be paid at
20 a rate, and in a manner, that is consistent with
21 guidelines established under section 7 of the Federal
22 Advisory Committee Act (5 U.S.C. App.).

23 (5) TRAVEL EXPENSES.—Each member shall
24 receive travel expenses, including per diem in lieu of

1 subsistence, in accordance with sections 5702 and
2 5703 of title 5, United States Code.

3 (6) QUORUM.—Eight members of the Panel
4 shall constitute a quorum but a lesser number may
5 hold hearings.

6 (7) CHAIRPERSON.—The Chairperson of the
7 Panel shall be designated by the Commissioner. The
8 term of office of the Chairperson shall be 4 years.

9 (8) MEETINGS.—The Panel shall meet at least
10 quarterly and at other times at the call of the Chair-
11 person or a majority of its members.

12 (d) DIRECTOR AND STAFF OF PANEL; EXPERTS AND
13 CONSULTANTS.—

14 (1) DIRECTOR.—The Panel shall have a Direc-
15 tor who shall be appointed by the Commissioner and
16 paid at a rate, and in a manner, that is consistent
17 with guidelines established under section 7 of the
18 Federal Advisory Committee Act (5 U.S.C. App.).

19 (2) STAFF.—Subject to rules prescribed by the
20 Commissioner, the Director may appoint and fix the
21 pay of additional personnel as the Director considers
22 appropriate.

23 (3) EXPERTS AND CONSULTANTS.—Subject to
24 rules prescribed by the Commissioner, the Director

1 may procure temporary and intermittent services
2 under section 3109(b) of title 5, United States Code.

3 (4) STAFF OF FEDERAL AGENCIES.—Upon re-
4 quest of the Panel, the head of any Federal depart-
5 ment or agency may detail, on a reimbursable basis,
6 any of the personnel of that department or agency
7 to the Panel to assist it in carrying out its duties
8 under this section.

9 (e) POWERS OF PANEL.—

10 (1) HEARINGS AND SESSIONS.—The Panel may,
11 for the purpose of carrying out its duties under this
12 section, hold such hearings, sit and act at such times
13 and places, and take such testimony and evidence as
14 the Panel considers appropriate.

15 (2) POWERS OF MEMBERS AND AGENTS.—Any
16 member or agent of the Panel may, if authorized by
17 the Panel, take any action which the Panel is au-
18 thorized to take by this section.

19 (3) MAILS.—The Panel may use the United
20 States mails in the same manner and under the
21 same conditions as other departments and agencies
22 of the United States.

23 (f) REPORTS.—

1 (1) INTERIM REPORTS.—The Panel shall sub-
2 mit to the President and Congress interim reports at
3 least annually.

4 (2) FINAL REPORT.—The Panel shall transmit
5 a final report to the President and Congress not
6 later than 8 years after the date of enactment of
7 this Act. The final report shall contain a detailed
8 statement of the findings and conclusions of the
9 Panel, together with its recommendations for legisla-
10 tion and administrative actions which the Panel con-
11 siders appropriate.

12 (g) TERMINATION.—The Panel shall terminate 30
13 days after the date of the submission of its final report
14 under subsection (f)(2).

15 (h) ALLOCATION OF COSTS.—The costs of carrying
16 out this section shall be paid from amounts made available
17 for the administration of title II of the Social Security Act
18 (42 U.S.C. 401 et seq.) and amounts made available for
19 the administration of title XVI of that Act (42 U.S.C.
20 1381 et seq.), and shall be allocated among those amounts
21 as appropriate.

1 **Subtitle B—Elimination of Work**
2 **Disincentives**

3 **SEC. 211. PROHIBITION ON USING WORK ACTIVITY AS A**
4 **BASIS FOR REVIEW OF AN INDIVIDUAL’S DIS-**
5 **ABLED STATUS.**

6 Section 221 of the Social Security Act (42 U.S.C.
7 421) is amended by adding at the end the following:

8 “(m)(1) In any case where an individual entitled to
9 disability insurance benefits under section 223 or to
10 monthly insurance benefits under section 202 based on
11 such individual’s disability (as defined in section 223(d))
12 has received such benefits for at least 24 months—

13 “(A) no continuing disability review conducted
14 by the Commissioner may be scheduled for the indi-
15 vidual solely as a result of the individual’s work ac-
16 tivity;

17 “(B) no work activity engaged in by the individ-
18 ual may be used as evidence that the individual is
19 no longer disabled; and

20 “(C) no cessation of work activity by the indi-
21 vidual may give rise to a presumption that the indi-
22 vidual is unable to engage in work.

23 “(2) An individual to which paragraph (1) applies
24 shall continue to be subject to—

1 “(A) continuing disability reviews on a regularly
2 scheduled basis that is not triggered by work; and

3 “(B) termination of benefits under this title in
4 the event that the individual has earnings that ex-
5 ceed the level of earnings established by the Com-
6 missioner to represent substantial gainful activity.”.

7 **SEC. 212. EXPEDITED ELIGIBILITY DETERMINATIONS FOR**
8 **APPLICATIONS OF FORMER LONG-TERM**
9 **BENEFICIARIES THAT COMPLETED AN EX-**
10 **TENDED PERIOD OF ELIGIBILITY.**

11 Section 223 of the Social Security Act (42 U.S.C.
12 423) is amended by adding at the end the following:

13 “Expedited Eligibility Determinations for Applications of
14 Former Long-Term Beneficiaries That Completed
15 an Extended Period of Eligibility

16 “(j) The Commissioner of Social Security shall estab-
17 lish a process for providing an expedited eligibility deter-
18 mination in the case of an application for disability insur-
19 ance benefits under this section, or for monthly insurance
20 benefits under section 202 based on another individual’s
21 disability, that is filed by an individual that previously—

22 “(1) received such benefits for at least 24
23 months; and

1 “(2) engaged in substantial gainful activity dur-
2 ing the 36-month period following the end of a trial
3 work period under section 222(c).”.

4 **Subtitle C—Work Incentives**
5 **Planning, Assistance, and Outreach**

6 **SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.**

7 Part A of title XI of the Social Security Act (42
8 U.S.C. 1301 et seq.), as amended by section 201, is
9 amended by adding after section 1148 the following:

10 “WORK INCENTIVES OUTREACH PROGRAM

11 “SEC. 1149. (a) ESTABLISHMENT.—

12 “(1) IN GENERAL.—The Commissioner, in con-
13 sultation with the Work Incentives Advisory Panel
14 established under section 202 of the Work Incentives
15 Improvement Act of 1999, shall establish a commu-
16 nity-based work incentives planning and assistance
17 program for the purpose of disseminating accurate
18 information to disabled beneficiaries on work incen-
19 tives programs and issues related to such programs.

20 “(2) GRANTS, COOPERATIVE AGREEMENTS,
21 CONTRACTS, AND OUTREACH.—Under the program
22 established under this section, the Commissioner
23 shall—

24 “(A) establish a competitive program of
25 grants, cooperative agreements, or contracts to
26 provide benefits planning and assistance, in-

1 including information on the availability of pro-
2 tection and advocacy services, to disabled bene-
3 ficiaries, including individuals participating in
4 the Ticket to Work and Self-Sufficiency Pro-
5 gram established under section 1148, the pro-
6 gram established under section 1619, and other
7 programs that are designed to encourage dis-
8 abled beneficiaries to work;

9 “(B) conduct directly, or through grants,
10 cooperative agreements, or contracts, ongoing
11 outreach efforts to disabled beneficiaries (and
12 to the families of such beneficiaries) who are
13 potentially eligible to participate in Federal or
14 State work incentive programs that are de-
15 signed to assist disabled beneficiaries to work,
16 including—

17 “(i) preparing and disseminating in-
18 formation explaining such programs; and

19 “(ii) working in cooperation with
20 other Federal, State, and private agencies
21 and nonprofit organizations that serve dis-
22 abled beneficiaries, and with agencies and
23 organizations that focus on vocational re-
24 habilitation and work-related training and
25 counseling;

1 “(C) establish a corps of trained, acces-
2 sible, and responsive work incentives specialists
3 within the Social Security Administration who
4 will specialize in disability work incentives
5 under titles II and XVI for the purpose of dis-
6 seminating accurate information with respect to
7 inquiries and issues relating to work incentives
8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
11 and XVI; and

12 “(iii) individuals or entities awarded
13 grants under subparagraphs (A) or (B);
14 and

15 “(D) provide—

16 “(i) training for the work incentive
17 specialists and the individuals providing
18 planning assistance described in subpara-
19 graph (C); and

20 “(ii) technical assistance to organiza-
21 tions and entities that are designed to en-
22 courage disabled beneficiaries to return to
23 work.

24 “(3) COORDINATION WITH OTHER PRO-
25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), and other serv-
15 ices.

16 “(b) CONDITIONS.—

17 “(1) SELECTION OF ENTITIES.—

18 “(A) APPLICATION.—An entity shall sub-
19 mit an application for a grant, cooperative
20 agreement, or contract to provide benefits plan-
21 ning and assistance to the Commissioner at
22 such time, in such manner, and containing such
23 information as the Commissioner may deter-
24 mine is necessary to meet the requirements of
25 this section.

1 “(B) STATEWIDENESS.—The Commis-
2 sioner shall ensure that the planning, assist-
3 ance, and information described in paragraph
4 (2) shall be available on a statewide basis.

5 “(C) ELIGIBILITY OF STATES AND PRI-
6 VATE ORGANIZATIONS.—

7 “(i) IN GENERAL.—The Commissioner
8 may award a grant, cooperative agreement,
9 or contract under this section to a State or
10 a private agency or organization (other
11 than Social Security Administration Field
12 Offices and the State agency administering
13 the State medicaid program under title
14 XIX, including any agency or entity de-
15 scribed in clause (ii), that the Commis-
16 sioner determines is qualified to provide
17 the planning, assistance, and information
18 described in paragraph (2)).

19 “(ii) AGENCIES AND ENTITIES DE-
20 SCRIBED.—The agencies and entities de-
21 scribed in this clause are the following:

22 “(I) Any public or private agency
23 or organization (including Centers for
24 Independent Living established under
25 title VII of the Rehabilitation Act of

1 1973, protection and advocacy organi-
2 zations, client assistance programs es-
3 tablished in accordance with section
4 112 of the Rehabilitation Act of 1973,
5 and State Developmental Disabilities
6 Councils established in accordance
7 with section 124 of the Developmental
8 Disabilities Assistance and Bill of
9 Rights Act (42 U.S.C. 6024)) that the
10 Commissioner determines satisfies the
11 requirements of this section.

12 “(II) The State agency admin-
13 istering the State program funded
14 under part A of title IV.

15 “(D) EXCLUSION FOR CONFLICT OF IN-
16 TEREST.—The Commissioner may not award a
17 grant, cooperative agreement, or contract under
18 this section to any entity that the Commissioner
19 determines would have a conflict of interest if
20 the entity were to receive a grant, cooperative
21 agreement, or contract under this section.

22 “(2) SERVICES PROVIDED.—A recipient of a
23 grant, cooperative agreement, or contract to provide
24 benefits planning and assistance shall select individ-
25 uals who will act as planners and provide informa-

1 tion, guidance, and planning to disabled beneficiaries
2 on the—

3 “(A) availability and interrelation of any
4 Federal or State work incentives programs de-
5 signed to assist disabled beneficiaries that the
6 individual may be eligible to participate in;

7 “(B) adequacy of any health benefits cov-
8 erage that may be offered by an employer of
9 the individual and the extent to which other
10 health benefits coverage may be available to the
11 individual; and

12 “(C) availability of protection and advo-
13 cacy services for disabled beneficiaries and how
14 to access such services.

15 “(3) AMOUNT OF GRANTS, COOPERATIVE
16 AGREEMENTS, OR CONTRACTS.—

17 “(A) BASED ON POPULATION OF DIS-
18 ABLED BENEFICIARIES.—Subject to subpara-
19 graph (B), the Commissioner shall award a
20 grant, cooperative agreement, or contract under
21 this section to an entity based on the percent-
22 age of the population of the State where the en-
23 tity is located who are disabled beneficiaries.

24 “(B) LIMITATIONS.—

1 “(i) PER GRANT.—No entity shall re-
2 ceive a grant, cooperative agreement, or
3 contract under this section for a fiscal year
4 that is less than \$50,000 or more than
5 \$300,000.

6 “(ii) TOTAL AMOUNT FOR ALL
7 GRANTS, COOPERATIVE AGREEMENTS, AND
8 CONTRACTS.—The total amount of all
9 grants, cooperative agreements, and con-
10 tracts awarded under this section for a fis-
11 cal year may not exceed \$23,000,000.

12 “(4) ALLOCATION OF COSTS.—The costs of car-
13 rying out this section shall be paid from amounts
14 made available for the administration of title II and
15 amounts made available for the administration of
16 title XVI, and shall be allocated among those
17 amounts as appropriate.

18 “(c) DEFINITIONS.—In this section:

19 “(1) COMMISSIONER.—The term ‘Commis-
20 sioner’ means the Commissioner of Social Security.

21 “(2) DISABLED BENEFICIARY.—The term ‘dis-
22 abled beneficiary’ has the meaning given that term
23 in section 1148(k)(2).”.

1 **SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSIST-**
2 **ANCE TO DISABLED BENEFICIARIES.**

3 Part A of title XI of the Social Security Act (42
4 U.S.C. 1301 et seq.), as amended by section 221, is
5 amended by adding after section 1149 the following:

6 “STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO
7 DISABLED BENEFICIARIES

8 “SEC. 1150. (a) IN GENERAL.—Subject to subsection
9 (c), the Commissioner may make payments in each State
10 to the protection and advocacy system established pursu-
11 ant to part C of title I of the Developmental Disabilities
12 Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.)
13 for the purpose of providing services to disabled bene-
14 ficiaries.

15 “(b) SERVICES PROVIDED.—

16 “(1) IN GENERAL.—Subject to paragraph (2),
17 services provided to disabled beneficiaries pursuant
18 to a payment made under this section may include—

19 “(A) information and advice about obtain-
20 ing vocational rehabilitation and employment
21 services; and

22 “(B) advocacy or other services that a dis-
23 abled beneficiary may need to secure or regain
24 gainful employment.

25 “(c) APPLICATION.—In order to receive payments
26 under this section, a protection and advocacy system shall

1 submit an application to the Commissioner, at such time,
2 in such form and manner, and accompanied by such infor-
3 mation and assurances as the Commissioner may require.

4 “(d) AMOUNT OF PAYMENTS.—

5 “(1) IN GENERAL.—Subject to the amount ap-
6 propriated for a fiscal year for making payments
7 under this section, a protection and advocacy system
8 shall not be paid an amount that is less than—

9 “(A) in the case of a protection and advo-
10 cacy system located in a State (including the
11 District of Columbia and Puerto Rico) other
12 than Guam, American Samoa, the United
13 States Virgin Islands, and the Commonwealth
14 of the Northern Mariana Islands, the greater
15 of—

16 “(i) \$100,000; or

17 “(ii) $\frac{1}{3}$ of 1 percent of the amount
18 available for payments under this section;
19 and

20 “(B) in the case of a protection and advo-
21 cacy system located in Guam, American Samoa,
22 the United States Virgin Islands, and the Com-
23 monwealth of the Northern Mariana Islands,
24 \$50,000.

1 “(2) INFLATION ADJUSTMENT.—For each fiscal
2 year in which the total amount appropriated to carry
3 out this section exceeds the total amount appro-
4 priated to carry out this section in the preceding fis-
5 cal year, the Commissioner shall increase each mini-
6 mum payment under subparagraphs (A) and (B) of
7 paragraph (1) by a percentage equal to the percent-
8 age increase in the total amount appropriated to
9 carry out this section between the preceding fiscal
10 year and the fiscal year involved.

11 “(e) ANNUAL REPORT.—Each protection and advo-
12 cacy system that receives a payment under this section
13 shall submit an annual report to the Commissioner and
14 the Work Incentives Advisory Panel established under sec-
15 tion 202 of the Work Incentives Improvement Act of 1999
16 on the services provided to individuals by the system.

17 “(f) FUNDING.—

18 “(1) ALLOCATION OF PAYMENTS.—Payments
19 under this section shall be made from amounts made
20 available for the administration of title II and
21 amounts made available for the administration of
22 title XVI, and shall be allocated among those
23 amounts as appropriate.

24 “(2) CARRYOVER.—Any amounts allotted for
25 payment to a protection and advocacy system under

1 this section for a fiscal year shall remain available
 2 for payment to or on behalf of the protection and
 3 advocacy system until the end of the succeeding fis-
 4 cal year.

5 “(g) DEFINITIONS.—In this section:

6 “(1) COMMISSIONER.—The term ‘Commis-
 7 sioner’ means the Commissioner of Social Security.

8 “(2) DISABLED BENEFICIARY.—The term ‘dis-
 9 abled beneficiary’ has the meaning given that term
 10 in section 1148(k)(2).

11 “(3) PROTECTION AND ADVOCACY SYSTEM.—
 12 The term ‘protection and advocacy system’ means a
 13 protection and advocacy system established pursuant
 14 to part C of title I of the Developmental Disabilities
 15 Assistance and Bill of Rights Act (42 U.S.C. 6041
 16 et seq.).”

17 **TITLE III—DEMONSTRATION**
 18 **PROJECTS AND STUDIES**

19 **SEC. 301. EXTENSION OF DISABILITY INSURANCE PRO-**
 20 **GRAM DEMONSTRATION PROJECT AUTHOR-**
 21 **ITY.**

22 Section 505 of the Social Security Disability Amend-
 23 ments of 1980 (42 U.S.C. 1310 note) is amended—

24 (1) in subsection (a)(1)—

1 (A) by striking “and (B)” and inserting “,
2 (B)”;

3 (B) by inserting “, and (C) implementing
4 sliding scale benefit offsets using variations in
5 the amount of the offset as a proportion of
6 earned income, the duration of the offset pe-
7 riod, and the method of determining the
8 amount of income earned by the beneficiaries,
9 and using state-of-the-art information tech-
10 nology and electronic funds transfer technology
11 to streamline the reporting of data and the im-
12 plementation of the offsets, and developing and
13 making available to beneficiaries, their families,
14 guardians, and advocates, through the Internet
15 information regarding work incentives and as-
16 sistance for beneficiaries to make informed deci-
17 sions regarding work,” after “rehabilitation),”;
18 and

19 (C) by adding at the end the following:
20 “The Commissioner may expand the scope of
21 any such demonstration project to include any
22 group of applicants for benefits under such pro-
23 gram with impairments which may reasonably
24 be presumed to be disabling for purposes of
25 such demonstration project, and may limit any

1 such demonstration project to any such group
 2 of applicants, subject to the terms of such dem-
 3 onstration project which shall define the extent
 4 of any such presumption.”;

5 (2) in subsection (a)(3), by striking “June 10,
 6 1996” and inserting “June 10, 2001”;

7 (3) in subsection (a)(4), by inserting “and on or
 8 before October 1, 2000,” after “1995,”; and

9 (4) in subsection (c), by striking “October 1,
 10 1996” and inserting “October 1, 2002”.

11 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
 12 **DUCTIONS IN DISABILITY INSURANCE BENE-**
 13 **FITS BASED ON EARNINGS.**

14 (a) **AUTHORITY.**—The Commissioner of Social Secu-
 15 rity shall conduct demonstration projects for the purpose
 16 of evaluating, through the collection of data, a program
 17 for title II disability beneficiaries (as defined in section
 18 1148(k)(3) of the Social Security Act) under which each
 19 \$1 of benefits payable under section 223, or under section
 20 202 based on the beneficiary’s disability, is reduced for
 21 each \$2 of such beneficiary’s earnings that is above a level
 22 to be determined by the Commissioner. Such projects shall
 23 be conducted at a number of localities which the Commis-
 24 sioner shall determine is sufficient to adequately evaluate
 25 the appropriateness of national implementation of such a

1 program. Such projects shall identify reductions in Fed-
2 eral expenditures that may result from the permanent im-
3 plementation of such a program.

4 (b) SCOPE AND SCALE AND MATTERS TO BE DETER-
5 MINED.—

6 (1) IN GENERAL.—The demonstration projects
7 developed under subsection (a) shall be of sufficient
8 duration, shall be of sufficient scope, and shall be
9 carried out on a wide enough scale to permit a thor-
10 ough evaluation of the project to determine—

11 (A) the effects, if any, of induced entry
12 into the project and reduced exit from the
13 project;

14 (B) the extent, if any, to which the project
15 being tested is affected by whether it is in oper-
16 ation in a locality within an area under the ad-
17 ministration of the Ticket to Work and Self-
18 Sufficiency Program established under section
19 1148 of the Social Security Act; and

20 (C) the savings that accrue to the Federal
21 Old-Age and Survivors Insurance Trust Fund,
22 the Federal Disability Insurance Trust Fund,
23 and other Federal programs under the project
24 being tested.

1 The Commissioner shall take into account advice
2 provided by the Work Incentives Advisory Panel pur-
3 suant to section 202(b)(2)(B).

4 (2) ADDITIONAL MATTERS.—The Commissioner
5 shall also determine with respect to each project—

6 (A) the annual cost (including net cost) of
7 the project and the annual cost (including net
8 cost) that would have been incurred in the ab-
9 sence of the project;

10 (B) the determinants of return to work, in-
11 cluding the characteristics of the beneficiaries
12 who participate in the project; and

13 (C) the employment outcomes, including
14 wages, occupations, benefits, and hours worked,
15 of beneficiaries who return to work as a result
16 of participation in the project.

17 The Commissioner may include within the matters
18 evaluated under the project the merits of trial work
19 periods and periods of extended eligibility.

20 (c) WAIVERS.—The Commissioner may waive compli-
21 ance with the benefit provisions of title II of the Social
22 Security Act, and the Secretary of Health and Human
23 Services may waive compliance with the benefit require-
24 ments of title XVIII of that Act, insofar as is necessary
25 for a thorough evaluation of the alternative methods under

1 consideration. No such project shall be actually placed in
2 operation unless at least 90 days prior thereto a written
3 report, prepared for purposes of notification and informa-
4 tion only and containing a full and complete description
5 thereof, has been transmitted by the Commissioner to the
6 Committee on Ways and Means of the House of Rep-
7 resentatives and to the Committee on Finance of the Sen-
8 ate. Periodic reports on the progress of such projects shall
9 be submitted by the Commissioner to such committees.
10 When appropriate, such reports shall include detailed rec-
11 ommendations for changes in administration or law, or
12 both, to carry out the objectives stated in subsection (a).

13 (d) INTERIM REPORTS.—Not later than 2 years after
14 the date of enactment of this Act, and annually thereafter,
15 the Commissioner of Social Security shall submit to Con-
16 gress an interim report on the progress of the demonstra-
17 tion projects carried out under this subsection together
18 with any related data and materials which the Commis-
19 sioner of Social Security may consider appropriate.

20 (e) FINAL REPORT.—The Commissioner of Social Se-
21 curity shall submit to Congress a final report with respect
22 to all demonstration projects carried out under this section
23 not later than 1 year after their completion.

24 (f) EXPENDITURES.—Expenditures made for dem-
25 onstration projects under this section shall be made from

1 the Federal Disability Insurance Trust Fund and the Fed-
 2 eral Old-Age and Survivors Insurance Trust Fund, as de-
 3 termined appropriate by the Commissioner of Social Secu-
 4 rity, and from the Federal Hospital Insurance Trust Fund
 5 and the Federal Supplementary Medical Insurance Trust
 6 Fund, as determined appropriate by the Secretary of
 7 Health and Human Services, to the extent provided in ad-
 8 vance in appropriation Acts.

9 **SEC. 303. SENSE OF CONGRESS REGARDING ADDITIONAL**
 10 **DEMONSTRATION PROJECTS.**

11 It is the sense of Congress that the Commissioner
 12 of Social Security and the Secretary of Health and Human
 13 Services should establish additional demonstration
 14 projects to assist individuals with disabilities to engage in
 15 work.

16 **SEC. 304. STUDIES AND REPORTS.**

17 (a) STUDY BY GENERAL ACCOUNTING OFFICE OF
 18 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
 19 TIVES.—

20 (1) STUDY.—As soon as practicable after the
 21 date of enactment of this Act, the Comptroller Gen-
 22 eral of the United States shall undertake a study to
 23 assess existing tax credits and other disability-relat-
 24 ed employment incentives under the Americans with
 25 Disabilities Act of 1990 and other Federal laws. In

1 such study, the Comptroller General shall specifically
2 address the extent to which such credits and other
3 incentives would encourage employers to hire and re-
4 tain individuals with disabilities.

5 (2) REPORT.—Not later than 3 years after the
6 date of enactment of this Act, the Comptroller Gen-
7 eral shall transmit to the Committee on Ways and
8 Means of the House of Representatives and the
9 Committee on Finance of the Senate a written re-
10 port presenting the results of the Comptroller Gen-
11 eral’s study conducted pursuant to this subsection,
12 together with such recommendations for legislative
13 or administrative changes as the Comptroller Gen-
14 eral determines are appropriate.

15 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
16 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
17 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
18 ING CONCURRENT ENTITLEMENT.—

19 (1) STUDY.—As soon as practicable after the
20 date of enactment of this Act, the Comptroller Gen-
21 eral of the United States shall undertake a study to
22 evaluate the coordination under current law of the
23 disability insurance program under title II of the So-
24 cial Security Act and the supplemental security in-
25 come program under title XVI of that Act, as such

1 programs relate to individuals entering or leaving
2 concurrent entitlement under such programs. In
3 such study, the Comptroller General shall specifically
4 address the effectiveness of work incentives under
5 such programs with respect to such individuals and
6 the effectiveness of coverage of such individuals
7 under titles XVIII and XIX of the Social Security
8 Act.

9 (2) REPORT.—Not later than 3 years after the
10 date of enactment of this Act, the Comptroller Gen-
11 eral shall transmit to the Committee on Ways and
12 Means of the House of Representatives and the
13 Committee on Finance of the Senate a written re-
14 port presenting the results of the Comptroller Gen-
15 eral’s study conducted pursuant to this subsection,
16 together with such recommendations for legislative
17 or administrative changes as the Comptroller Gen-
18 eral determines are appropriate.

19 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
20 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
21 LIMIT ON RETURN TO WORK.—

22 (1) STUDY.—As soon as practicable after the
23 date of enactment of this Act, the Comptroller Gen-
24 eral of the United States shall undertake a study of
25 the substantial gainful activity level applicable as of

1 that date to recipients of benefits under section 223
2 of the Social Security Act (42 U.S.C. 423) and
3 under section 202 of that Act (42 U.S.C. 402) on
4 the basis of a recipient having a disability, and the
5 effect of such level as a disincentive for those recipi-
6 ents to return to work. In the study, the Comptroller
7 General also shall address the merits of increasing
8 the substantial gainful activity level applicable to
9 such recipients of benefits and the rationale for not
10 yearly indexing that level to inflation.

11 (2) REPORT.—Not later than 2 years after the
12 date of enactment of this Act, the Comptroller Gen-
13 eral shall transmit to the Committee on Ways and
14 Means of the House of Representatives and the
15 Committee on Finance of the Senate a written re-
16 port presenting the results of the Comptroller Gen-
17 eral's study conducted pursuant to this subsection,
18 together with such recommendations for legislative
19 or administrative changes as the Comptroller Gen-
20 eral determines are appropriate.

1 **TITLE IV—TECHNICAL**
2 **AMENDMENTS**

3 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
4 **ADDICTS AND ALCOHOLICS.**

5 (a) CLARIFICATION RELATING TO THE EFFECTIVE
6 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
7 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
8 tion 105(a)(5) of the Contract with America Advancement
9 Act of 1996 (Public Law 104–121; 110 Stat. 853) is
10 amended—

11 (1) in subparagraph (A), by striking “by the
12 Commissioner of Social Security” and “by the Com-
13 missioner”; and

14 (2) by adding at the end the following:

15 “(D) For purposes of this paragraph, an
16 individual’s claim, with respect to benefits
17 under title II of the Social Security Act based
18 on disability, which has been denied in whole
19 before the date of enactment of this Act, may
20 not be considered to be finally adjudicated be-
21 fore such date if, on or after such date—

22 “(i) there is pending a request for ei-
23 ther administrative or judicial review with
24 respect to such claim, or

1 “(ii) there is pending, with respect to
2 such claim, a readjudication by the Com-
3 missioner of Social Security pursuant to
4 relief in a class action or implementation
5 by the Commissioner of a court remand
6 order.

7 “(E) Notwithstanding the provisions of
8 this paragraph, with respect to any individual
9 for whom the Commissioner of Social Security
10 does not perform the entitlement redetermina-
11 tion before the date prescribed in subparagraph
12 (C), the Commissioner shall perform such enti-
13 tlement redetermination in lieu of a continuing
14 disability review whenever the Commissioner de-
15 termines that the individual’s entitlement is
16 subject to redetermination based on the preced-
17 ing provisions of this paragraph, and the provi-
18 sions of section 223(f) of the Social Security
19 Act shall not apply to such redetermination.”.

20 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
21 SIONS CONCERNING REPRESENTATIVE PAYEES AND
22 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
23 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
24 Section 105(a)(5)(B) of the Contract with America Ad-

1 vancement Act of 1996 (42 U.S.C. 405 note) is amended
2 to read as follows:

3 “(B) The amendments made by para-
4 graphs (2) and (3) shall take effect on July 1,
5 1996, with respect to any individual—

6 “(i) whose claim for benefits is finally
7 adjudicated on or after the date of enact-
8 ment of this Act; or

9 “(ii) whose entitlement to benefits is
10 based on an entitlement redetermination
11 made pursuant to subparagraph (C).”.

12 (c) EFFECTIVE DATES.—The amendments made by
13 this section shall take effect as if included in the enact-
14 ment of section 105 of the Contract with America Ad-
15 vancement Act of 1996 (Public Law 104–121; 110 Stat.
16 852 et seq.).

17 **SEC. 402. TREATMENT OF PRISONERS.**

18 (a) IMPLEMENTATION OF PROHIBITION AGAINST
19 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

20 (1) IN GENERAL.—Section 202(x)(3) of the So-
21 cial Security Act (42 U.S.C. 402(x)(3)) is
22 amended—

23 (A) by inserting “(A)” after “(3)”; and

24 (B) by adding at the end the following:

1 “(B)(i) The Commissioner shall enter into an agree-
2 ment under this subparagraph with any interested State
3 or local institution comprising a jail, prison, penal institu-
4 tion, or correctional facility, or comprising any other insti-
5 tution a purpose of which is to confine individuals as de-
6 scribed in paragraph (1)(A)(ii). Under such agreement—

7 “(I) the institution shall provide to the Com-
8 missioner, on a monthly basis and in a manner spec-
9 ified by the Commissioner, the names, Social Secu-
10 rity account numbers, dates of birth, confinement
11 commencement dates, and, to the extent available to
12 the institution, such other identifying information
13 concerning the individuals confined in the institution
14 as the Commissioner may require for the purpose of
15 carrying out paragraph (1); and

16 “(II) the Commissioner shall pay to the institu-
17 tion, with respect to information described in sub-
18 clause (I) concerning each individual who is confined
19 therein as described in paragraph (1)(A), who re-
20 ceives a benefit under this title for the month pre-
21 ceeding the first month of such confinement, and
22 whose benefit under this title is determined by the
23 Commissioner to be not payable by reason of con-
24 finement based on the information provided by the
25 institution, \$400 (subject to reduction under clause

1 (ii) if the institution furnishes the information to
2 the Commissioner within 30 days after the date such
3 individual's confinement in such institution begins,
4 or \$200 (subject to reduction under clause (ii)) if
5 the institution furnishes the information after 30
6 days after such date but within 90 days after such
7 date.

8 “(ii) The dollar amounts specified in clause (i)(II)
9 shall be reduced by 50 percent if the Commissioner is also
10 required to make a payment to the institution with respect
11 to the same individual under an agreement entered into
12 under section 1611(e)(1)(I).

13 “(iii) The provisions of section 552a of title 5, United
14 States Code, shall not apply to any agreement entered into
15 under clause (i) or to information exchanged pursuant to
16 such agreement.

17 “(iv) There is authorized to be transferred from the
18 Federal Old-Age and Survivors Insurance Trust Fund and
19 the Federal Disability Insurance Trust Fund, as appro-
20 priate, such sums as may be necessary to enable the Com-
21 missioner to make payments to institutions required by
22 clause (i)(II).

23 “(v) The Commissioner is authorized to provide, on
24 a reimbursable basis, information obtained pursuant to
25 agreements entered into under clause (i) to any agency

1 administering a Federal or federally assisted cash, food,
2 or medical assistance program for eligibility purposes.”.

3 (2) EFFECTIVE DATE.—The amendments made
4 by this subsection shall apply to individuals whose
5 period of confinement in an institution commences
6 on or after the first day of the fourth month begin-
7 ning after the month in which this Act is enacted.

8 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
9 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
10 PRISONMENT FOR MORE THAN 1 YEAR.—

11 (1) IN GENERAL.—Section 202(x)(1)(A) of the
12 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
13 amended—

14 (A) in the matter preceding clause (i), by
15 striking “during” and inserting “throughout”;

16 (B) in clause (i), by striking “an offense
17 punishable by imprisonment for more than 1
18 year (regardless of the actual sentence im-
19 posed)” and inserting “a criminal offense”; and

20 (C) in clause (ii)(I), by striking “an of-
21 fense punishable by imprisonment for more
22 than 1 year” and inserting “a criminal of-
23 fense”.

24 (2) EFFECTIVE DATE.—The amendments made
25 by this subsection shall apply to individuals whose

1 period of confinement in an institution commences
2 on or after the first day of the fourth month begin-
3 ning after the month in which this Act is enacted.

4 (c) CONFORMING TITLE XVI AMENDMENTS.—

5 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
6 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
7 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
8 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

9 (A) in clause (i)(II), by inserting “(subject
10 to reduction under clause (ii))” after “\$400”
11 and after “\$200”;

12 (B) by redesignating clauses (ii) and (iii)
13 as clauses (iii) and (iv), respectively; and

14 (C) by inserting after clause (i) the follow-
15 ing:

16 “(ii) The dollar amounts specified in clause (i)(II)
17 shall be reduced by 50 percent if the Commissioner is also
18 required to make a payment to the institution with respect
19 to the same individual under an agreement entered into
20 under section 202(x)(3)(B).”.

21 (2) EXPANSION OF CATEGORIES OF INSTITU-
22 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
23 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
24 the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i))
25 is amended in the matter preceding subclause (I) by

1 striking “institution” and all that follows through
 2 “section 202(x)(1)(A),” and inserting “institution
 3 comprising a jail, prison, penal institution, or correc-
 4 tional facility, or with any other interested State or
 5 local institution a purpose of which is to confine in-
 6 dividuals as described in section 202(x)(1)(A)(ii),”.

7 (3) EFFECTIVE DATE.—The amendments made
 8 by this subsection shall take effect as if included in
 9 the enactment of section 203(a) of the Personal Re-
 10 sponsibility and Work Opportunity Reconciliation
 11 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
 12 The reference to section 202(x)(1)(A)(ii) of the So-
 13 cial Security Act in section 1611(e)(1)(I)(i) of the
 14 Social Security Act as amended by paragraph (2)
 15 shall be deemed a reference to such section
 16 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

17 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
 18 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
 19 TIONS UPON COMPLETION OF PRISON TERM.—

20 (1) IN GENERAL.—Section 202(x)(1)(A) of the
 21 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
 22 amended—

23 (A) in clause (i), by striking “or” at the
 24 end;

1 (B) in clause (ii)(IV), by striking the pe-
 2 riod and inserting “, or”; and

3 (C) by adding at the end the following:

4 “(iii) immediately upon completion of confine-
 5 ment as described in clause (i) pursuant to convic-
 6 tion of a criminal offense an element of which is sex-
 7 ual activity, is confined by court order in an institu-
 8 tion at public expense pursuant to a finding that the
 9 individual is a sexually dangerous person or a sexual
 10 predator or a similar finding.”.

11 (2) CONFORMING AMENDMENT.—Section
 12 202(x)(1)(B)(ii) of the Social Security Act (42
 13 U.S.C. 402(x)(1)(B)(ii)) is amended by striking
 14 “clause (ii)” and inserting “clauses (ii) and (iii)”.

15 (3) EFFECTIVE DATE.—The amendments made
 16 by this subsection shall apply with respect to bene-
 17 fits for months ending after the date of enactment
 18 of this Act.

19 **SEC 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
 20 **EXEMPTION FROM SOCIAL SECURITY COV-**
 21 **ERAGE.**

22 (a) IN GENERAL.—Notwithstanding section
 23 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
 24 emption which has been received under section 1402(e)(1)
 25 of such Code by a duly ordained, commissioned, or li-

1 censed minister of a church, a member of a religious order,
2 or a Christian Science practitioner, and which is effective
3 for the taxable year in which this Act is enacted, may be
4 revoked by filing an application therefore (in such form
5 and manner, and with such official, as may be prescribed
6 in regulations made under chapter 2 of such Code), if such
7 application is filed no later than the due date of the Fed-
8 eral income tax return (including any extension thereof)
9 for the applicant's second taxable year beginning after De-
10 cember 31, 1999. Any such revocation shall be effective
11 (for purposes of chapter 2 of the Internal Revenue Code
12 of 1986 and title II of the Social Security Act), as speci-
13 fied in the application, either with respect to the appli-
14 cant's first taxable year beginning after December 31,
15 1999, or with respect to the applicant's second taxable
16 year beginning after such date, and for all succeeding tax-
17 able years; and the applicant for any such revocation may
18 not thereafter again file application for an exemption
19 under such section 1402(e)(1). If the application is filed
20 after the due date of the applicant's Federal income tax
21 return for a taxable year and is effective with respect to
22 that taxable year, it shall include or be accompanied by
23 payment in full of an amount equal to the total of the
24 taxes that would have been imposed by section 1401 of
25 the Internal Revenue Code of 1986 with respect to all of

1 the applicant's income derived in that taxable year which
2 would have constituted net earnings from self-employment
3 for purposes of chapter 2 of such Code (notwithstanding
4 paragraph (4) or (5) of section 1402(c) of such Code) ex-
5 cept for the exemption under section 1402(e)(1) of such
6 Code.

7 (b) EFFECTIVE DATE.—Subsection (a) shall apply
8 with respect to service performed (to the extent specified
9 in such subsection) in taxable years beginning after De-
10 cember 31, 1999, and with respect to monthly insurance
11 benefits payable under title II of the Social Security Act
12 on the basis of the wages and self-employment income of
13 any individual for months in or after the calendar year
14 in which such individual's application for revocation (as
15 described in such subsection) is effective (and lump-sum
16 death payments payable under such title on the basis of
17 such wages and self-employment income in the case of
18 deaths occurring in or after such calendar year).

19 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
20 **TO COOPERATIVE RESEARCH OR DEM-**
21 **ONSTRATION PROJECTS UNDER TITLES II**
22 **AND XVI.**

23 (a) IN GENERAL.—Section 1110(a)(3) of the Social
24 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
25 ing “title XVI” and inserting “title II or XVI”.

1 (b) **EFFECTIVE DATE.**—The amendment made by
2 subsection (a) shall take effect as if included in the enact-
3 ment of the Social Security Independence and Program
4 Improvements Act of 1994 (Public Law 103–296; 108
5 Stat. 1464).

6 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
7 **WAGE REPORTS.**

8 (a) **IN GENERAL.**—Section 1137(a)(3) of the Social
9 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
10 inserting before the semicolon the following: “, and except
11 that in the case of wage reports with respect to domestic
12 service employment, a State may permit employers (as so
13 defined) that make returns with respect to such employ-
14 ment on a calendar year basis pursuant to section 3510
15 of the Internal Revenue Code of 1986 to make such re-
16 ports on an annual basis”.

17 (b) **TECHNICAL AMENDMENTS.**—Section 1137(a)(3)
18 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
19 amended—

20 (1) by striking “(as defined in section
21 453A(a)(2)(B)(iii))”; and

22 (2) by inserting “(as defined in section
23 453A(a)(2)(B))” after “employers” .

1 (c) EFFECTIVE DATE.—The amendments made by
2 this section shall apply to wage reports required to be sub-
3 mitted on and after the date of enactment of this Act.

○

Calendar No. 80

106TH CONGRESS }
1st Session }

SENATE

{ REPORT
{ 106-37

WORK INCENTIVES IMPROVEMENT ACT OF 1999

MARCH 26, 1999.—Ordered to be printed

Filed, under authority of the order of the Senate of March 25, 1999

Mr. ROTH, from the Committee on Finance,
submitted the following

R E P O R T

[To accompany S. 331]

[Including cost estimate of the Congressional Budget Office]

The Committee on Finance, to which was referred the bill (S. 331) to expand the availability of health care services for workers with disabilities and create a Ticket to Work and Self-Sufficiency Program, having considered the same, reports favorably thereon as amended by the Committee, and recommends that the bill do pass.

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I. SUMMARY AND BACKGROUND

A. SUMMARY

S. 331, as reported by the Committee on Finance, expands new options to States under the Medicaid program for workers with disabilities; continues Medicare coverage for working individuals with disabilities; and establishes a Ticket to Work and Self-Sufficiency Program.

B. BACKGROUND AND REASONS FOR LEGISLATION

The goal of the bill is to help individuals with disabilities go to work if they so choose. The bill takes significant steps toward reforming Federal disability programs; improving access to needed services, including health care and employment assistance; and removing barriers to work.

Many persons with disabilities who currently receive Federal disability benefits, such as Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI), want to work. However, less than one-half of 1 percent of these beneficiaries leave the disability rolls and become self-sufficient. If disabled individuals try to work and increase their income, they lose their disability cash benefits and, subsequently, lose their health care coverage. The threat

of losing health benefits is a powerful disincentive for disabled beneficiaries who want to work.

The unemployment rate among working-age adults with severe disabilities is nearly 75 percent. Today, more than 7.5 million disabled Americans receive cash benefits from SSI and SSDI. Disability benefit spending for SSI and SSDI total \$73 billion a year, making these disability programs the fourth largest entitlement expenditure in the Federal Government. If only 1 percent—or 75,000—of the 7.5 million disabled adults were to become employed, Federal savings in disability benefits would total \$3.5 billion over the worklife of the beneficiaries. Removing barriers to work is a major benefit to disabled Americans in their pursuit of self-sufficiency and independence, and it also contributes to preserving the Social Security Trust Fund.

C. LEGISLATIVE HISTORY

The Finance Committee's first hearing on removing barriers to work for individuals with disabilities was held on July 29, 1998. At this hearing, and at a subsequent hearing on February 4, 1999, a total of 11 witnesses including disability services consumers, providers, and advocates testified about barriers to employment that currently exist in Federal disability and health care programs. The witnesses particularly singled out lack of access to health insurance as a primary obstacle to employment.

On January 28, 1999, Senator Jeffords, on behalf of himself, Senator Kennedy, Senator Roth and Senator Moynihan, introduced S. 331, the Work Incentives Improvement Act of 1999, a bill designed to remove barriers to employment for individuals with disabilities. At the February 4 hearing, S. 331 was specifically endorsed by Senator Bob Dole as well as representatives of the disability community.

On March 4, 1999, the Finance Committee ordered reported favorably, as amended by the Committee, S. 331, the Work Incentives Improvement Act of 1999, by a recorded vote of 11 to 1, with an additional 5 proxy votes in favor of the bill and with 1 proxy voted no.

II. EXPLANATION OF THE BILL

A. SECTION 1. SHORT TITLE

The short title of the bill is the "Work Incentives Improvement Act of 1999."

B. SECTION 2. PURPOSES

The Chairman's mark is based on S. 331 and has four primary purposes as set forth in the bill. First, the mark provides health care and employment preparation and placement services to individuals with disabilities to support efforts to return to work and to reduce dependency on cash assistance. Second, the mark creates new options for States to allow individuals with disabilities to purchase Medicaid coverage. Third, the mark lengthens the current period of extended eligibility for Medicare coverage for disabled beneficiaries who are leaving cash benefits for work. Finally, the

mark establishes a return to work “ticket” program that will allow beneficiaries to seek the services necessary to obtain and retain employment and reduce their dependency on cash benefit programs.

C. TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

1. SECTION 101. EXPANDING OPTIONS UNDER MEDICAID FOR WORKERS WITH DISABILITIES

Present law

Current law requires most States to provide Medicaid coverage for disabled individuals who are eligible for Supplemental Security Income (SSI). Individuals are considered disabled if they are unable to engage in substantial gainful activity (defined in Federal regulations as earnings of \$500 per month) due to a medically determinable physical or mental impairment which is expected to result in death, or which has lasted or can be expected to last for at least 12 months. Eleven States link Medicaid eligibility to 209(b) disability definitions which may be more restrictive than SSI criteria.

Eligibility for SSI is determined by certain federally-established income and resource standards. Individuals are eligible for SSI if their “countable” income falls below the Federal maximum monthly SSI benefit (\$500 for an individual, and \$751 for couples in 1999). Not all income is counted for SSI purposes. Excluded from income are the first \$20 of any monthly income (i.e., either unearned, such as social security and other pension benefits, or earned) and the first \$65 of earned income plus one-half of the remaining earnings. The Federal limit on resources is \$2,000 for an individual, and \$3,000 for couples. Certain resources are not counted, including an individual’s home, and the first \$4,500 of the current market value of an automobile.

In addition, States must provide Medicaid coverage for certain disabled and blind individuals who no longer receive SSI because they work and their earnings cause them to exceed SSI income eligibility thresholds. SSI cash benefits phase down until their earnings reach the current threshold of \$1,085 per month. Medicaid coverage continues for those with incomes rising above this threshold until earnings reach a level that takes into account amounts needed to cover health care costs and living expenses. That earnings level varies by State. For 1998, that level ranges from \$34,125 annually or \$2,844 per month to \$13,792 annually or \$1,149 per month. This eligibility status applies as long as the beneficiary:

- (1) continues to be blind or have a disabling impairment;
- (2) except for earnings, continues to meet all the other requirements for SSI eligibility;
- (3) would be seriously inhibited from continuing or obtaining employment if Medicaid eligibility were to end; and
- (4) has earnings that are not sufficient to provide a reasonable equivalent of benefits from SSI, State supplemental payments (if provided by the State), Medicaid, and publicly funded

attendant care that would have been available in the absence of those earnings.

Recent law allowed States to increase the income limit for Medicaid coverage of disabled individuals. The Balanced Budget Act of 1997 (P.L. 105–33) allowed States to elect to provide Medicaid coverage to disabled persons who otherwise meet SSI eligibility criteria but have income up to 250 percent of the Federal poverty guidelines. Beneficiaries under the more liberal income limit may “buy into” Medicaid by paying premium costs. Premiums are set on a sliding scale based on an individual’s income as established by the State.

Explanation of provision

Under the proposal, States would have the option to establish one or two new Medicaid eligibility categories:

First, States would have the option to cover persons with disabilities whose income would make them ineligible for SSI. In addition, States may establish limits on resources and income that differ from the SSI requirements. This means that income levels set by the State could exceed 250 percent of the Federal poverty level and resources levels could exceed \$2,000 for individuals, and \$3,000 for couples, and the \$20 exclusion or disregard of monthly unearned income could be increased.

Second, if States provide Medicaid coverage to individuals described above, they may also opt to continue to provide coverage to individuals, aged 16–64, who cease to be eligible for Medicaid under the previous option because of medical improvement, but who still have a severe medically determinable impairment, and who are employed. Individuals covered by Medicaid through other disability options (such as 1619b or the Balanced Budget Act of 1997 option) would continue Medicaid if eligibility ceases because of medical improvement. States may establish limits on resources and income that differ from the Federal requirements. Individuals would be considered to be employed if they earn at least the Federal minimum wage, and work at least 40 hours per month, or are engaged in work that meets criteria for work hours, wages, or other measures established by the State and approved by the Secretary of the Department of Health and Human Services (HHS).

Individuals covered under these options could “buy into” Medicaid coverage by paying premiums or other cost-sharing charges on a sliding fee scale based on an individual’s income, as established by the State. (Premium and cost-sharing charges do not apply to existing Medicaid mandatory or optional groups.) The State would be required to make premium or other cost-sharing charges the same for both these two new eligibility groups. In addition, a State may require individuals with income above 250 percent of the Federal poverty level to pay the full premium cost.

Federal funds paid to a State for Medicaid coverage of these new eligibility groups must be used to supplement State funds used for their existing programs that assist disabled individuals to work. In order to receive Federal funds, States are required to maintain their current level of effort for these groups.

Reason for change

These new Medicaid options are designed to make it possible for States to remove a significant barrier to employment confronting individuals with disabilities—the reality that increased earnings can result in the loss of health insurance coverage. The new options would provide access to Medicaid coverage for working disabled individuals without requiring them to first receive cash benefits to qualify.

Effective date

The proposal would be effective on or after October 1, 1999.

2. SECTION 102. CONTINUATION OF MEDICARE COVERAGE FOR WORKING INDIVIDUALS WITH DISABILITIES

Present law

Disabled beneficiaries are provided with an extended period of time to test their ability to work without losing their entitlement to Social Security Disability Insurance (SSDI) and Medicare Part A benefits. The period consists of:

- (1) a *trial work period* during which disabled beneficiaries can work for up to 9 months (within a 5-year period) with no effect on their cash disability or Medicare benefits; and
- (2) after a 3-month grace period, Medicare Part A coverage continues for a 36-month *extended period of eligibility*, while cash benefits are suspended for any month in which the individual is engaged in substantial gainful activity (\$500 in monthly earnings).

When the Medicare entitlement ends because of the individual's work activity, if the individual is still medically disabled, Medicare coverage can be purchased by the individual through the payment of monthly premiums (currently \$309 per month for Part A, and \$45.50 per month for Part B).

Explanation of provision

The proposal would extend Medicare Part A coverage for working SSDI beneficiaries engaged in substantial gainful activity for the 10-year period following enactment of this subsection of the bill without requiring beneficiaries to pay the Medicare Part A premium. In addition, Medicare Part A coverage could continue after the termination of the 10-year period for any individual who is enrolled in the Medicare Part A program for the month that ends the initial 10-year period, without requiring the beneficiaries to pay the premium.

The proposal would require the Comptroller General of the United States to submit a report to Congress no later than 8 years after enactment that would examine the effectiveness and cost of extending Medicare Part A coverage to working disabled beneficiaries without charging them a premium. The report would be required to recommend whether the Medicare coverage extension should continue beyond the initial 10-year period set forth in the bill.

Reason for change

Fear of losing Medicare coverage, or being required to make premium payments totaling \$309 per month, has contributed significantly to the very low rate of SSDI beneficiaries returning to work (only 1 percent of SSDI beneficiaries move through the extended period of eligibility and ultimately leave the program). This provision would lengthen the current extended period of eligibility to remove a real barrier to employment.

Many individuals with disabilities who join the workforce do not initially secure positions that offer health insurance benefits. However, if private sector coverage is offered, current law related to when Medicare is primary rather than secondary payer is unchanged.

Effective date

The proposal would be effective on or after the date of enactment of the bill.

3. SECTION 103. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES

Present law

No provision.

Explanation of provision

Infrastructure grants.—The proposal would require the Secretary of HHS to award grants to States to design, establish and operate infrastructures that provide items and services to support working individuals with disabilities, and to conduct outreach campaigns to inform them about the infrastructures. States would be eligible for these grants under the following conditions:

(1) they must provide Medicaid coverage to the first new eligibility category described above; and

(2) they must provide personal assistance services to assist individuals eligible under the proposal to remain employed (that is, earn at least the Federal minimum wage and work at least 40 hours per month, or engage in work that meets criteria for work hours, wages, or other measures established by the State and approved by the Secretary of HHS).

“*Personal assistance services*” refers to a range of services, provided by one or more persons, to assist individuals with disabilities to perform daily activities on and off the job. These services would be designed to increase individuals’ control in life and ability to perform daily activities on or off the job.

Formula for allocation of demonstration funds and award amounts.—The Secretary of HHS would be required to develop a formula for the award of infrastructure grants. The formula must provide special consideration to States that extend Medicaid coverage to persons who cease to be eligible for SSDI and SSI because of an improvement in their medical condition, but who have a severe medically determinable impairment, and who are employed.

Grant amounts to States must be a minimum of \$500,000 per year. They may be up to a maximum amount of 15 percent of Fed-

eral and State Medicaid expenditures in a given fiscal year for individuals eligible under one or both of the new eligibility groups described above, whichever is greater.

Annual report. States would be required to submit an annual report to the Secretary on the use of the grant funds. In addition, the report must indicate the percent increase in the number of SSDI and SSI beneficiaries who return to work.

Funding. The proposal would authorize the following amounts:

- FY2000, \$20 million;
- FY2001, \$25 million;
- FY2002, \$30 million;
- FY2003, \$35 million;
- FY2004, \$40 million; and
- FY2005–FY2010, the amount of appropriations for the preceding fiscal year plus the percent increase in the CPI for All Urban Consumers for the preceding fiscal year.

The Secretary of HHS, in consultation with the Work Incentives Advisory Panel established by the bill, would be required to make a recommendation, by October 1, 2009, to the Committee on Commerce in the House and the Committee on Finance in the Senate, whether the grant program should be continued after FY2010.

Reason for change

The grant program would provide limited financial support to States committed to developing new systems of care for working disabled individuals.

Effective date

This provision would be effective October 1, 1999.

4. SECTION 104. DEMONSTRATION OF COVERAGE OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES

Present law

No provision.

Explanation of provision

The Secretary would be required to establish a State demonstration program that would provide medical assistance equal to that provided under Medicaid for disabled persons age 16–64 who are “workers with a potentially severe disability.” These are individuals who meet a State’s definition of physical or mental impairment, who are employed, *and* who are reasonably expected to meet SSI’s definition of blindness or disability if they did not receive Medicaid services.

The Secretary is required to approve demonstration programs if the State meets the following requirements:

- (1) the State has elected to take up the first new Medicaid option to cover working persons with disabilities with incomes in excess of current limits;
- (2) Federal funds are used to supplement State funds used for workers with potentially severe disabilities at the time the demonstration is approved; and

(3) the State conducts an independent evaluation of the demonstration program. The proposal would allow the Secretary to approve demonstration programs that operate on a sub-State basis.

For purposes of the demonstration, individuals would be considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, *or* are engaged in work that meets threshold criteria for work hours, wages, or other measures as defined by the demonstration project and approved by the Secretary.

Funding. The proposal would authorize the following amounts:

- FY2000, \$70 million;
- FY2001, \$73 million;
- FY2002, \$77 million; and
- FY2003, \$80 million.

Payments to States. Payments under this demonstration program could not exceed, in the aggregate, \$300 million. Payments may be provided to States only through FY2005. The Secretary is required to allocate funds to States based on their applications and the availability of funds. Funds awarded to States would equal their Federal medical assistance percentage (FMAP) of expenditures for medical assistance to workers with a potentially severe disability.

The Secretary of HHS would be required to make a recommendation, by October 1, 2002, to the Committee on Commerce in the House and the Committee on Finance in the Senate, whether the grant program should be continued after FY2003.

Reason for change

The demonstration would test whether providing individuals with potentially severe disabilities early access to insurance coverage can delay or prevent the onset of a fully disabling condition. Also, the demonstration would test whether access to insurance would make it possible for these individuals to remain in the work force longer, rather than moving on to the cash assistance rolls.

Effective date

This provision would be effective October 1, 1999.

D. TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY
AND RELATED PROVISIONS

1. SUBTITLE A. TICKET TO WORK AND SELF-SUFFICIENCY

A. SECTION 201. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

Present law

The Commissioner is required to promptly refer individuals applying for Social Security disability insurance (SSDI) or Supplemental Security Income (SSI) benefits for necessary vocational rehabilitation (VR) services to State vocational rehabilitation (VR) agencies. State VR agencies are established pursuant to Title I of the Rehabilitation Act of 1973, as amended. A State VR agency is reimbursed for the costs of VR services to SSDI and SSI beneficiaries with a single payment after the beneficiary performs “sub-

stantial gainful activity” (i.e., had earnings in excess of \$500 per month) for a continuous period of at least 9 months. The Social Security Administration (SSA) has also established an “alternate participant program” in regulation where private or other public agencies are eligible to receive reimbursement from SSA for providing VR and related services to SSDI and SSI beneficiaries. To participate in the alternate participant program, a beneficiary must first be referred to, and declined by, a State VR agency. Such private and public agencies are reimbursed according to the same procedures as State VR agencies.

Explanation of provision

The Committee provision would direct the Commissioner of Social Security to establish a “Ticket to Work and Self-Sufficiency Program” under Title XI of the Social Security Act. Each eligible SSI or SSDI beneficiary would receive a “ticket” which may be used to obtain employment services, VR services, and other support services (e.g., assistive technology) from a participating provider (termed “employment networks”) of his or her choice. The Commissioner is expected to issue regulations regarding eligibility for participation in the program.

Employment networks may include both State VR agencies and private and other public providers. Employment networks would be prohibited from seeking additional compensation from beneficiaries. Any disabled beneficiary who is enrolled with an employment network is otherwise ineligible for services from a State VR agency unless the employment network has entered into an agreement with that State VR agency.

The Committee provision would direct the Commissioner to contract with one or more private or public entities with expertise and experience in the field of vocational rehabilitation and employment services to serve as a “program manager” to assist the Commissioner in administering the program. Program managers would be selected through a competitive bidding process. Such assistance would include recruiting and monitoring employment networks; ensuring the availability of adequate services in the geographic area covered by the program manager; providing information to beneficiaries about available employment networks; and ensuring that any beneficiary may change employment networks for good cause. Program managers are ineligible to serve as employment networks, or have a financial interest in an employment network, in the geographic area served by the program manager.

Employment networks (i.e., providers of services) would consist of a single provider (public or private) or an association of providers, and may include a one-stop delivery system established under Title I of the Workforce Investment Act of 1998. Employment networks would be required to demonstrate relevant expertise and experience; meet certain financial reporting requirements; and prepare annual performance reports that would be provided to beneficiaries and to the public. Employment networks and beneficiaries would together develop an individual work plan in such a way that the beneficiary can exercise informed choices in selecting an employment goal and specific services need to achieve that goal. A beneficiary’s written plan would take effect upon written approval by

the beneficiary or beneficiary's representative. The Commissioner would not initiate a continuing disability review for beneficiaries enrolled in the program.

Each employment network (i.e., providers) would elect to be paid according to one of two payment systems:

- (1) an outcome payment system, or
- (2) an outcome milestone payment system. However, a participating State VR program also retains the option of seeking reimbursement for services to any beneficiary under the current law payment system. Under the outcome payment system, each month that a beneficiary is not receiving cash benefits the beneficiary's employment network would receive an amount not to exceed 40 percent of the average SSDI or SSI monthly payment (as applicable to the beneficiary) in the previous calendar year. Such payments would not continue for more than 60 months.

Note: In 1997, the average monthly SSDI benefit payment was \$722; the average monthly SSI benefit payment was \$389.

Under the outcome milestone payment system, employment networks may receive payment when one or more milestones (as determined by the Commissioner) are achieved leading to the goal of permanent employment. The payment schedule of the outcome milestone payment system would be designed so that the total of the payments with respect to any beneficiary is less than (on a net present value basis) the total amount of payments to which the employment network would be entitled under the outcome payment system.

The Commissioner would periodically review both payment systems, and if necessary, alter the percentages, milestones, or payment periods to ensure that networks have adequate assistance to assist beneficiaries into the workforce.

The Committee provision provides for graduated implementation of the program nationwide. Implementation would commence no later than 1 year after enactment of the legislation, and full implementation would be completed within 3 additional years.

The Committee provision would authorize transfers from the Social Security Trust Funds for reimbursement of employment networks, and authorize amounts to be appropriated to the Social Security Administration for SSI recipients. The Committee provision would also authorize appropriations for the administrative expenses of the program.

The Committee provision provides for reauthorization of the program 5 years after the Commissioner commences implementation of the program. However, payment for any beneficiary who is enrolled in the program would continue for the period otherwise provided regardless of whether the program is reauthorized in a timely manner.

The Commissioner is directed to conduct an evaluation of the program. Evaluation reports would be transmitted to the Senate Finance Committee and the House Ways and Means Committee at the end of the third, fifth, and seventh year of program operation.

The Committee provision would also establish within the Social Security Administration a "Work Incentives Advisory Panel." The panel would consist of 12 members, whose duties would include ad-

vising the Commissioner of Social Security and other cabinet officials on implementation of the Ticket to Work program; on demonstration programs relating to work incentives, and on any other issues related to work incentives planning relating to Social Security disability insurance (SSDI), Supplemental Security Income (SSI), Medicaid, and Medicare.

Reason for change

Currently, few Social Security disability insurance (SSDI) or Supplemental Security Income (SSI) beneficiaries are referred for vocational rehabilitation (VR) services, and fewer actually return to work because of VR services. The Congressional Budget Office (CBO) has estimated that about 10 to 15 percent of new SSDI and SSI beneficiaries are referred to State VR agencies, and that about 10 percent of those referred are accepted for services. According to the Social Security Administration (SSA), in 1998, 9,950 SSDI or SSI beneficiaries graduated from the disability benefit rolls to employment because of VR services paid for by SSA. During that time, about 4.8 million disabled workers received SSDI benefits each month, and about 3.6 million disabled individuals (ages 18–64), SSI benefits. The General Accounting Office (GAO), as well as public and private commissions, have recommended major changes in SSA's approach to employment assistance.

The Committee provision is intended to improve not only VR services but actual employment outcomes by permitting nearly any SSDI or SSI beneficiary who desires VR services to receive them; by permitting beneficiaries to choose from a variety of providers in addition to State VR agencies, and by improving the payment for services by stretching out reimbursements to VR providers for up to 5 years, contingent on their clients' sustained employment. By maintaining a link between payments and successful job outcomes, the program is intended to reward employment and not simply the provision of VR services. Given SSA's limited experience in administering employment and vocational rehabilitation services, the Committee provision would provide for program managers to assist in recruiting employment networks and handling the nuts-and-bolts of administration of the program.

The Committee provision is based on H.R. 3433, the "Ticket to Work and Self-Sufficiency Act of 1998," as passed by the House of Representatives on June 4, 1998.

Effective date

Generally 1 year after enactment.

2. SUBTITLE B. ELIMINATION OF WORK DISINCENTIVES

A. SECTION 211. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN INDIVIDUAL'S DISABLED STATUS

Present law

Eligibility for Social Security disability insurance (SSDI) cash benefits requires an applicant to meet certain criteria, including the presence of a disability that renders the individual unable to engage in substantial gainful activity. Substantial gainful activity is defined as work that results in earnings that exceeds an amount

set in regulation, currently \$500 per month. Continuing disability reviews (CDRs) are conducted by the Social Security Administration to determine whether an individual remains disabled and thus eligible for continued benefits. CDRs may be triggered by evidence of recovery from disability, including, for example, return to work. The Social Security Administration is also required to conduct periodic CDRs—every 3 years for any beneficiary who is determined to be nonpermanently disabled, and at times determined by the Commissioner for beneficiaries with a permanent disability.

Explanation of provision

The Committee provision would establish that the standard for work-related CDRs for long-term SSDI beneficiaries (i.e., individuals who have been receiving disability benefits for at least 24 months) would be limited to those triggered by employment that results in earnings that exceed substantial gainful activity, or to periodic continuing disability reviews.

Reason for change

The Committee provision is intended to encourage long-term SSDI beneficiaries to return to work by ensuring that a small amount of work activity would not trigger a continuing disability review. However, like all beneficiaries, long-term beneficiaries would have benefits suspended if earnings exceed the substantial gainful activity level, and would be subject to periodic continuing disability reviews.

Effective date

On enactment.

B. SECTION 212. EXPEDITED REINSTATEMENT OF BENEFITS

Present law

Individuals entitled to Social Security disability insurance (SSDI) benefits may receive expedited reinstatement of benefits following termination of benefits because of work activity any time during a 36-month extended period of eligibility (EPE). That is, benefits may be reinstated without the need for a new application and disability determination. Individuals eligible for Supplemental Security Income (SSI) benefits whose benefits have been terminated because of work may receive expedited reinstatement at any time until benefits have been suspended for 12 consecutive months because of work. Otherwise, the Commissioner of Social Security must make a new determination of disability before a claimant can reestablish reentitlement to disability benefits.

Explanation of provision

The Committee provision would provide that an individual:

- (1) whose entitlement to Social Security disability insurance (SSDI) benefits had been terminated on the basis of work activity following completion of an extended period of eligibility (EPE); or
- (2) whose eligibility for Supplemental Security Income (SSI) benefits (including special SSI eligibility status under section

1619(b) of the Social Security Act) had been terminated following suspension of those benefits for 12 consecutive months on account of excess income resulting from work activity, may request reinstatement of those benefits without filing a new application.

The individual must have become unable to continue working on the basis of his or her medical condition and must file a reinstatement request within the 60-month period following the month of such termination.

While the Commissioner is making a determination of a reinstatement request, the individual will be eligible for provisional benefits (cash benefits and Medicare or Medicaid, as appropriate) for a period of not more than 6 months. If the Commissioner makes a favorable determination, such individual's prior entitlement to benefits would be reinstated, as would be the prior benefits of his or her dependents who continue to meet the entitlement criteria.

Reason for change

The Committee provision is intended to encourage SSDI and SSI beneficiaries to return to work by providing assurance that cash and health benefits could be restored in a timely fashion if an individual must discontinue employment and continues to meet standards for disability set by the Social Security Administration.

Effective date

One year after enactment.

3. SUBTITLE C. WORK INCENTIVES PLANNING, ASSISTANCE, AND OUTREACH

A. SECTION 221. WORK INCENTIVES OUTREACH PROGRAM

Present law

The Social Security Administration prepares and distributes educational materials on work incentives for individuals receiving Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) benefits, including on the Internet. Social Security personnel in its 1,300 field offices are available to answer questions about work incentives. Work incentives currently include: exclusions for impairment-related work expenses; trial work periods during which an individual may continue to receive cash benefits; a 36-month extended eligibility period during which cash benefits can be reinstated at any time; continued eligibility for Medicaid and Medicare; continued payment of benefits while a beneficiary is enrolled in vocational rehabilitation program; and plans for achieving self-support (PASS).

Explanation of provision

The Commissioner of Social Security is directed to establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to individuals on work incentives. Under this program, the Commissioner would:

- (1) establish a program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including

protection and advocacy services, to individuals with disabilities, and outreach to individuals with disabilities who are potentially eligible for work incentive programs; and

(2) establish a corps of work incentive specialists located within the Social Security Administration.

The Commissioner would determine the qualifications of agencies eligible for award of a grant, cooperative agreement, or contract. Social Security Administration field offices and State Medicaid agencies are deemed ineligible. Eligible organizations may include Centers for Independent Living, protection and advocacy organizations, and client assistance programs (established in accordance with the Rehabilitation Act of 1973, as amended); State Developmental Disabilities Councils (established in accordance with the Developmental Disabilities Assistance and Bill of Rights Act); and State welfare agencies (funded under Title IV–A of the Social Security Act).

Annual appropriations for this program would not to exceed \$23 million. The grant amount in each State would be based on the number of beneficiaries in a State, subject to certain limits.

Reason for change

The Committee provision is intended to improve information about, and encourage the use of, work incentives by, Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) beneficiaries. Disabled beneficiaries and advocates report that the work incentives for SSI and SSI beneficiaries are complex, difficult to understand, and information and assistance from the Social Security Administration is frequently not helpful. The Committee provision would improve both community-based sources of information through a grant program, and expertise within the Social Security Administration with a corps of work incentives specialists. Since some beneficiaries attempt to work without receiving rehabilitation services, work incentive information services would be available to all beneficiaries, not just those participating in the Ticket program.

Effective date

Fiscal year 2000.

B. SECTION 222. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

Present law

Grants to States to provide assistance to individuals with disabilities are authorized under the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.). Such assistance includes information on and referral to programs and services; and legal, administrative, and other appropriate remedies to ensure access to services.

Explanation of provision

The Commissioner of Social Security would be authorized to make grants to existing protection and advocacy programs authorized by the States under the Developmental Disabilities Assistance

and Bill of Rights Act. Services would include information and advice about obtaining vocational rehabilitation and employment services, and advocacy and other services a Social Security disability insurance (SSDI) or Supplemental Security Income (SSI) beneficiary may need to secure or regain gainful employment, including applying for and receiving work incentives.

Appropriations for this program would not to exceed \$7 million for fiscal year 2000, and such sums as needed thereafter. Individual grant amounts would be based on the number of beneficiaries in a State, subject to certain limits.

Reason for change

The Committee provision is intended to improve direct assistance and supports to Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) beneficiaries in making use of vocational rehabilitation, work incentives, and any related assistance or supports that would help a beneficiary to go to work or maintain employment. Disabled beneficiaries and advocates report that the work incentives for SSI and SSDI beneficiaries are complex, difficult to understand, and information and assistance from the Social Security Administration is frequently not helpful. The Committee provision would improve “hands on” assistance to people with disabilities in obtaining access to employment assistance and work incentives by providing grants to existing State-authorized entities with expertise in working with people with disabilities. Since some beneficiaries attempt to work without receiving rehabilitation services, work incentive information services would be available to all beneficiaries, not just those participating in the Ticket program.

Effective date

Fiscal year 2000.

E. TITLE III—DEMONSTRATION PROJECTS AND STUDIES

1. SECTION 301. EXTENSION OF DISABILITY INSURANCE PROGRAM
DEMONSTRATION AUTHORITY

Present law

Section 505 of the Social Security Disability Amendments of 1980, as amended (42 U.S.C. 1310) provides the Commissioner of Social Security authority to conduct certain demonstration projects. The Commissioner may initiate experiments and demonstration projects to test ways to encourage Social Security Disability Insurance (SSDI) beneficiaries to return to work, and may waive compliance with certain benefit requirements in connection with these projects. This demonstration authority has expired.

Explanation of provision

The Committee provision would permanently authorize section 505 of the Social Security Disability Amendments of 1980, and provide new authority to:

(1) conduct demonstrations related to sliding scale benefit offsets using variations in the amount of the offset as a proportion of earned income; and

(2) conduct demonstration projects with presumptively eligible applicants.

Reason for change

Current demonstration authority has expired.

Effective date

Date of enactment.

2. SECTION 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS

Present law

No provision.

Explanation of provision

The Committee provision would require the Commissioner of Social Security to conduct a demonstration project under which payments to Social Security disability insurance (SSDI) beneficiaries would be reduced \$1 for every \$2 of beneficiary earnings. The Commissioner would be required to annually report to the Congress on the progress of this demonstration project; the first report is due June 9, 2000.

Reason for change

SSDI beneficiaries lose all cash benefits when they work and earn more than the substantial gainful activity limit (currently \$500 a month), after participating in the 9-month trial work period. Because of the \$500 "earnings cliff," many SSDI beneficiaries view remaining on the rolls as financially more attractive than risking the uncertainties of competitive employment, especially when low-wage jobs are the likely outcome.

To determine whether changes in this earnings-cliff hurdle would in fact encourage SSDI beneficiaries to return to work, the Committee provision would require SSA to test a gradual offset of SSDI cash benefits by reducing benefits \$1 for every \$2 in earnings over a determined level. A reduction in benefits based on earnings would lessen the total loss of benefits to beneficiaries who attempt work. However, some experts assert that the results of a permanent provision allowing a SSDI benefit offset of \$1 for every \$2 earned over a determined level would result in large costs to the Social Security Trust Funds because it would encourage disabled individuals who currently work despite their impairments to apply for benefits. The Committee provision would examine these several effects.

Effective date

On enactment.

3. SECTION 304. STUDIES AND REPORTS

Present law

No provision.

Explanation of provision

1. *Study by GAO of Existing Disability-Related Employment Incentives.*—The Committee provision would direct the General Accounting Office (GAO) to assess the value of existing tax credits and disability-related employment initiatives under the Americans with Disabilities Act and other Federal laws. The report is to be submitted within 3 years to the Senate Committee on Finance and the House Committee on Ways and Means.

2. *Study by GAO of Existing Coordination of the DI and SSI Programs as They Relate to Individuals Entering or Leaving Concurrent Entitlement.*—The Committee provision would direct the General Accounting Office (GAO) to evaluate the coordination under current law of work incentives for individuals eligible for both Social Security disability insurance (SSDI) and Supplemental Security Income (SSI). The report is to be submitted within 3 years to the Senate Committee on Finance and the House Committee on Ways and Means.

3. *Study by GAO on the Impact of the Substantial Gainful Activity Limit on Return to Work.*—The Committee provision would direct the General Accounting Office (GAO) to examine substantial gainful activity limit as a disincentive for return to work. The report is to be submitted within 2 years to the Senate Committee on Finance and the House Committee on Ways and Means.

4. *Report on Disregards Under the DI and SSI Programs.*—The Committee provision would direct the Commissioner of Social Security to identify all income disregards under the Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) programs; to specify the most recent statutory or regulatory change in each disregard; the estimated current value of any disregard if the disregard had been indexed for inflation; recommend any further changes; and to report certain additional information and recommendations on disregards related to grants, scholarships, or fellowships used in attending any educational institution. The report is to be submitted within 90 days to the Senate Committee on Finance and the House Committee on Ways and Means.

Reason for change

These reports would provide new information to evaluate or improve employment and related assistance to SSDI and SSI beneficiaries.

Effective date

On enactment.

F. TITLE IV—TECHNICAL AMENDMENTS

1. SECTION 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS

Present law

Public Law 104–121 included amendments to the Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) programs providing that no individual could be considered to be disabled if alcoholism or drug addiction would otherwise be a contributing factor material to the determination of disability. The effective date for all new and pending applications was the date of enactment. For those individuals whose claims had been finally adjudicated before the date of enactment, the amendments would apply commencing with benefits for months beginning on or after January 1, 1997. Individuals receiving benefits due to drug addiction or alcoholism can reapply for benefits based on another impairment. If the individual applied within 120 days after the date of enactment, the Commissioner is required to complete the entitlement redetermination by January 1, 1997.

Public Law 104–121 provided for the appointment of representative payees for recipients allowed benefits due to another impairment but who were also determined to have a drug addiction or alcoholism condition, and the referral of those individuals for treatment effective with applications and reapplications filed after July 1, 1996.

Explanation of provision

The Committee provision clarifies that the meaning of the term “final adjudication” includes a pending request for administrative or judicial review or a pending readjudication pursuant to class action or court remand. The provision also clarifies that if the Commissioner does not perform the entitlement redetermination before January 1, 1997, that entitlement redetermination must be performed in lieu of a continuing disability review.

The Committee provision also corrects an anomaly that currently excludes all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, from the requirement that a representative payee be appointed and that the recipient be referred for treatment.

Reason for change

The provision clearly defines “final adjudication” to avoid any misinterpretation by the courts. One court has concluded that the court can award benefits through January 1, 1997, because the Commissioner’s decision denying benefits was issued before March 29, 1996.

As written, current law creates an anomaly, whereby all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, are excluded from the requirement that a representative payee be appointed and that they be referred for treatment. The Committee provision corrects this anomaly.

Effective date

The amendments would be effective as though they had been included in the enactment of Section 105 of Public Law 104–121 (March 29, 1996).

2. SECTION 402. TREATMENT OF PRISONERS

*Implementation of Prohibition Against Payment of Title II Benefits to Prisoners**Present law*

Current law prohibits prisoners from receiving Old Age, Survivors and Disability Insurance (OASDI) benefits while incarcerated if they are convicted of any crime punishable by imprisonment of more than 1 year (regardless of actual sentence imposed). Federal, State, county or local prisons are required to make available, upon written request, the name and Social Security number (SSNs) of any individual so convicted who is confined in a penal institution or correctional facility.

Explanation of provision

The Committee provision requires the Commissioner to make agreements with any interested State or local institution to provide monthly the names, Social Security numbers (SSNs), confinement dates, dates of birth, and other identifying information of residents. The Commissioner is required to pay the institution \$400 for each Social Security recipient who becomes ineligible for benefits as a result of such a report, if the information is provided within 30 days of incarceration, and \$200 if the information is furnished after 30 days but within 90 days. Payments to correctional institutions would be reduced by 50 percent for multiple reports on the same individual who receives both SSI and OASDI benefits. The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to these agreements to any Federal or federally-assisted cash, food or medical assistance program, for the purpose of determining program eligibility.

Reason for change

The Committee provision provides new financial incentives for State and local correctional institutions to report information on inmates to the Social Security Administration (SSA) so that payment of Social Security benefits to prisoners being supported at taxpayer expense are discontinued promptly. Moreover, the Committee provision provides identical incentives now available to report identical information that leads to termination of Supplemental Security Income (SSI) benefits. Under current law, the Commissioner of Social Security already pays institutions \$400 for each Supplemental Security Income (SSI) recipient who becomes ineligible for benefits as a result of such a report, if the information is provided within 30 days of incarceration, and \$200 if the information is furnished after 30 days but within 90 days.

Effective date

Three months after the date of enactment.

Elimination of Title II Requirement That Confinement Stem From Crime Punishable by Imprisonment for More Than 1 Year

Present law

Title II of the Social Security Act bars payment of Old Age, Survivors, or Disability Insurance (OASDI) benefits to prisoners convicted of, or who are institutionalized because they are found guilty but insane, not guilty by reason of insanity, incompetent to stand trial, or the subject of a similar verdict or finding based on a mental disease, a mental defect, or mental incompetence with respect to, any crime punishable by imprisonment of more than a year (regardless of the actual sentence imposed).

Explanation of provision

This provision would bar payment of OASDI benefits to prisoners and other individuals convicted of a criminal offense and confined, throughout a month, to:

- (1) a penal institution; or
- (2) other institution if found guilty but insane, regardless of the total duration of the confinement.

Reason for change

An audit conducted by the SSA Office of Inspector General determined that the language in existing law required that for each prisoner eligible for benefits, the duration of incarceration be determined on a case-by-case basis, based on data that can only be obtained from the courts. This is a costly, labor-intensive process that impedes timely suspension of benefits. As a matter of fairness, benefits would also be barred to persons who commit serious crimes but are found guilty by reason of insanity, regardless of the total duration of the institutionalization.

Effective date

Three months after enactment.

Continued Denial of Benefits to Sex Offenders Remaining Confined to Public Institutions Upon Completion of Prison Term

Present law

No provision.

Explanation of provision

The amendment would prohibit Old Age, Survivors, or Disability Insurance (OASDI) benefits to sex offenders who, on completion of a prison term, remain confined in a public institution pursuant to a court finding that they continue to be sexually dangerous to others.

Reason for change

The denial of benefits is extended in the case of sex offenders who remain confined after completing their prison terms.

Effective date

On enactment.

3. SECTION 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE

Present law

Practicing members of the clergy are automatically covered by Social Security as self-employed workers unless they file an application for an exemption from Social Security coverage; the application must be filed within a period ending with the due date of the tax return for the second taxable year (not necessarily consecutive) in which they receive remuneration for their ministerial services and must include a statement of the applicants' objection to the acceptance of Social Security benefits on religious principles. Applicants must also inform the ordaining, commissioning, and licensing body of their church or order about their objection. If granted, this exemption is irrevocable.

Explanation of provision

The proposal would provide a 2-year "open season," beginning December 31, 1999, for members of the clergy who want to revoke their exemption from Social Security, i.e., wish to join Social Security. This decision to join Social Security would be irrevocable. A member of the clergy choosing such coverage would become subject to self-employment taxes and his or her subsequent earnings would be credited for Social Security (and Medicare) benefit purposes.

Reason for change

Some members of the clergy elected not to participate in Social Security (and Medicare) early in their careers, before they fully understood the ramifications of doing so. Because the election is irrevocable, there is no way for them to gain access to the program under current law. Clergy typically have modest earnings throughout their working life times and would be among those most likely to rely on Social Security (and Medicare) for much of their basic health care and living expenses in retirement. This proposal gives them a limited opportunity to enroll in the system, similar to those provided by Congress in 1977 and 1986.

Effective date

The proposal would be effective with respect to service performed in taxable years beginning after December 31, 1999, for a period of 2 years, and with respect to monthly benefits in or after the calendar year the individual's application for revocation is effective.

4. SECTION 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI

Present law

Current law authorizes Title XVI funding for making grants to States and public and other organizations for paying part of the cost of cooperative research or demonstration projects.

Explanation of provision

Clarifies current law to include agreements or grants concerning title II of the Social Security Act.

Reason for change

Corrects an omission of intended Title II authority.

Effective date

August 4, 1994.

5. SECTION 405. AUTHORIZATION FOR STATES TO PERMIT ANNUAL
WAGES REPORTS

Present law

The Social Security Domestic Employment Reform Act of 1994 (P.L. 103–387) changed certain Social Security and Medicare tax rules. Specifically, the Act provided that domestic service employers (that is, individuals employing maids, gardeners, babysitters, and the like) would no longer owe taxes for any domestic employee who earned less than \$1,000 per year from the employer. In addition, the Act simplified certain reporting requirements. Domestic employers were no longer required to file quarterly returns regarding Social Security and Medicare taxes, nor the annual Federal Unemployment Tax Act (FUTA) return. Instead, all Federal reporting was consolidated on an annual Schedule H filed at the same time as the employer’s personal income tax return.

Explanation of provision

The Committee provision would permit States the option of permitting domestic service employers to file annual rather than quarterly wage reports pursuant to section 1137 of the Social Security Act, which provides for an income and eligibility verification system for certain public benefits.

Reason for change

The Committee provision provides for consistency of certain State wage reporting with revised Federal requirements.

Effective date

On enactment.

G. TITLE V—REVENUE OFFSETS

1. SECTION 501 OF THE BILL AND SECTION 901 OF THE CODE.
MODIFICATIONS TO FOREIGN TAX CREDIT CARRYOVER RULES

Present law

U.S. persons may credit foreign taxes against U.S. tax on foreign-source income. The amount of foreign tax credits that can be claimed in a year is subject to a limitation that prevents taxpayers from using foreign tax credits to offset U.S. tax on U.S.-source income. Separate foreign tax credit limitations are applied to specific categories of income.

The amount of creditable taxes paid or accrued (or deemed paid) in any taxable year which exceeds the foreign tax credit limitation is permitted to be carried back 2 years and forward 5 years. The amount carried over may be used as a credit in a carryover year to the extent the taxpayer otherwise has excess foreign tax credit limitation for such year. The separate foreign tax credit limitations apply for purposes of the carryover rules.

Explanation of provision

The bill reduces the carryback period for excess foreign tax credits from 2 years to 1 year. The bill also extends the excess foreign tax credit carryforward period from 5 years to 7 years.

Reason for change

The Committee believes that reducing the carryback period for foreign tax credits to 1 year and increasing the carryforward period to 7 years will reduce some of the complexity associated with carrybacks while continuing to address the timing difference between U.S. and foreign tax rules.

Effective date

The provision applies to foreign tax credits arising in taxable years beginning after December 31, 2001.

2. SECTION 502 OF THE BILL AND SECTION 448 OF THE CODE. LIMIT USE OF NON-ACCRUAL EXPERIENCE METHOD OF ACCOUNTING TO AMOUNTS TO BE RECEIVED FOR THE PERFORMANCE OF QUALIFIED PERSONAL SERVICES

Present law

An accrual method taxpayer generally must recognize income when all the events have occurred that fix the right to receive the income and the amount of the income can be determined with reasonable accuracy. An accrual method taxpayer may deduct the amount of any receivable that was previously included in income that becomes worthless during the year.

Accrual method taxpayers are not required to include in income amounts to be received for the performance of services which, on the basis of experience, will not be collected (the “non-accrual experience method”). The availability of this method is conditioned on the taxpayer not charging interest or a penalty for failure to timely pay the amount charged.

A cash method taxpayer is not required to include an amount in income until it is received. A taxpayer may not use the cash method if purchase, production, or sale of merchandise is a material income producing factor. Such taxpayers are generally required to keep inventories and use the accrual method of accounting. In addition, corporations (and partnerships with corporate partners) generally may not use the cash method of accounting if their average annual gross receipts exceed \$5 million. An exception to this \$5 million rule is provided for qualified personal service corporations, corporations:

- (1) substantially all of whose activities involve the performance of services in the fields of health, law, engineering, archi-

ecture, accounting, actuarial science, performing arts or consulting; and

(2) substantially all of the stock of which is owned by current or former employees performing such services, their estates or heirs. Qualified personal service corporations are allowed to use the cash method without regard to whether their average annual gross receipts exceed \$5 million.

Explanation of provision

The bill provides that the non-accrual experience method will be available only for amounts to be received for the performance of qualified personal services. Amounts to be received for the performance of all other services will be subject to the general rule regarding inclusion in income. Qualified personal services are personal services in the fields of health, law, engineering, architecture, accounting, actuarial science, performing arts or consulting. As under present law, the availability of the method is conditioned on the taxpayer not charging interest or a penalty for failure to timely pay the amount.

Reason for change

The Committee understands that the use of the non-accrual experience method provides the equivalent of a bad debt reserve, which generally is not available to taxpayers using the accrual method of accounting. The Committee believes that accrual method taxpayers should be treated similarly, unless there is a strong indication that different treatment is necessary to clearly reflect income or to address a particular competitive situation.

The Committee understands that accrual basis providers of qualified personal services (services in the fields of health, law, engineering, architecture, accounting, actuarial science, performing arts or consulting) compete on a regular basis and on an even footing with competitors using the cash method of accounting. The Committee believes that this competitive situation justifies the continued availability of the non-accrual experience method with respect to amounts to be received for the performance of qualified personal services. The Committee believes that it is important to avoid the disparity of treatment between competing cash and accrual method providers of qualified personal services that could result if the non-accrual experience method were eliminated with regard to amounts to be received for such services.

Effective date

The provision is effective for taxable years ending after the date of enactment. Any change in the taxpayer's method of accounting necessitated as a result of the proposal will be treated as a voluntary change initiated by the taxpayer with the consent of the Secretary of the Treasury. Any required section 481(a) adjustment is to be taken into account over a period not to exceed 4 years under principles consistent with those in Rev. Proc. 98-60.¹

¹ 1998-51 I.R.B. 16.

3. SECTION 503 OF THE BILL AND NEW SECTION 7527 OF THE CODE.
EXTENSION OF IRS USER FEES

Present law

The IRS provides written responses to questions of individuals, corporations, and organizations relating to their tax status or the effects of particular transactions for tax purposes. The IRS generally charges a fee for requests for a letter ruling, determination letter, opinion letter, or other similar ruling or determination. Public Law 104–117² extended the statutory authorization for these user fees³ through September 30, 2003.

Explanation of provision

The bill extends the statutory authorization for these user fees through September 30, 2006. The bill also moves the statutory authorization for these fees into the Internal Revenue Code.

Reason for change

The Committee believes that it is appropriate to extend the statutory authorization for these user fees for an additional 3 years.

Effective date

The provision is effective on the date of enactment.

III. BUDGET EFFECTS OF THE BILL

A. COMMITTEE ESTIMATES

In compliance with paragraph 11(a) of Rule XXVI of the Standing Rules of the Senate, the following table is presented concerning the estimated budget effects of S. 331 as reported.

²An Act to provide that members of the Armed Forces performing services for the peacekeeping efforts in Bosnia and Herzegovina, Croatia, and Macedonia shall be entitled to tax benefits in the same manner as if such services were performed in a combat zone, and for other purposes (March 20, 1996).

³These user fees were originally enacted in section 10511 of the Revenue Act of 1987 (Public Law 100–203, December 22, 1987).

ESTIMATED BUDGET EFFECTS OF S. 351,
THE "WORK INCENTIVES IMPROVEMENT ACT OF 1999,"
AS APPROVED BY THE SENATE COMMITTEE ON FINANCE ON MARCH 4, 1999

Fiscal Years 1999 - 2008

(Millions of Dollars)

| Provision | Effective | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 1999-03 | 2004-06 | 1999-06 |
|--|-------------------|------|------|------|------|------|------|------|------|------|------|---------|---------|---------|
| Outlay Provisions: | | | | | | | | | | | | | | |
| Title I. -- Expanded Availability of Health Care Services [1] | | -- | -71 | -166 | -246 | -310 | -383 | -409 | -477 | -571 | -678 | -785 | -2,518 | -3,311 |
| Title II. -- Ticket to Work and Self-Sufficiency and Related Provisions [1] | | -- | -8 | -24 | -31 | -34 | -25 | -10 | 21 | 35 | 48 | -87 | 69 | -28 |
| Title III. -- Demonstration Projects and Studies [1] | | -- | -3 | -5 | -12 | -16 | -20 | -28 | -28 | -31 | -31 | -36 | -139 | -175 |
| Title IV. -- Technical Amendments [1] | | -- | 6 | 24 | 28 | 32 | 35 | 37 | 37 | 38 | 38 | 80 | 185 | 275 |
| Subtotal of Outlay Provisions [1] | | -- | -76 | -171 | -263 | -328 | -393 | -410 | -448 | -528 | -623 | -838 | -2,403 | -3,239 |
| Revenue Offsets (Title V.): | | | | | | | | | | | | | | |
| 1. 1-year carryback of foreign tax credits and 7-year carryforward | cal type 12/31/01 | -- | -- | -- | 94 | 596 | 533 | 496 | 464 | 431 | 295 | 690 | 2,219 | 2,909 |
| 2. Limit use of non-accrual experience method of accounting to amounts to be received for the performance of qualified professional services | type DOE 9/30/03 | 15 | 57 | 52 | 48 | 44 | 10 | 12 | 14 | 16 | 18 | 216 | 70 | 286 |
| 3. Extension of IRS user fees through 9/30/06 [1] | | -- | -- | -- | -- | -- | 50 | 53 | 56 | -- | -- | -- | 159 | 159 |
| Subtotal of Revenue Offsets | | 15 | 57 | 52 | 142 | 640 | 593 | 561 | 534 | 447 | 313 | 906 | 2,448 | 3,354 |
| NET TOTAL | | 15 | -19 | -119 | -121 | 312 | 200 | 181 | 86 | -82 | -310 | 68 | 45 | 115 |
| Joint Committee on Taxation | | | | | | | | | | | | | | |

NOTE: Details may not add to totals due to rounding.

Legend for "Effective" column:
cal = credits ending in
DOE = date of enactment

[1] Estimate provided by the Congressional Budget Office.

type = taxable years beginning after
type = taxable years ending after

B. BUDGET AUTHORITY AND TAX EXPENDITURES

Budget Authority

In compliance with section 308(a)(1) of the Budget Act, the Committee states that Titles I–IV of the bill involve net budget outlays (budget authority) of \$3,239 million over fiscal years 1999–2008. (See table in A., above.)

Tax Expenditures

In compliance with section 308(a)(2) of the Budget Act, the Committee states that bill section 502 involves a reduction in tax expenditures of \$286 million over fiscal years 1999–2008.

C. CONSULTATION WITH CONGRESSIONAL BUDGET OFFICE

In accordance with section 403 of the Budget Act, the Committee advises that the Congressional Budget Office submitted the following statement on S. 331, as amended by the Committee.

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, March 19, 1999.

Hon. WILLIAM V. ROTH, Jr.,
Chairman, Committee on Finance, U.S. Senate,
Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for S. 331, the Work Incentives Improvement Act of 1999.

Sincerely,

BARRY B. ANDERSON,
for
DAN L. CRIPPEN, *Director.*

Enclosure.

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

S. 331—Work Incentives Improvement Act

(As ordered reported by the Senate Committee on Finance on March 4, 1999)

SUMMARY

S. 331, the Work Incentives Improvement Act of 1999, would alter cash and health-care benefits for people with disabilities. Title I would provide States with options to extend Medicaid coverage to certain disabled workers, enhance Medicare for certain former recipients of Social Security Disability Insurance (DI), and establish grants and demonstration projects for States to assist disabled workers. Title II would revamp the system under which people collecting benefits from DI and Supplemental Security Income (SSI) receive vocational rehabilitation (VR) services and would make it easier for working beneficiaries to retain or regain cash benefits. Titles III and IV would require several demonstration projects, give certain members of the clergy another opportunity to enroll in the

Social Security system, and tighten restrictions on the payment of Social Security benefits to prisoners. To offset the costs of the bill, Title V would increase certain revenues. CBO estimates that the bill would add to the total Federal surplus by \$0.7 billion over the 2000–2004 period; of that amount, \$0.1 billion would represent a reduction in the off-budget Social Security surplus, and the remaining \$0.8 billion an improvement in the on-budget surplus.

Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provisions that relate to the old-age, survivors, and disability insurance program under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that Subtitles A and B in Title II and Titles III and IV of this bill fall within that exclusion. The remainder of the bill contains no intergovernmental mandates as defined in UMRA. However, the optional programs would result in greater State spending if they chose to participate.

The Joint Committee on Taxation has determined that two provisions in the revenue section of the bill constitute private-sector mandates. The direct cost of those provisions would exceed the statutory threshold specified in 2002 through 2004.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of S. 331 on direct spending and revenues is summarized in Table 1. The costs of this legislation fall within budget functions 550 (Health), 570 (Medicare), 600 (Income Security), 650 (Social Security), and 800 (General Government).

BASIS OF ESTIMATE

For purposes of estimating the budgetary effects of S. 331, CBO assumes enactment by September 1999.

Current Law

About 8 million people between the ages of 18 and 64 now collect cash benefits under DI, SSI, or both. In both programs, applicants must show that they are incapable of substantial work in order to be awarded benefits. Nevertheless, the programs have several provisions that are meant to smooth beneficiaries' return to work. The law permits DI recipients to earn unlimited amounts for a nine-month period (known as the trial work period, or TWP) and a subsequent three-month grace period before suspending benefits. During the three years after the TWP—a period known as the extended period of eligibility, or EPE—those beneficiaries may automatically return to the DI rolls if their earnings sink below substantial gainful activity (SGA, now defined in regulation as \$500 per month and soon to increase to \$700). Furthermore, Medicare benefits (for which DI beneficiaries qualify after two years on the rolls) also continue for three years even if cash benefits are suspended. Medicare coverage then stops unless the worker pays a steep premium (up to \$309 a month in 1999).

The SSI disability program is restricted to people with low income and few resources. Although applicants for SSI benefits must meet the same disability criteria as in the DI program, the SSI pro-

gram's subsequent treatment of earnings differs somewhat. SSI recipients who work get a reduced benefit (essentially, losing \$1 of benefits for each \$2 of earnings over \$85 a month) but do not give up their benefit entirely. If their earnings top SGA but they are still medically disabled, they move into section 1619(a) status (and still collect a small cash benefit). If their earnings rise further, they enter 1619(b) status (where they collect no cash benefit but retain Medicaid). If their incomes are too high even for the 1619(b) program, they may still enroll in Medicaid if their State offers a buy-in program permitted by the Balanced Budget Act of 1997 (BBA).

Table 1. Summary of Estimated Budgetary Effects of S. 331

| | By Fiscal Year, in Millions of Dollars | | | | | |
|---------------------------------------|--|---------|---------|---------|-----------------|---------|
| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 |
| DIRECT SPENDING | | | | | | |
| Spending Under Current Law | | | | | | |
| Old-Age, Survivors, and | | | | | | |
| Disability Insurance (OASDI) | 387,451 | 404,075 | 422,855 | 442,719 | 463,820 | 486,589 |
| Supplemental Security Income | 28,179 | 29,625 | 31,258 | 33,005 | 34,826 | 36,766 |
| Medicare ^a | 191,815 | 205,707 | 219,269 | 227,239 | 247,888 | 265,755 |
| Medicaid | 107,484 | 116,578 | 124,841 | 134,927 | 146,073 | 159,094 |
| IRS spending | 95 | 102 | 104 | 106 | 108 | 110 |
| Other Health and Human Services | 0 | 0 | 0 | 0 | 0 | 0 |
| Total | 715,024 | 756,087 | 798,327 | 837,996 | 892,715 | 948,314 |
| Proposed Changes | | | | | | |
| Old-Age, Survivors, and | | | | | | |
| Disability Insurance (OASDI) | 0 | 7 | 15 | 26 | 32 | 29 |
| Supplemental Security Income | 0 | -1 | -6 | -7 | -7 | -11 |
| Medicare ^a | 0 | 12 | 35 | 55 | 75 | 106 |
| Medicaid | 0 | 16 | 18 | 21 | 24 ^a | 27 |
| IRS spending | 0 | 0 | 0 | 0 | 0 | 3 |
| Other Health and Human Services | 0 | 16 | 57 | 82 | 83 | 84 |
| Total | 0 | 50 | 119 | 177 | 207 | 238 |
| On-Budget | 0 | -43 | 104 | 151 | 175 | 209 |
| Off-Budget (OASDI) | 0 | 7 | 15 | 26 | 32 | 29 |
| Proposed Spending Under S. 331 | | | | | | |
| Old-Age, Survivors, and | | | | | | |
| Disability Insurance (OASDI) | 387,451 | 404,082 | 422,870 | 442,745 | 463,852 | 486,618 |
| Supplemental Security Income | 28,179 | 29,624 | 31,252 | 32,998 | 34,819 | 36,755 |
| Medicare ^a | 191,815 | 205,719 | 219,304 | 227,294 | 247,963 | 265,861 |
| Medicaid | 107,484 | 116,594 | 124,859 | 134,948 | 146,097 | 159,121 |
| IRS spending | 95 | 102 | 104 | 106 | 108 | 113 |
| Other Health and Human Services | 0 | 16 | 57 | 82 | 83 | 84 |
| Total | 715,024 | 756,137 | 798,446 | 838,173 | 892,922 | 948,552 |
| REVENUES | | | | | | |
| Proposed Changes | | | | | | |
| On-Budget | 0 | 73 | 53 | 143 | 641 | 594 |
| Off-Budget (OASDI) | 0 | 2 | 7 | 9 | 9 | 9 |
| Total | 0 | 75 | 60 | 152 | 650 | 603 |
| DEFICIT (-) OR SURPLUS | | | | | | |
| Proposed Changes | | | | | | |
| On-Budget | 0 | 30 | -51 | -8 | 466 | 385 |
| Off-Budget (OASDI) | 0 | -5 | -7 | -17 | -23 | -20 |
| Total | 0 | 25 | -58 | -25 | 443 | 365 |

Note: Components may not sum to totals due to rounding.

a. Medicare consists of outlays of the Hospital Insurance and Supplementary Medical Insurance trust funds, less premiums.

Both DI and SSI recipients are evaluated at the time of award for their potential to go back to work. Sketchy data suggest that a minority are referred to VR providers, chiefly State agencies, and only a minority of those referred are served. If the beneficiary successfully completes nine months of employment at SGA, the VR

provider is reimbursed by the Social Security Administration (SSA). In 1996, SSA began recruiting alternate providers under the Referral System for Vocational Rehabilitation Providers (RSVP) program. Candidates for this program must first be referred to and rejected by the State VR agencies, and the alternate providers face the same reimbursement system (that is, a single payment after nine months of substantial work). Thus, VR for DI and SSI recipients remains fundamentally a State program.

In both the DI and SSI programs, recipients are reviewed periodically to verify that they are still disabled. These Continuing Disability Reviews (CDRs) are scheduled according to the recipient's perceived likelihood of improvement. If medical improvement is deemed possible, the cycle calls for a review every three years. (Those beneficiaries thought likely to improve are reviewed more often, and those unlikely to improve less often.) If the CDR results in a finding that the beneficiary is no longer disabled, cash and medical benefits stop. A CDR can also be triggered by a report of earnings.

Expanded Availability of Health Care Services (Title I)

Title I of S. 331 would increase Federal spending by about \$0.7 billion over the 2000–2004 period and by about \$2 billion over the 2000–2009 period through policies that would expand the availability of health care services. It would expand existing State options for covering the working disabled under Medicaid and would extend Medicare coverage for DI recipients who return to work. Title I would also provide States with grants to develop infrastructure to assist the working disabled and establish demonstration projects for States to provide Medicaid benefits to workers with severe impairments who are likely to become disabled.

State Option to Eliminate Income, Resource, and Asset Limitations for Medicaid Buy In. Section 101 of S. 331 would amend Medicaid law to allow States the option to raise certain income, asset, and resource limitations for workers with disabilities who buy into Medicaid. This policy, combined with the incentives created by grants and demonstration projects (discussed below), would induce some States to expand Medicaid to include the working disabled and would marginally increase enrollment in those States that would otherwise have expanded Medicaid to include this group, resulting in an increase in spending of about \$100 million over five years (see Table 2).

Table 2. Estimated Direct Spending and Revenue Effects of S. 331, By Provision

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|---|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Title I | | | | | | | | | | |
| State Option to Eliminate Income, Resource and Asset Limitations for Medicaid Buy-in | | | | | | | | | | |
| Medicaid | 15 | 16 | 18 | 20 | 22 | 24 | 26 | 29 | 32 | 35 |
| State Option to Continue Medicaid Buy-in for Participants Whose DI or SSI Benefits Are Terminated After a CDR | | | | | | | | | | |
| Medicaid | 1 | 2 | 3 | 4 | 5 | 6 | 8 | 9 | 11 | 13 |
| Extension of Medicare with No HI Premium for Former DI Beneficiaries Who Exhaust Their Current-Law EPE | | | | | | | | | | |
| Medicare | 10 | 29 | 48 | 68 | 95 | 125 | 163 | 195 | 234 | 294 |
| Grants to States to Provide Infrastructure to Support Working Individuals with Disabilities | | | | | | | | | | |
| HHS outlays | 6 | 7 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 |
| Demonstration Project for States Covering Workers with Potentially Severe Disabilities | | | | | | | | | | |
| HHS outlays | 10 | 50 | 75 | 75 | 75 | 15 | 0 | 0 | 0 | 0 |
| Title II | | | | | | | | | | |
| Establishment of the Ticket to Work and Self-Sufficiency Program | | | | | | | | | | |
| Disability Insurance | 1 | 2 | 3 | 5 | -3 | -18 | -48 | -77 | -33 | -37 |
| Medicare | a | a | a | a | 1 | 1 | 1 | -3 | -14 | -31 |
| Supplemental Security Income | a | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 |
| Subtotal (effect on outlays) | 1 | 3 | 4 | 7 | -3 | -23 | -63 | -110 | -57 | -79 |
| Bar on Work CDRs for Certain DI Beneficiaries With Earnings | | | | | | | | | | |
| Disability Insurance | 5 | 15 | 20 | 20 | 20 | 25 | 25 | 25 | 25 | 25 |
| Medicare | 2 | 6 | 7 | 7 | 8 | 8 | 9 | 10 | 10 | 11 |
| Subtotal (effect on outlays) | 7 | 21 | 27 | 27 | 28 | 33 | 34 | 35 | 35 | 36 |
| Expedited Reinstatement of DI Benefits Within 60 Months of Termination | | | | | | | | | | |
| Disability Insurance | 0 | 1 | 1 | 1 | 2 | 3 | 3 | 4 | 5 | 6 |
| Medicare | 0 | a | a | a | 1 | 1 | 1 | 2 | 2 | 3 |
| Subtotal (effect on outlays) | 0 | 1 | 1 | 1 | 3 | 4 | 4 | 6 | 7 | 9 |
| Title III | | | | | | | | | | |
| Permanent Extension of DI Demonstration Project Authority | | | | | | | | | | |
| Disability Insurance | 3 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 | 5 |
| \$1-for-\$2 Demonstration Projects | | | | | | | | | | |
| Contractor Costs (DI) | 0 | a | 4 | 5 | 6 | 6 | 4 | 4 | 4 | 4 |
| DI Benefit Costs | 0 | 0 | 3 | 8 | 13 | 18 | 19 | 18 | 18 | 18 |
| Medicare Costs | 0 | 0 | 0 | 0 | 2 | 4 | 7 | 9 | 9 | 9 |
| Subtotal (effect on outlays) | 0 | a | 7 | 13 | 20 | 28 | 29 | 31 | 31 | 31 |

Continued

Table 2. Continued

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|--|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Title IV | | | | | | | | | | |
| Provisions Affecting Prisoners | | | | | | | | | | |
| Payments to Prison Officials (OASDI) | 2 | 7 | 8 | 9 | 9 | 10 | 10 | 10 | 10 | 10 |
| Payments to Prison Officials (SSI) | a | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Savings in Benefits (OASDI) | -3 | -15 | -18 | -20 | -23 | -25 | -25 | -25 | -25 | -25 |
| Savings in Benefits (SSI) | -2 | -7 | -8 | -9 | -11 | -11 | -11 | -11 | -11 | -11 |
| Subtotal (effect on outlays) | -3 | -15 | -17 | -20 | -24 | -25 | -25 | -25 | -25 | -25 |
| Open Season for Clergy to Enroll in Social Security | | | | | | | | | | |
| Off-Budget (OASDI) Revenues | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| On-Budget (HI) Revenues | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| Other On-Budget Revenues | a | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 |
| OASDI Benefits | a | a | a | a | a | a | 1 | 1 | 1 | 1 |
| Subtotal (effect on total surplus) | 3 | 8 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 11 |
| Title V | | | | | | | | | | |
| Modification to Foreign Tax Credit Carryback and Carryover Periods | | | | | | | | | | |
| Revenues | 0 | 0 | 94 | 596 | 533 | 496 | 464 | 431 | 295 | na |
| Repeal of Non-accrual Experience Method for Service Providers | | | | | | | | | | |
| Revenues | 72 | 52 | 48 | 44 | 10 | 12 | 14 | 16 | 18 | na |
| Extension of IRS User Fees | | | | | | | | | | |
| Revenues | 0 | 0 | 0 | 0 | 50 | 53 | 56 | 0 | 0 | 0 |
| Outlays | 0 | 0 | 0 | 0 | 3 | 3 | 3 | 0 | 0 | 0 |
| Subtotal (effect on total surplus) | 0 | 0 | 0 | 0 | 47 | 50 | 53 | 0 | 0 | 0 |
| Total | | | | | | | | | | |
| Outlays | | | | | | | | | | |
| On-Budget | 43 | 104 | 151 | 175 | 209 | 181 | 202 | 222 | 277 | 327 |
| Off-Budget | 7 | 15 | 26 | 32 | 29 | 25 | -7 | -35 | 9 | 6 |
| Total | 50 | 119 | 177 | 207 | 238 | 206 | 195 | 187 | 287 | 334 |
| Revenues | | | | | | | | | | |
| On-Budget | 73 | 53 | 143 | 641 | 594 | 562 | 535 | 448 | 314 | na |
| Off-Budget | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| Total | 75 | 60 | 152 | 650 | 603 | 572 | 545 | 458 | 324 | na |
| Deficit (-) or Surplus (+) | | | | | | | | | | |
| On-Budget | 30 | -51 | -8 | 466 | 385 | 381 | 333 | 226 | 37 | na |
| Off-Budget | -5 | -7 | -17 | -23 | -20 | -15 | 17 | 45 | 1 | 4 |
| Total | 25 | -58 | -25 | 443 | 365 | 366 | 350 | 271 | 38 | na |
| Notes: Components may not sum to totals due to rounding. | | | | | | | | | | |
| na= not available. | | | | | | | | | | |
| OASDI= Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, SSI=Supplemental Security Income, CDR=Continuing Disability Review, EPE=extended period of eligibility, HI=Hospital Insurance (Medicare Part A), HHS=Department of Health and Human Services, IRS=Internal Revenue Service | | | | | | | | | | |
| a. Less than \$500,000. | | | | | | | | | | |

Under current law, States have the option of extending Medicaid coverage to certain workers with disabilities with incomes under 250 percent of poverty. This option was created in the Balanced Budget Act of 1997 and to date, only one State has an approved State plan amendment to implement it. Based on discussions with State officials, CBO assumes that States with one-quarter of eligible people will develop small expansion programs under this option

over the next few years. Some of those States are likely to use current authority under the Medicaid program to disregard some income of people applying under this option, thus effectively enrolling persons with incomes slightly higher than 250 percent of poverty. Other States may develop income cut-offs at or below that level. Based on figures from SSA of the number of people who graduate from the 1619(b) program due to earnings, CBO calculates that about 1,000 working disabled will be enrolled in Medicaid on an average annual basis under current law.

Under S. 331, CBO assumes that about half of the States adopting the current law option would revise their plans to raise certain income, asset and resource limitations beyond the 250 percent limit. Taking up the option would allow those States access to incentive grants and demonstration funds made available under the bill and would relieve States of administering complex eligibility determinations in instances where States would otherwise have disregarded income. A possible effect of S. 331 in those States would be that more people would seek out the benefit if States made higher income limits explicit. As a result, there would be a small increase in the number of people enrolled under that option.

CBO also assumes that several additional States would exercise the option to buy-in the working disabled under S. 331 to gain access to incentive grants and demonstration funds made available under the bill. In total, CBO assumes that States with half the potential eligibles would pursue the option under S. 331, increasing Medicaid enrollment by about 2,500 people on an average annual basis.

The estimated Federal share of Medicaid benefits for the working disabled population is about \$6,500 per capita in fiscal year 2000 and about \$9,000 per capita in 2004. States would incur administrative costs for expanding the program to include the working disabled population. Beneficiaries would also pay cost-sharing amounting to an estimated 5 percent of the total cost of the benefits. The resulting net increase in Federal spending attributable to this policy would be about \$100 million over five years and \$250 million over 10 years.

CBO's estimate takes into account a range of assumptions about State participation and about the eligibility limits that States would establish. Based on discussions with State officials developing or implementing policies in this area, CBO assumes that States would be likely to proceed cautiously, so as to limit financial exposure. If several large States were to participate in this program, new program enrollment could potentially be twice CBO's estimate; conversely, fewer participating States would decrease the estimate. If all States were to take up the option and have no ability to restrict or limit the benefits to all qualified working disabled people meeting the Federal definition of disability regardless of any income, assets and resources, Federal costs could be substantially higher than the estimate. At the same time, States could maintain current limits or set eligibility limits to target a narrow subset of eligibles, thus resulting in a smaller increase in costs.

State Option to Continue Medicaid Buy-In for Participants Whose DI or SSI Benefits are Terminated After a CDR. Section 101 would also provide States the option to continue Medicaid coverage for

persons enrolled under the buy-in option for the working disabled if those persons lose SSI or DI due to medical improvement, as established at a regularly scheduled CDR, yet still have conditions that qualify as a “severe medically determinable impairment.” Under current law, an estimated 5 percent of the buy-in population will have medical improvements each year that will result in the loss of their disability status, and thus eligibility for the Medicaid buy-in. Continuing coverage for those people would raise Federal Medicaid spending by \$15 million over five years and \$60 million over 10 years, assuming that most States choosing the Medicaid buy-in option would take up this option. If all States took up this option, Federal Medicaid costs would be \$20 million over five years and \$80 million over 10 years.

Extension of Medicare with No HI Premium to Former DI Beneficiaries Who Exhaust Their Current Law EPE. Section 102 of S. 331 would allow graduates of the EPE in the next 10 years to continue to receive Medicare benefits indefinitely without having to pay any Part A premium. The Federal cost of this provision is estimated at \$10 million in 2000 and about \$250 million over five years.

About 15,000 people start an EPE each year, and about 6,000 finish one. The bill would provide Medicare coverage to people who otherwise would have lost it at the end of the EPE. CBO estimates that an extra 27,000 people would continue to be eligible for Medicare in 2004, the fifth year of the provision, growing to 60,000 in 2009. CBO assumes that the per capita cost for those beneficiaries is about one-half the cost of the average disabled beneficiary, reflecting the likelihood that they are somewhat healthier than other disabled beneficiaries, and the possibility that some beneficiaries would gain employer-sponsored insurance and rely on Medicare as a secondary payor.

Grants to States to Provide Infrastructure to Support Working Individuals with Disabilities. To States that choose at least the first of the two Medicaid buy-in options, section 103 of the bill would make available grants to develop and establish State capacity for providing items and services to workers with disabilities. The bill would appropriate \$20 million in 2000, \$25 million in 2001, \$30 million in 2002, \$35 million in 2003, and \$40 million in 2004. The amount would be indexed to the consumer price index (CPI-U) through 2010. Each State’s grant would be limited in each year to 15 percent of the estimated total Federal and State spending on the more costly of the two State options in the bill. Based on CBO’s estimate of the State option to expand the Medicaid buy-in, the limitation would hold spending levels to about \$10 million annually; five-year costs would be \$40 million and 10-year costs would be \$100 million. Funds not allocated would remain available for allocation to States in future years. Funds allocated to States would be available until expended.

Demonstration Project for States Covering Workers with Potentially Severe Disabilities. Under section 104 of S. 331, States electing the first option under section 101 would also be eligible for grants to pay for demonstration projects that provide Medicaid to working persons with physical or mental impairments who could potentially become blind or disabled without Medicaid benefits.

Those people would be ineligible for Medicaid benefits under current law because they do not have conditions that meet the DI or SSI definition of disability. The bill would appropriate \$70 million in 2000, \$73 million in 2001, \$77 million in 2002, and \$80 million in 2003. Funds would remain available until expended, except that no payment could be made by the Federal Government after fiscal year 2005. CBO estimates that the costs of the provision would total \$300 million over the 2000–2004 period.

TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM AND RELATED PROVISIONS (TITLE II)

Ticket to Work and Self-Sufficiency Program. Title II would temporarily change the way that VR services are provided to recipients of DI and SSI benefits. The budgetary effects of the proposed tickets program comprise several components, which are detailed in Table 3.

Table 3. Estimated Effects on Outlays of the Ticket to Work and Self-Sufficiency Program

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | | |
|-------------------------------------|--|------|------|------|------|------|------|------|------|------|--|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | |
| DI Beneficiaries | | | | | | | | | | | |
| Payments to Program Manager | 1 | 2 | 1 | 2 | 3 | 3 | 1 | a | 0 | 0 | |
| Milestone Payments to Providers | 0 | a | 1 | 6 | 14 | 22 | 26 | 11 | a | a | |
| Incentive Payments to Providers | 0 | a | a | 3 | 15 | 33 | 59 | 81 | 62 | 49 | |
| Partial Repeal of Current VR System | 0 | a | a | -4 | -13 | -22 | -33 | -50 | a | a | |
| Benefits Avoided | 0 | a | a | -5 | -25 | -59 | -104 | -122 | -98 | -89 | |
| Extra Benefits Paid | 0 | a | 1 | 2 | 3 | 5 | 5 | 3 | 3 | 3 | |
| Subtotal, DI | 1 | 2 | 3 | 5 | -3 | -18 | -48 | -77 | -33 | -37 | |
| Medicare Savings ^b | 0 | 0 | a | a | 1 | 1 | 1 | -3 | -14 | -31 | |
| Total | 1 | 2 | 3 | 5 | -2 | -16 | -46 | -79 | -47 | -68 | |
| SSI Beneficiaries | | | | | | | | | | | |
| Payments to Program Manager | a | 1 | a | 1 | 1 | 1 | a | a | a | a | |
| Milestone Payments to Providers | 0 | a | 1 | 3 | 7 | 11 | 13 | 6 | a | a | |
| Incentive Payments to Providers | 0 | a | a | 1 | 4 | 9 | 15 | 21 | 16 | 13 | |
| Partial Repeal of Current VR System | 0 | a | a | -2 | -6 | -11 | -17 | -25 | a | a | |
| Benefits Avoided | 0 | a | a | -1 | -7 | -16 | -27 | -32 | -26 | -23 | |
| Extra Benefits Paid | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| Subtotal, SSI | a | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 | |
| Medicaid Savings | c | c | c | c | c | c | c | c | c | c | |
| Total | a | 1 | 1 | 2 | -1 | -6 | -16 | -30 | -10 | -11 | |

Notes: Components may not sum to totals due to rounding.

DI = Disability Insurance, SSI = Supplemental Security Income.

a. Less than \$500,000.

b. These amounts are the Medicare savings that would occur under current law. Title I of the bill would extend Medicare for these beneficiaries.

c. CBO assumes that nearly all of the vocational rehabilitation recipients who leave the SSI rolls would continue to get Medicaid coverage through the 1619(b) program.

The current VR program serves a fraction of DI and SSI recipients. Approximately 10 percent to 15 percent of new DI and SSI recipients are referred to State VR agencies; although SSA does not track what happens to them next, scattered clues suggest that about 10 percent of those referred are accepted. Recently, SSA has made approximately 650,000 DI awards a year; therefore, around 7,000 to 8,000 probably received VR services. SSA pays about 6,000 claims per year for VR services provided to DI recipients. SSA also pays about 6,000 claims for VR services to SSI recipients. Since about 3,000 claims are for people who collect benefits under both programs, total claims reimbursed are about 9,000 a year.

Some DI and SSI recipients return to work without the help of VR agencies. Research suggests that only 10 percent to 20 percent of DI recipients ever work after they start collecting benefits, and only 2 percent to 3 percent eventually have benefits withheld because of earnings. In contrast, SSA reimburses claims for VR services for about 1 percent of recipients. Thus, for each VR success, one or two other DI recipients go back to work and are suspended from the rolls without VR.

S. 331 would revamp the VR system by permitting nearly any recipient who desires VR to receive it, by allowing clients to choose from a variety of providers in addition to State VR agencies, and by stretching out reimbursements to providers for up to five years, contingent on their clients' sustained absence from the rolls.

Under S. 331, SSA would issue tickets to DI and SSI beneficiaries that they could assign to approved VR providers, whether State, private for-profit, or nonprofit. The bill would grant wide latitude to SSA in deciding the terms and conditions of the tickets; SSA tentatively plans to issue tickets to new beneficiaries at the time of award, unless they are deemed likely to recover, and to current beneficiaries after a CDR. By accepting a ticket, providers—labeled “networks” in the bill—would agree to supply services, such as training, assistive technology, physical therapy, or placement. A program manager, selected by SSA, would aid in recruiting providers and handling the nuts-and-bolts administration of the program.

Providers could choose between two forms of reimbursement from SSA. One system would be based solely on outcomes; the provider would receive 40 percent of the average DI or SSI benefit for up to five years, so long as the client stayed off the rolls. Some providers fear, though, that they would experience acute cash-flow problems under such a system. To address that concern, the bill also offers a blended system, dubbed the “milestones-outcome” system. Under that system, SSA would make some payments earlier, but would trim subsequent payments to ensure that the overall cost (calculated on a net present value basis) did not exceed the cost of a pure outcomes system.

The new program would be phased in gradually but last only five years. S. 331 calls for it to start in selected areas a year after enactment, and to operate nationwide 3 years after that. The last tickets would be issued five years after the start of implementation. Because the program would then end unless reauthorized, potential providers may hesitate to enlarge their capacity to serve DI and SSI clients.

CBO estimates that about 7 percent of newly-awarded beneficiaries would seek VR services if they were readily available, versus only about 1 percent who receive them under current law. Both the Transitional Employment Demonstration (TED, a demonstration conducted in the mid-1980s and confined to mentally retarded recipients) and Project Network (a demonstration begun in 1992 and open to both DI and SSI beneficiaries) suggested that about 5 percent of beneficiaries would enroll in VR if given the chance. CBO judged that the level of interest ultimately would slightly exceed 5 percent for two reasons. First, intake under Project Network developed bottlenecks, which may have discouraged some potential participants. Second, Project Network barred any recipients who were employed or self-employed from enrolling; no such bar would be in place under S. 331, however, and those recipients would probably be interested in receiving services and would be attractive to providers.

Research suggests that getting VR raises the propensity to work, and thus the chances for an earnings-related suspension. But raw figures can easily exaggerate the effectiveness of VR. The handful of beneficiaries who would sign up for VR are probably the most motivated, and many would have worked anyway. In fact, CBO assumes that one effect of S. 331 would be to enable providers to be reimbursed for providing services for many people who would have worked anyway.

These expected effects can be illustrated by following the experiences of one hypothetical cohort of 650,000 new DI beneficiaries. Under current law, about 7,800 might be served under the State VR programs; 6,100 of them would eventually generate a reimbursement by SSA and would be suspended for at least a month. Another 8,300 would be suspended due to earnings, for at least one month, without any reimbursement to VR. Thus, total suspensions would be about 14,400, or about 2 percent of the cohort, under current law. CBO estimates that, if those beneficiaries could freely enroll in VR using a "ticket," about 7 percent or 47,000 would get VR services. Most of those VR clients would work, and many (about 13,400) would be suspended for at least one month, an increase of 7,300 in VR-reimbursed cases. However, CBO estimates that about 5,900 of these workers would have gone back to work unaided. Thus, for this cohort, net suspensions would be about 1,400 higher.

In estimating S. 331, CBO adjusted those hypothetical figures for its caseload projections and timing factors. First, CBO projects that the volume of disabled-worker awards gradually climbs from 625,000 in 1999 to about 780,000 in 2005. That increase reflects the aging of the baby-boom generation into its high-disability years and the scheduled increases in Social Security's normal retirement age. Second, CBO assumed that some extra rehabilitations would occur among the nearly 5 million people now on the DI rolls, not just among new awards, although current beneficiaries are generally poorer candidates for VR than new applicants with more recent work experience. Third, CBO adjusted the numbers for the gradual phase-in of the new system. Under the bill's schedule, assuming enactment by September 1999, the first services would be rendered at a handful of sites in fiscal year 2001. If those clients engaged in trial work in 2002, the first extra suspensions would

occur in 2003. The last tickets would be issued in 2005, and the last extra suspensions would occur in 2007.

Specifically, CBO estimates that the number of net additional suspensions in DI—that is, suspensions that would not occur in the absence of the new program—would equal 500 in 2003, 2,200 in 2004, and an average of 4,600 annually between 2005 and 2007. Gross suspensions that involve reimbursement to a VR provider would climb gradually from 6,000 to 8,000 a year under current law, but would be markedly higher—about 15,000 in 2007, almost double the current-law estimate—under the proposal. And the number of suspensions involving no reimbursement to VR would fall.

CBO also had to make assumptions about recidivism. Many studies have documented that DI recipients who leave the rolls often return. It is not clear whether recipients of VR services are more or less likely to return to the rolls than others; some evidence suggests that the extra boost provided by VR fades over time. Because S. 331 proposes to pay providers for up to five years, but only if the recipient stays off the rolls, assumptions about recidivism are critical. Based on a variety of sources, CBO assumes that recipients suspended from the rolls have about a two-thirds chance of still being suspended one year later, about a one-half chance three years later (when, technically, their DI entitlement is terminated), and a 40 percent chance after five years.

Effects of the Tickets Program in DI. The budgetary consequences of S. 331, from the standpoint of the DI program, would consist of seven effects:

- *Payments to the program manager.* SSA would hire a program manager to coordinate issuance of tickets, the recruitment of providers, and other tasks. Based on a similar arrangement in the RSVP program, CBO assumes that payments to the program manager would amount to just a few million dollars a year.
- *Milestone payments to providers.* As explained earlier, the bill would give providers a choice between a pure outcome-based system (in which providers would get periodic payments only during the period of suspension) and a blended outcome-milestone system (in which they could get some money earlier). CBO assumes that most providers would opt for the blended system, which CBO assumes to consist of a \$500 payment after several months of work and a \$1,000 bonus on the date of suspension. Placements would be considerably easier for providers to achieve than suspensions. The first milestone payments would be made in 2002 but would be very small. They would peak at \$26 million in 2006: an estimated \$15 million for 30,000 gross placements, mostly from ticketholders served in 2005, and another \$11 million for 11,000 suspensions, mostly from ticketholders served in 2004 (and who spent 2005 in trial work).
- *Incentive payments to providers.* The incentive payments would occur over a period of up to five years if the beneficiary remained off the rolls. Therefore, they would continue throughout CBO's 10-year horizon even though the last tickets would be issued in 2005. In the pure outcomes system, incentive pay-

ments would be 40 percent of average benefits. CBO assumes that most providers would opt for the blended payment system, under which—in return for getting some earlier milestone payments—they would accept incentive payments of 30 percent. Again, outlays would be very small in the early years. Incentive payments would peak at \$81 million in 2007. That is the year in which the last batch of VR clients, who got their tickets in 2005, would be suspended (under the assumption that they got services in 2005 and engaged in trial work in 2006). By 2007, gross suspensions of ticketholders over the preceding five years are assumed to be about 35,000. Some of those would have returned to the rolls, but 25,000 would remain suspended. Incentive payments would equal 25,000 times 30 percent of the previous year’s average DI benefit (about \$900 a month), or \$81 million. By 2009, under CBO’s assumptions about recidivism, only 17,000 of those 25,000 would still be off the rolls, and the 2,000 who were first suspended in 2003 and 2004 would no longer be in the five-year period for incentive payments. Thus, incentive payments in that year would be \$49 million.

- *Partial repeal of current VR system.* CBO assumes that, under current law, the DI trust fund would reimburse about 6,000 claims for VR services at present (at an average cost of about \$11,000) and about 7,300 in 2007 (at an average cost of about \$14,000). The new program would partially displace the current system for five years. Specifically, if tickets were issued in 2001 through 2005, they would partially divert clients who would otherwise have generated reimbursements to VR providers (at the end of trial work) in 2003 through 2007. In 2007, \$50 million in reduced payments would result.

S. 331 would grant State VR agencies the option of remaining in the current reimbursement system—that is, charging SSA for the full amount of costs incurred after the client has worked for nine months. Because the new program would expire after five years, many State agencies might choose not to undergo the disruption of a switch.

- *Benefits avoided.* The various payments to providers discussed above all depend on the number of gross rehabilitations. The savings in DI benefits, in contrast, depend on the number of net or extra rehabilitations. That distinction is important: when providers serve clients who would have worked and eventually been suspended anyway, they do not generate savings in DI benefits. Over the 2003–2007 period, CBO estimates that there would be a total of 35,000 gross rehabilitations of ticket holders, of which only 17,000 would represent extra rehabilitations. Under CBO’s assumptions about recidivism, about 11,000 of those 17,000 would still be off the rolls in 2007; at an average benefit of about \$900, \$122 million in benefit savings would result. That year marks the peak savings, because no more tickets would be issued after 2005. By 2009, the 11,000 would have shrunk further to 8,000, and \$89 million in benefit savings would be realized.
- *Extra benefits paid.* Some people might file for DI benefits in order to get VR services. They may even be encouraged to do

so by prospective providers (for example, by an insurance company that helps to run their employer's private disability or workers' compensation coverage). For those induced filers, the entire benefit cost (for any time they spend on the rolls) and the VR cost (if they do eventually get suspended) would be a net cost to the DI program.

To some extent, SSA could minimize this problem by setting the terms and conditions under which it would issue tickets—for example, by denying them to beneficiaries who are expected to recover medically. But some such filers might still seep through. CBO assumes that a few hundred such filers would be attracted to DI during the five years of the tickets program, and some would remain on the rolls, leading to extra benefit costs of up to \$5 million annually.

- *Resulting Medicare savings.* DI recipients who return to work continue to receive Medicare coverage for three years after their suspension from DI. By leading to the rehabilitation and suspension of more DI recipients, the Ticket to Work and Self Sufficiency Act would generate some savings in Medicare. DI beneficiaries who are capable of working are probably healthier than other beneficiaries, and their per capita Medicare cost therefore less than average.

Under CBO's assumption that the first services would be rendered in 2001 and the first resulting suspensions in 2003, small Medicare savings would begin in 2006. By 2009, 13,000 extra suspensions are assumed to have occurred over the 2003–2006 period (the group for whom the three-year EPE would have expired); 5,700 would still be off the rolls; and \$35 million in Medicare savings would result.

Although these Medicare savings would result if the Ticket to Work and Self-Sufficiency Act were enacted in isolation, elsewhere S. 331 proposes to give continued Medicare coverage to all beneficiaries who complete an EPE. Therefore, these Medicare savings would be rendered moot by the cost (shown in Title I) of that proposal.

Small costs—estimated by CBO to be between \$1 million and \$4 million a year—would result from the induced filers who remain on DI long enough (two years) to qualify for Medicare.

On balance, over the 1999–2003 period, CBO estimates a small net cost in the DI program from the proposed tickets, mainly because there would be few extra rehabilitations but there would be some startup costs and small payments to induced filers. Later, CBO foresees small net savings, chiefly because the DI benefit savings from extra suspensions slightly outweigh the costs of paying for VR services rendered by an expanded pool of providers.

Effects of the Tickets Program in SSI. S. 331 would also bring SSI participants into the new tickets to work program. CBO estimated the effects on the SSI program in a manner similar to its estimates for DI. There are a few notable differences.

The number of SSI recipients affected by the bill is generally estimated to be only half as many as in DI. Under current law, SSA pays for about 9,000 rehabilitations a year—6,000 in DI and 6,000 in SSI, of which 3,000 are concurrent. Under the bill, services rendered by providers to concurrent beneficiaries would essentially be

compensated under the DI rules. Thus, to avoid double-counting concurrent beneficiaries, CBO generally assumed only half as many cases in its SSI estimates as in the analogous DI estimates.

Average benefits for disabled SSI beneficiaries are also only about half as large as in the DI program—in 2003, for example, about \$425 in SSI versus \$825 in DI. Therefore, all payments under the proposed system that are pegged to the average benefit, such as the incentive payments to providers, would be smaller in SSI. In fact, that provision has aroused concern that providers would be less willing to provide services to the SSI population. CBO implicitly assumes that providers would serve this group, perhaps emphasizing cheaper services with repeated interventions if necessary.

Because SSI is limited to beneficiaries with low income and few resources, CBO assumed that there would be few induced filers. CBO also assumed that most SSI beneficiaries affected by the bill would retain Medicaid coverage through section 1619(b).

The upshot of S. 331 in the SSI program is a pattern that resembles that for DI: small early costs, giving way to small savings after 2003.

Ban on Work CDRs for Certain DI Beneficiaries With Earnings. The bill would bar so-called work CDRs if the beneficiary has been on the rolls for more than 24 months. Work CDRs are triggered by a report of earnings. Beneficiaries would still be subject to regularly scheduled periodic CDRs.

SSA conducts approximately 80,000 work CDRs a year. CBO estimates that about 1,500 people whose benefits would otherwise be terminated would benefit from this provision. Assuming that they are, on average, halfway between periodic CDRs scheduled at three-year intervals, they would get an extra 18 months of benefits. When fully effective, the provision is expected to lead to annual DI costs of about \$25 million and Medicare costs of about \$ 10 million.

Expedited Reinstatement of DI Benefits Within 60 Months of Termination. The bill would provide for expedited reinstatement of benefits for former DI recipients whose benefits were terminated because of earnings in the last 60 months. Under current law, those beneficiaries have the usual five-month waiting period waived if they seek benefits; but their application is judged no differently from one filed by someone who has never been on the rolls. S. 331 would alter that by stipulating that benefits must be awarded unless SSA can demonstrate that the applicant's medical condition has improved. S. 331 would also provide for automatic payment of up to five months of provisional benefits while the request for reinstatement is under consideration. Generally, those provisional payments would not be subject to recoupment even if the request is ultimately denied. CBO estimates that these liberalized procedures would tip the balance in up to a hundred cases each year, ultimately costing about \$6 million in DI and \$3 million in Medicare by 2009.

CBO does not estimate that either of these two provisions would lead to additional suspensions from the DI rolls as a result of earnings, because there are no firm empirical data on which to base such an assumption.

Demonstration Projects and Studies (Title III)

Permanent Extension of DI Demonstration Project Authority. SSA has had the authority to conduct certain research and demonstration projects that occasionally require waivers of provisions of title II of the Social Security Act. That waiver authority expired on June 10, 1996. This bill would extend it permanently. This extension would be the fifth since the waiver authority was enacted in 1980. This general waiver authority should not be confused with the so-called \$1-for-\$2 demonstrations in the next section; those demonstrations are costlier and longer-lasting than the modest projects that SSA would likely conduct on its own initiative.

When the waiver authority has been in effect, SSA has generally spent between \$2 million and \$4 million annually on the affected projects. CBO judges that the proposed extension would lead to extra outlays of \$3 million in 2000 and \$5 million a year thereafter.

\$1-for-\$2 Demonstration Projects. Under current law, after completing the TWP and the three-month grace period during which earnings are disregarded, a disabled worker gives up his or her entire benefit in any month that earnings exceed SGA. Both anecdotal and statistical evidence suggest that many beneficiaries balk at that, instead quitting work or holding their earnings just below the threshold. Some advocates favor, instead, cutting benefits by \$1 for every \$2 of earnings over SGA. More modestly, some favor a treatment of earnings more like the SSI program's—a cut of \$1 in benefits for every \$2 of earnings over \$85 a month.

Such proposals would probably encourage more people who are already on the DI rolls to work. Although fewer beneficiaries would be suspended (i.e., have their benefit reduced to zero), many might have their benefit substantially reduced. A major concern about such proposals, though, is that they would encourage an unknown number of people to file for benefits. Survey data suggest that there are millions of severely impaired people who are nevertheless working and not collecting DI. Filing for benefits, and working part-time, might actually improve their standards of living. That incentive would be much stronger if the DI program liberalized its treatment of earnings. The SSA Office of the Actuary in 1994 estimated that applying a \$1-for-\$2 policy for earnings above \$500 would cost \$5 billion in extra DI benefits over a five-year period and that setting the threshold at \$85 would cost \$2 billion.

S. 331 would require SSA to conduct demonstrations to test the effects of a \$1 reduction in benefits for each \$2 of earnings. It would require that SSA conduct the demonstrations on a wide enough scale, and for a long enough period, to permit valid analysis of the results. CBO assumed that, to meet those criteria, the demonstrations would have to include perhaps half a dozen small States, that the intake phase of the project would have to last three or four years to permit observation of induced filers, and that the incentives themselves would have to be promised to the beneficiaries for an indefinite period. Because the demonstrations would pose formidable issues of design and administration, CBO assumes they would not get under way until 2002. CBO also assumes that the demonstration would be conducted in areas with and without the tickets to work and self-sufficiency, to enable the effect of the incentives to be isolated from the effects of the new VR program.

Even a relatively small-scale demonstration might thereby apply to approximately 2 percent to 3 percent of the nation. Multiplying that percentage times the DI benefit costs suggested by the Actuaries' 1994 memo suggests that the demonstration would, after intake is complete, cost almost \$20 million in extra DI benefits a year. It would also lead to slightly higher Medicare costs, since the induced filers would qualify for Medicare after two years on the DI rolls. Finally, CBO assumes that running the demonstrations and collecting and analyzing data would be handled by an expert contractor, at a cost of several million dollars a year. In sum, the \$1-for-\$2 demonstration projects proposed by the bill are estimated to cost \$190 million over the 2002–2009 period.

Technical Amendments (Title IV)

Title IV contains technical corrections and clarifications to the Social Security Act. Two sections do have budgetary effects.

Provisions Affecting Prisoners. S. 331 would tighten restrictions on the payment of Social Security benefits to prisoners. Current law sets strict limits on the payment of SSI benefits to incarcerated people and somewhat milder limits on payments of OASDI. SSI recipients who are in prison for a full month—regardless of whether they are convicted—have their benefits suspended while they are incarcerated. OASDI recipients who have been convicted of an offense carrying a maximum sentence of one year or more have their benefits suspended. Those who are convicted of lesser crimes, and those who are in jail awaiting trial, may still collect OASDI benefits. Those provisions are enforced chiefly by an exchange of computerized data between the Social Security Administration and the Federal Bureau of Prisons, State prisons, and some county jails. Those agreements are voluntary and, until recently, involved no payments to the institutions.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 changed that arrangement by directing SSA to pay institutions for reporting information that led to the identification of ineligible SSI recipients. The payment is \$400 if the institution reports information within 30 days of confinement and \$200 if the report is made 30 to 90 days after confinement. The law also exempts matching agreements between SSA and correctional institutions from certain provisions of the Privacy Act.

This bill would establish analogous arrangements for the OASDI program. It would also drop the requirement that OASDI benefits be suspended only if the maximum sentence for the offense is one year or more. (A conviction would still be required; inmates who are in jail while they await trial could continue to collect benefits.) CBO estimated the effects of this provision, like its predecessor in the welfare reform law, by analyzing data from several sources that suggest about 4 percent to 5 percent of prisoners were receiving Social Security, SSI benefits, or both before incarceration. Reports from SSA's Inspector General showed that some of those prisoners were overlooked under matching arrangements either because their institution had not signed an agreement, had not renewed it promptly, or did not submit data on schedule.

CBO estimates that, over the 2000–2009 period, the provisions would lead to payments of \$85 million to correctional institutions

out of the OASDI trust funds and benefit savings of \$205 million, for a net saving of \$120 million. CBO also expects that the broader arrangement, by doubling the pool of potential payments, would encourage more jailers to submit information accurately and promptly and would therefore lead to spillover savings in the SSI program amounting to about \$90 million over the 10-year period.

Open Season for Clergy to Enroll in Social Security. Section 1402(e) of the Internal Revenue Code allows certain clergy to exempt the self-employment income from their ministry from Social Security and Medicare taxes. Under current law, such an exemption is irrevocable.

Section 403 of S. 331 would allow clergy who have received an exemption a two-year opportunity to revoke that exemption beginning in calendar year 2000. Similar opportunities were offered in 1978 and 1987. Based on those experiences, CBO estimates that 3,500 taxpayers would choose to revoke their exemptions, and that the average new enrollee would have about \$20,000 of self-employment income. (There would be a slight decrease in income tax revenue, since a portion of payroll taxes is deductible for income tax purposes.) From 2000 through 2009, off-budget revenues would increase by \$87 million, and on-budget revenues would increase by \$10 million.

Those taxpayers who revoke their exemption will eventually receive higher Social Security benefits, but that effect will mostly occur in years beyond the 10-year estimation period. CBO estimates that outlays will increase by \$4 million in the 2000–2009 period.

Authorization for State to Permit Annual Wage Reports. S. 331 would amend the Social Security Act to allow States to permit employers of domestic workers to report on such employment annually rather than quarterly. State-maintained employment histories are used to verify eligibility for certain benefits, such as unemployment insurance, food stamps, and SSI. This change would not affect eligibility requirements. It could present an administrative burden to States that choose to allow annual reporting, because they would have to research cases manually if they suspect domestic employment. CBO expects any budgetary effects to be insignificant.

Revenues (Title V)

S. 331 would amend the tax code to modify the foreign tax credit carryback and carryforward periods. The Joint Committee on Taxation (JCT) estimates that this provision would increase governmental receipts by \$1.2 billion over the 2000–2004 period. The bill also would limit the nonaccrual experience method of accounting to amounts to be received for the performance of qualified professional services. JCT estimates that this provision would increase governmental receipts by \$0.2 billion over the 2000–2004 period.

S. 331 would extend through fiscal year 2006 the authority of the Internal Revenue Service (IRS) to charge taxpayers fees for certain rulings by the office of the chief counsel and by the office for employee plans and exempt organizations. CBO estimates that the extension of the IRS's authority to charge fees for such services, which is set to expire at the end of fiscal year 2003, would increase governmental receipts by \$159 million over fiscal years 2004

through 2006, net of income and payroll tax offsets. CBO based its estimate on recent collections data and on information from the IRS. The IRS would have the authority to retain and spend a small portion of these fees without further appropriation. CBO estimates that the extension of the fees would increase direct spending by \$9 million over fiscal years 2004 through 2006.

SPENDING SUBJECT TO APPROPRIATION

S. 331 would also create several new programs or activities to be funded out of SSA's annual appropriation (see Table 4).

Table 4. Spending Subject to Appropriation

| | By Fiscal Year, in Millions of Dollars | | | | |
|--|--|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 |
| With Adjustments for Inflation | | | | | |
| Work Incentives Advisory Panel | | | | | |
| Budget authority | 1 | 1 | 1 | 2 | 2 |
| Outlays | 1 | 1 | 1 | 2 | 2 |
| Work Incentives Outreach | | | | | |
| Budget authority | 23 | 23 | 23 | 23 | 23 |
| Outlays | 2 | 14 | 23 | 23 | 23 |
| State Grants for Work Incentives Assistance | | | | | |
| Budget authority | 7 | 7 | 7 | 7 | 8 |
| Outlays | 3 | 6 | 7 | 7 | 7 |
| Total | | | | | |
| Budget authority | 31 | 32 | 32 | 32 | 32 |
| Outlays | 7 | 21 | 32 | 32 | 32 |
| Without Adjustments for Inflation | | | | | |
| Work Incentives Advisory Panel | | | | | |
| Budget authority | 1 | 1 | 1 | 1 | 1 |
| Outlays | 1 | 1 | 1 | 1 | 1 |
| Work Incentives Outreach | | | | | |
| Budget authority | 23 | 23 | 23 | 23 | 23 |
| Outlays | 2 | 14 | 23 | 23 | 23 |
| State Grants for Work Incentives Assistance | | | | | |
| Budget authority | 7 | 7 | 7 | 7 | 7 |
| Outlays | 3 | 6 | 7 | 7 | 7 |
| Total | | | | | |
| Budget authority | 31 | 31 | 31 | 31 | 31 |
| Outlays | 7 | 21 | 31 | 31 | 31 |

Note: Components may not sum to totals due to rounding.

Section 201 of S. 331 would create a Work Incentives Advisory Panel to advise the Secretaries of Health and Human Services (HHS), Labor, and Education, and the Commissioner of Social Security on work incentives for the disabled, and to advise SSA on implementation and evaluation of the Ticket to Work program. The panel would consist of 12 members appointed by the Commissioner

in consultation with the Congress. At least 5 of the members would be current or former SSI or DI recipients. S. 331 would permit the panel to hire a director and other staff and pay other necessary expenses. CBO estimates that the panel would cost between \$1 million and \$2 million a year.

Section 221 would establish a community-based program to disseminate information about work incentives and related issues. Grants totaling no more than \$23 million a year would be awarded competitively to community-based groups. Because this would be a brand-new program, CBO assumes that spending would be low at first, not reaching \$23 million until the third year.

Section 222 would require the Commissioner of Social Security to make grants to the protection and advocacy (P&A) system established under part C of title I of the Developmental Disabilities Act to assist disabled people to obtain vocational rehabilitation or employment. That P&A system is currently funded by the Children and Family Services Program in the Department of HHS. The bill would authorize \$7 million in 2000 and such sums as shall be necessary thereafter; CBO assumed that funding would remain at about \$7 million. Actual outlays would be \$3 million in 2000, and \$6 million to \$7 million a year thereafter.

Although they do not explicitly call for future appropriations, several other provisions of S. 331 would affect SSA's workload and thus the pressures on its annual appropriation. The Ticket to Work program (section 201) would require significant planning and oversight by SSA staff. Section 221 would direct SSA to establish a special corps of work incentive specialists to deal with questions from applicants, beneficiaries, and the community-based organizations funded under the same section. Enforcement of the tougher restrictions on prisoners in section 402 would require SSA staff time, because suspension of benefits occurs only after careful verification. Partly offsetting these extra costs, SSA would no longer be required to do work CDRs under section 211. CBO estimates that these effects on SSA's workload would, on balance, cost the agency between \$10 million and \$30 million a year in the 2000–2004 period.

PAY-AS-YOU-GO CONSIDERATIONS

The Balanced Budget and Emergency Deficit Control Act sets up pay-as-you-go procedures for legislation affecting direct spending or receipts. The net changes in outlays and governmental receipts that are subject to pay-as-you-go procedures are shown in the following table. For the purposes of enforcing pay-as-you-go procedures, only the effects in the current year, the budget year, and the succeeding four years are counted.

TABLE 5. SUMMARY OF PAY-AS-YOU-GO EFFECTS OF S. 331

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|--------------------------|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Changes in outlays | 43 | 104 | 151 | 175 | 209 | 181 | 202 | 222 | 277 | 327 |
| Changes in receipts | 73 | 53 | 143 | 641 | 594 | 562 | 535 | 448 | 314 | na |

na = not available.

ESTIMATED IMPACT ON THE PRIVATE SECTOR

JCT has determined that S. 331 would impose two new private-sector mandates by modifying the foreign tax credit carryback and carryover periods and by limiting the use of the nonaccrual experience method of accounting. The direct costs of the new mandates would exceed the statutory threshold (\$100 million in 1996, adjusted annually for inflation) established in UMRA in each of fiscal years 2002 through 2004 (see Table 6).

TABLE 6. ESTIMATED COST OF PRIVATE-SECTOR MANDATES

| | By Fiscal Year, in Millions of Dollars | | | | |
|----------------------------------|--|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 |
| Cost to the Private Sector | 72 | 52 | 142 | 640 | 543 |

Source: Joint Committee on Taxation.

ESTIMATED IMPACT ON STATE, LOCAL, AND TRIBAL GOVERNMENTS

Section 4 of the Unfunded Mandates Reform Act excludes from the application of that act any legislative provisions that relate to the old-age, survivors, and disability insurance programs under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that subtitles A and B in title II and titles III and IV of this bill fall within that exclusion.

The remainder of the bill contains no intergovernmental mandates as defined in UMRA. However, it includes optional programs for States that would result in greater State spending if they chose to participate as well as additional grants to States for specific programs.

Title I contains a number of options for States to expand their Medicaid program to cover workers with disabilities who want to buy into Medicaid and to continue Medicaid coverage for individuals who lose their eligibility for DI or SSI following a continuing disability review. CBO estimates that State costs attributable to these optional expansions during the first five years would total about \$70 million for the first option and about \$10 million for the second. States that implement the first of these Medicaid options would be eligible for grants to develop and operate programs to support working individuals with disabilities. CBO estimates that States would receive a total of about \$40 million during the first five years the program is in effect. States would also have the option of charging participants premiums or other fees to offset a portion of the costs.

Title I would also allow States to establish demonstration projects that would provide Medicaid to working individuals with physical or mental impairments who, without Medicaid, could become blind or disabled. CBO estimates that State costs attributable to this optional coverage would total \$215 million over the first five years of implementation.

IV. VOTE OF THE COMMITTEE

In compliance with section 133 of the Legislative Reorganization Act of 1946, the Committee states that S. 331, as amended by the Committee, was ordered reported favorably by a recorded vote of 11 to 1, with an additional 5 proxy votes in favor of the bill and with 1 proxy voted no.

V. REGULATORY IMPACT AND OTHER MATTERS

A. REGULATORY IMPACT

In compliance with paragraph 11(b) of Rule XXVI of the Standing Rules of the Senate, the Committee states that the legislation will not significantly regulate any individuals or businesses, will not impact on the personal privacy of individuals, and will result in no significant additional paperwork.

Title I. The regulatory impact of this title will be limited largely to the need for the Health Care Financing Administration develop regulations for the implementation of the new Medicaid options for the States. States would be free to establish their own parameters around the administration of these new Medicaid options, as specified in the legislation.

Title II-IV. The regulatory impact of Title II will limited largely to the need for the Social Security Administration and the U.S. Department of Education to develop regulations for the implementation of the new employment assistance program.

Title V. Title V of the bill provides three revenue offsets to cover the budget costs of Titles I-IV (relating to availability of certain health care services and work-related incentives):

- (1) 1-year carryback and 7-year carryforward of foreign tax credits (bill sec. 501);
- (2) limit use of non-accrual experience method of accounting to amounts to be received for the performance of qualified professional services (bill sec. 502); and
- (3) extension of Internal Revenue Service (IRS) user fees from October 1, 2003 through September 30, 2006 (bill sec. 503).

These revenue provisions should not have any significant adverse regulatory impact on taxpayers. These provisions should not have any adverse impact on personal privacy.

B. UNFUNDED MANDATES STATEMENT

This information is provided in accordance with section 423 of the Unfunded Mandates Reform Act of 1995 (P.L. 104-4).

The Committee has reviewed the provisions of the bill as reported. In accordance with the requirements of Public Law 104-4, the Committee has determined that the following provisions of the bill contain Federal private sector mandates:

- Modification to foreign tax credit carryback and carryover periods (bill sec. 501); and
- Limitation on use of non-accrual experience method of accounting (bill sec. 502).

These provisions are estimated to increase tax revenues by \$3,195 million over fiscal years 1999-2008, which are no greater

than the aggregate estimated amounts that the private sector will be required to pay in order to comply with the Federal private sector mandates under the bill.

These provisions will not impose a Federal intergovernmental mandate on State, local or tribal governments.

C. COMPLEXITY ANALYSIS

Section 4022(b) of the Internal Revenue Service Reform and Restructuring Act of 1998 (the "IRS Reform Act") requires the Joint Committee on Taxation (in consultation with the Internal Revenue Service and the Department of the Treasury) to provide a tax complexity analysis. The complexity analysis is required for all legislation reported by the Senate Committee on Finance, the House Committee on Ways and Means, or any committee of conference if the legislation includes a provision that directly or indirectly amends the Internal Revenue Code (the "Code") and has widespread applicability to individuals or small businesses.

Under the authority of the Joint Committee on Taxation, its staff has determined that a complexity analysis is not required under section 4022(b) of the IRS Reform Act because the bill contains no provisions that amend the Code and that have widespread applicability to individuals or small businesses.

VI. CHANGES IN EXISTING LAW MADE BY THE BILL, AS REPORTED

In the opinion of the Committee, it is necessary, in order to expedite the business of the Senate, to dispense with the requirements of paragraph 12 of rule XXVI of the Standing Rules of the Senate (relating to the showing of changes in existing law made by the bill as reported by the Committee).



Calendar No. 80

106TH CONGRESS
1ST Session

S. 331

[Report No. 106-37]

A BILL

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

MARCH 26, 1999

Reported with an amendment

Calendar No. 80

106TH CONGRESS
1ST SESSION

S. 331

[Report No. 106-37]

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

IN THE SENATE OF THE UNITED STATES

JANUARY 28, 1999

Mr. JEFFORDS (for himself, Mr. KENNEDY, Mr. ROTH, Mr. MOYNIHAN, Mr. CHAFEE, Mr. GRASSLEY, Mr. HATCH, Mr. MURKOWSKI, Mr. BREAUX, Mr. GRAHAM, Mr. KERREY, Mr. ROBB, Mr. ROCKEFELLER, Mr. BINGAMAN, Mrs. BOXER, Mr. CLELAND, Ms. COLLINS, Mr. DASCHLE, Mr. DEWINE, Mr. DODD, Mr. DURBIN, Mr. ENZI, Mrs. FEINSTEIN, Mr. GRAMS, Mr. HARKIN, Mr. HOLLINGS, Mr. HUTCHINSON, Mr. INOUE, Mr. JOHNSON, Mr. KERRY, Ms. MIKULSKI, Mrs. MURRAY, Mr. REED, Mr. REID, Mr. SARBANES, Ms. SNOWE, Mr. STEVENS, Mr. TORRICELLI, Mr. WELLSTONE, Mr. BOND, Mr. CONRAD, Mr. SPECTER, Mr. BRYAN, Mr. BAUCUS, Mr. AKAKA, Mr. SCHUMER, Mr. COCHRAN, Mr. DOMENICI, Mr. DORGAN, Mr. LEVIN, Mr. LEAHY, Mr. SMITH of Oregon, Mrs. LINCOLN, Mr. BIDEN, Mr. BYRD, Mr. MACK, Mr. EDWARDS, Mr. WYDEN, Ms. LANDRIEU, Mr. KOHL, Mr. LAUTENBERG, Mr. BAYH, Mr. FRIST, Mr. LIEBERMAN, Mr. CRAPO, Mr. ALLARD, Mr. FEINGOLD, Mr. GORTON, Mr. ABRAHAM, and Mr. CAMPBELL)

MARCH 26, 1999

Reported under authority of the order of the Senate of March 25, 1999, by
Mr. ROTH, with an amendment

[Strike out all after the enacting clause and insert the part printed in italic]

A BILL

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
 2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) ~~SHORT TITLE.~~—This Act may be cited as the
 5 ~~“Work Incentives Improvement Act of 1999”.~~

6 (b) ~~TABLE OF CONTENTS.~~—The table of contents of
 7 this Act is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under medicaid for workers with disabilities.

Sec. 102. Continuation of medicare coverage for working individuals with disabilities.

Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 104. Demonstration of coverage of workers with potentially severe disabilities.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Sec. 202. Work Incentives Advisory Panel.

Subtitle B—Elimination of Work Disincentives

- Sec. 211. Prohibition on using work activity as a basis for review of an individual's disabled status.
- Sec. 212. Expedited eligibility determinations for applications of former long-term beneficiaries that completed an extended period of eligibility.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

- Sec. 221. Work incentives outreach program.
- Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

- Sec. 301. Extension of disability insurance program demonstration project authority.
- Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.
- Sec. 303. Sense of Congress regarding additional demonstration projects.
- Sec. 304. Studies and reports.

TITLE IV—TECHNICAL AMENDMENTS

- Sec. 401. Technical amendments relating to drug addicts and alcoholics.
- Sec. 402. Treatment of prisoners.
- Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage.
- Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
- Sec. 405. Authorization for State to permit annual wage reports.

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) FINDINGS.—Congress makes the following find-
3 ings:

4 (1) Health care is important to all Americans.

5 (2) Health care is particularly important to in-
6 dividuals with disabilities and special health care
7 needs who often cannot afford the insurance avail-
8 able to them through the private market, are unin-
9 surable by the plans available in the private sector,
10 and are at great risk of incurring very high and eco-
11 nomically devastating health care costs.

1 (3) Americans with significant disabilities often
2 are unable to obtain health care insurance that pro-
3 vides coverage of the services and supports that en-
4 able them to live independently and enter or rejoin
5 the workforce. Personal assistance services (such as
6 attendant services, personal assistance with trans-
7 portation to and from work, reader services, job
8 coaches, and related assistance) remove many of the
9 barriers between significant disability and work.
10 Coverage for such services, as well as for prescrip-
11 tion drugs, durable medical equipment, and basic
12 health care are powerful and proven tools for indi-
13 viduals with significant disabilities to obtain and re-
14 tain employment.

15 (4) For individuals with disabilities, the fear of
16 losing health care and related services is one of the
17 greatest barriers keeping the individuals from maxi-
18 mizing their employment, earning potential, and
19 independence.

20 (5) Individuals with disabilities who are bene-
21 ficiaries under title II or XVI of the Social Security
22 Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing
23 medicare or medicaid coverage that is linked to their
24 cash benefits, a risk that is an equal, or greater,

1 work disincentive than the loss of cash benefits asso-
2 ciated with working.

3 (6) Currently, less than 1/2 of 1 percent of so-
4 cial security disability insurance and supplemental
5 security income beneficiaries cease to receive benefits
6 as a result of employment.

7 (7) Beneficiaries have cited the lack of adequate
8 employment training and placement services as an
9 additional barrier to employment.

10 (8) If an additional 1/2 of 1 percent of the cur-
11 rent social security disability insurance (DI) and
12 supplemental security income (SSI) recipients were
13 to cease receiving benefits as a result of employ-
14 ment, the savings to the Social Security Trust
15 Funds in cash assistance would total
16 \$3,500,000,000 over the worklife of the individuals.

17 (b) PURPOSES.—The purposes of this Act are as fol-
18 lows:

19 (1) To provide health care and employment
20 preparation and placement services to individuals
21 with disabilities that will enable those individuals to
22 reduce their dependency on cash benefit programs.

23 (2) To encourage States to adopt the option of
24 allowing individuals with disabilities to purchase

1 medicaid coverage that is necessary to enable such
2 individuals to maintain employment.

3 (3) To provide individuals with disabilities the
4 option of maintaining medicare coverage while work-
5 ing.

6 (4) To establish a return to work ticket pro-
7 gram that will allow individuals with disabilities to
8 seek the services necessary to obtain and retain em-
9 ployment and reduce their dependency on cash ben-
10 efit programs.

11 **TITLE I—EXPANDED AVAIL-**
12 **ABILITY OF HEALTH CARE**
13 **SERVICES**

14 **SEC. 101. EXPANDING STATE OPTIONS UNDER MEDICAID**
15 **FOR WORKERS WITH DISABILITIES.**

16 (a) STATE OPTION TO ELIMINATE INCOME, ASSETS,
17 AND RESOURCE LIMITATIONS FOR WORKERS WITH DIS-
18 ABILITIES BUYING INTO MEDICAID.—Section
19 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C.
20 1396a(a)(10)(A)(ii)) is amended—

21 (1) in subclause (XIII), by striking “or” at the
22 end;

23 (2) in subclause (XIV), by adding “or” at the
24 end; and

25 (3) by adding at the end the following:

1 ~~“(XV) who, but for earnings in~~
2 ~~excess of the limit established under~~
3 ~~section 1905(q)(2)(B), and subject to~~
4 ~~limitations on assets, resources, or un-~~
5 ~~earned income that may be set by the~~
6 ~~State, would be considered to be re-~~
7 ~~ceiving supplemental security income~~
8 ~~(subject, notwithstanding section~~
9 ~~1916, to payment of premiums or~~
10 ~~other cost-sharing charges (set on a~~
11 ~~sliding scale based on income that the~~
12 ~~State may determine and that may re-~~
13 ~~quire an individual with income that~~
14 ~~exceeds 250 percent of the income of-~~
15 ~~ficial poverty line (as defined by the~~
16 ~~Office of Management and Budget,~~
17 ~~and revised annually in accordance~~
18 ~~with section 673(2) of the Omnibus~~
19 ~~Budget Reconciliation Act of 1981)~~
20 ~~applicable to a family of the size in-~~
21 ~~volved to pay an amount equal to 100~~
22 ~~percent of the premium cost for pro-~~
23 ~~viding medical assistance to the indi-~~
24 ~~vidual), so long as any such premiums~~
25 ~~or other cost-sharing charges are the~~

1 same as any premiums or other cost-
 2 sharing charges imposed for individ-
 3 uals described in subclause (XVI));”.

4 (b) STATE OPTION TO EXPAND OPPORTUNITIES FOR
 5 WORKERS WITH DISABILITIES TO BUY INTO MED-
 6 ICAID.—

7 (1) ELIGIBILITY.—Section 1902(a)(10)(A)(ii)
 8 of the Social Security Act (42 U.S.C.
 9 1396a(a)(10)(A)(ii)), as amended by subsection (a),
 10 is amended—

11 (A) in subclause (XIV), by striking “or” at
 12 the end;

13 (B) in subclause (XV), by adding “or” at
 14 the end; and

15 (C) by adding at the end the following:

16 “(XVI) who are working individ-
 17 uals with disabilities described in sec-
 18 tion 1905(v) (subject, notwithstanding
 19 section 1916, to payment of premiums
 20 or other cost-sharing charges (set on
 21 a sliding scale based on income) that
 22 the State may determine so long as
 23 any such premiums or other cost-shar-
 24 ing charges are the same as any pre-
 25 miums or other cost-sharing charges

1 imposed for individuals described in
 2 subclause (XV)); but only if the State
 3 provides medical assistance to individ-
 4 uals described in subclause (XV);”.

5 (2) DEFINITION OF WORKING INDIVIDUALS
 6 WITH DISABILITIES.—Section 1905 of the Social Se-
 7 curity Act (42 U.S.C. 1396d) is amended by adding
 8 at the end the following:

9 “(v)(1) The term ‘working individuals with disabili-
 10 ties’ means individuals ages 16 through 64 who—

11 “(A) by reason of medical improvement, cease
 12 to be eligible for benefits under section 223(d) or
 13 1614(a)(3) at the time of a regularly scheduled con-
 14 tinuing disability review but who continue to have a
 15 severe medically determinable impairment; and

16 “(B) are employed.

17 “(2) An individual is considered to be ‘employed’ if
 18 the individual—

19 “(A) is earning at least the applicable minimum
 20 wage requirement under section 6 of the Fair Labor
 21 Standards Act (29 U.S.C. 206) and working at least
 22 40 hours per month; or

23 “(B) is engaged in a work effort that meets
 24 substantial and reasonable threshold criteria for

1 hours of work, wages, or other measures, as defined
 2 by the State and approved by the Secretary.”.

3 ~~(3)~~ CONFORMING AMENDMENT.—Section
 4 1905(a) of the Social Security Act (42 U.S.C.
 5 1396d(a)) is amended in the matter preceding para-
 6 graph (1)—

7 (A) in clause (x), by striking “or” at the
 8 end;

9 (B) in clause (xi), by adding “or” at the
 10 end; and

11 (C) by inserting after clause (xi), the fol-
 12 lowing:

13 “(xii) individuals described in subsection (v),”.

14 ~~(e)~~ PROHIBITION AGAINST SUPPLANTATION OF
 15 STATE FUNDS; MAINTENANCE OF EFFORT REQUIRE-
 16 MENT; CONDITION FOR APPROVAL OF STATE PLAN
 17 AMENDMENT.—

18 ~~(1)~~ NO SUPPLANTATION OF STATE FUNDS.—

19 Federal funds paid to a State for medical assistance
 20 provided to an individual described in subclause
 21 ~~(XV)~~ or ~~(XVI)~~ of section 1902(a)(10)(A)(ii) of the
 22 Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii))
 23 must be used to supplement but not supplant the
 24 level of State funds expended as of October 1, 1998

1 for programs to enable working individuals with dis-
2 abilities to work.

3 ~~(2) MAINTENANCE OF EFFORT.~~—With respect
4 to a fiscal year quarter, no Federal funds may be
5 paid to a State for medical assistance provided to an
6 individual described in subclause ~~(XV)~~ or ~~(XVI)~~ of
7 section 1902(a)(10)(A)(ii) of the Social Security Act
8 ~~(42 U.S.C. 1396a(a)(10)(A)(ii))~~ for such fiscal year
9 quarter if the Secretary of Health and Human Serv-
10 ices determines that the total of the State expendi-
11 tures for programs to enable working individuals
12 with disabilities to work for the preceding fiscal year
13 quarter is less than the total of such expenditures
14 for the same fiscal year quarter of the preceding fis-
15 cal year.

16 ~~(3) CONDITION FOR APPROVAL OF STATE PLAN~~
17 ~~AMENDMENTS.~~—No State plan amendment that pro-
18 poses to provide medical assistance to an individual
19 described in subclause ~~(XV)~~ or ~~(XVI)~~ of section
20 1902(a)(10)(A)(ii) of the Social Security Act ~~(42~~
21 ~~U.S.C. 1396a(a)(10)(A)(ii))~~ may be approved unless
22 the chief executive officer of the State certifies to
23 the Secretary of Health and Human Services that
24 the plan, as so amended, will satisfy the require-
25 ments of paragraphs (1) and (2) of this subsection.

1 (d) ~~EFFECTIVE DATE.~~—

2 (1) ~~IN GENERAL.~~—The amendments made by
3 this section shall apply on and after October 1,
4 1999.

5 (2) ~~EXTENSION OF EFFECTIVE DATE FOR~~
6 ~~STATE LAW AMENDMENT.~~—In the case of a State
7 plan under title XIX of the Social Security Act
8 which the Secretary of Health and Human Services
9 determines requires State legislation in order for the
10 plan to meet the additional requirements imposed by
11 the amendments made by this section, the State
12 plan shall not be regarded as failing to comply with
13 the requirements of this section solely on the basis
14 of its failure to meet these additional requirements
15 before the first day of the first calendar quarter be-
16 ginning after the close of the first regular session of
17 the State legislature that begins after the date of en-
18 actment of this Act. For purposes of the previous
19 sentence, in the case of a State that has a 2-year
20 legislative session, each year of the session is consid-
21 ered to be a separate regular session of the State
22 legislature.

1 **SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR**
 2 **WORKING INDIVIDUALS WITH DISABILITIES.**

3 (a) **CONTINUATION OF COVERAGE.**—Section 1818A
 4 of the Social Security Act (42 U.S.C. 1395i–2a) is amend-
 5 ed by adding at the end the following:

6 “(c)(1) During the 10-year period beginning with the
 7 first month that begins after the date of enactment of this
 8 subsection, this section shall apply—

9 “(A) in subsection (a), by inserting—

10 “(i) in paragraph (2)(C), “on or after the
 11 date of enactment of the Work Incentives Im-
 12 provement Act of 1999” after “ends”; and

13 “(ii) “without being subject to a premium”
 14 before the period; and

15 “(B) without regard to subsections (c)(2)(D)
 16 and (d).

17 “(2) Any individual who, as of the date of enactment
 18 of this subsection is enrolled in the medicare program
 19 under this section and would, without regard to paragraph
 20 (1), otherwise satisfy the eligibility requirements for en-
 21 rollment set forth in subsection (a) shall be deemed to sat-
 22 isfy the requirement of subsection (a)(2)(C) of that section
 23 after the application of paragraph (1)(A)(i) for purposes
 24 of not being subject to a premium for enrollment in the
 25 medicare program under this section.

1 “(3) Notwithstanding paragraph (1), paragraph (1)
 2 shall continue to apply after the termination of the 10-
 3 year period described in that paragraph in the case of any
 4 individual who is enrolled in the medicare program under
 5 this section for the month that ends such 10-year period.”.

6 (b) GAO REPORT.—Not later than 8 years after the
 7 date of enactment of this Act, the Comptroller General
 8 of the United States shall submit a report to Congress
 9 that—

10 (1) examines the effectiveness and cost of sec-
 11 tion 1818A of the Social Security Act (42 U.S.C.
 12 1395i-2a) as amended by subsection (a); and

13 (2) recommends whether that section should
 14 continue to be applied, as so amended, beyond the
 15 10-year period described in subsection (e) of that
 16 section.

17 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
 18 **FRAStructures TO SUPPORT WORKING IN-**
 19 **DIVIDUALS WITH DISABILITIES.**

20 (a) ESTABLISHMENT.—

21 (1) IN GENERAL.—The Secretary of Health and
 22 Human Services (in this section referred to as the
 23 “Secretary”) shall award grants described in sub-
 24 section (b) to States to support the design, establish-
 25 ment, and operation of State infrastructures that

1 provide items and services to support working indi-
 2 viduals with disabilities. A State may submit an ap-
 3 plication for a grant authorized under this section at
 4 such time, in such manner, and containing such in-
 5 formation as the Secretary may determine.

6 (2) DEFINITION OF STATE.—In this section,
 7 the term “State” means each of the 50 States, the
 8 District of Columbia, Puerto Rico, Guam, the
 9 United States Virgin Islands, American Samoa, and
 10 the Commonwealth of the Northern Mariana Is-
 11 lands.

12 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
 13 REACH.—

14 (1) IN GENERAL.—Out of the funds appro-
 15 priated under subsection (c), the Secretary shall
 16 award grants to States to—

17 (A) support the establishment, implemen-
 18 tation, and operation of the State infrastruc-
 19 tures described in subsection (a); and

20 (B) conduct outreach campaigns regarding
 21 the existence of such infrastructures.

22 (2) ELIGIBILITY FOR GRANTS.—

23 (A) IN GENERAL.—No State may receive a
 24 grant under this subsection unless—

1 (i) the State has an approved amend-
2 ment to the State plan under title XIX of
3 the Social Security Act (42 U.S.C. 1396 et
4 seq.) that—

5 (I) provides medical assistance
6 under such plan to individuals de-
7 scribed in section
8 1902(a)(10)(A)(ii)(XV) of the Social
9 Security Act (42 U.S.C.
10 1396a(a)(10)(A)(ii)(XV)); or

11 (II) provides medical assistance
12 under such plan to individuals de-
13 scribed in subclauses (XV) and (XVI)
14 of section 1902(a)(10)(A)(ii) of the
15 Social Security Act (42 U.S.C.
16 1396a(a)(10)(A)(ii)); and

17 (ii) the State demonstrates to the sat-
18 isfaction of the Secretary that the State
19 makes personal assistance services avail-
20 able under the State plan under title XIX
21 of the Social Security Act (42 U.S.C. 1396
22 et seq.) to the extent necessary to enable
23 individuals described in subclause (I) or
24 (II) of clause (i) to remain employed (as
25 determined under section 1905(v)(2) of the

1 Social Security Act (42 U.S.C.
2 1396d(v)(2)).

3 (B) DEFINITION OF PERSONAL ASSIST-
4 ANCE SERVICES.—In this paragraph, the term
5 “personal assistance services” means a range of
6 services, provided by 1 or more persons, de-
7 signed to assist an individual with a disability
8 to perform daily activities on and off the job
9 that the individual would typically perform if
10 the individual did not have a disability. Such
11 services shall be designed to increase the indi-
12 vidual’s control in life and ability to perform ev-
13 eryday activities on or off the job.

14 (3) DETERMINATION OF AWARDS.—

15 (A) IN GENERAL.—Subject to subpara-
16 graph (B), the Secretary shall determine a for-
17 mula for awarding grants to States under this
18 section that provides special consideration to
19 States that provide medical assistance under
20 title XIX of the Social Security Act to individ-
21 uals described in section
22 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
23 1396a(a)(10)(A)(ii)(XVI)).

24 (B) AWARD LIMITS.—

1 (i) ~~MINIMUM AWARDS.~~—No State that
2 submits an approved application for fund-
3 ing under this section shall receive a grant
4 for a fiscal year that is less than \$500,000.

5 (ii) ~~MAXIMUM AWARDS.~~—No State
6 that submits an approved application for
7 funding under this section shall receive a
8 grant for a fiscal year that exceeds 15 per-
9 cent of the total expenditures by the State
10 (including the reimbursed Federal share of
11 such expenditures) for medical assistance
12 for individuals eligible under subclause
13 (XV) or (XVI) of section
14 1902(a)(10)(A)(ii), whichever is greater, as
15 estimated by the State and approved by
16 the Secretary.

17 (e) ~~AVAILABILITY OF FUNDS.~~—

18 (1) ~~FUNDS ALLOCATED TO STATES.~~—Funds al-
19 located to a State under a grant made under this
20 section for a fiscal year shall remain available until
21 expended.

22 (2) ~~FUNDS NOT ALLOCATED TO STATES.~~—
23 Funds not allocated to States in the fiscal year for
24 which they are appropriated shall remain available
25 in succeeding fiscal years for allocation by the Sec-

1 retary using the allocation formula established by
2 the Secretary under subsection (c)(3)(A).

3 (d) ANNUAL REPORT.—A State that receives a grant
4 under this section shall submit an annual report to the
5 Secretary on the use of funds provided under the grant.
6 Each report shall include the percentage increase in the
7 number of title II disability beneficiaries, as defined in sec-
8 tion 1148(k)(3) of the Social Security Act (as amended
9 by section 201) in the State, and title XVI disability bene-
10 ficiaries, as defined in section 1148(k)(4) of the Social Se-
11 curity Act (as so amended) in the State who return to
12 work.

13 (e) APPROPRIATION.—Out of any funds in the Treas-
14 ury not otherwise appropriated, there is authorized to be
15 appropriated and there is appropriated to make grants
16 under this section—

17 (1) for fiscal year 2000, \$20,000,000;

18 (2) for fiscal year 2001, \$25,000,000;

19 (3) for fiscal year 2002, \$30,000,000;

20 (4) for fiscal year 2003, \$35,000,000;

21 (5) for fiscal year 2004, \$40,000,000; and

22 (6) for fiscal years 2005 through 2010, the
23 amount appropriated for the preceding fiscal year
24 increased by the percentage increase (if any) in the
25 Consumer Price Index for All Urban Consumers

1 (United States city average) for the preceding fiscal
2 year.

3 (f) **RECOMMENDATION.**—Not later than October 1,
4 2009, the Secretary of Health and Human Services, in
5 consultation with the Work Incentives Advisory Panel es-
6 tablished under section 202, shall submit a recommenda-
7 tion to the Committee on Commerce and the Committee
8 on Ways and Means of the House of Representatives and
9 the Committee on Finance of the Senate regarding wheth-
10 er the grant program established under this section should
11 be continued after fiscal year 2010.

12 **SEC. 104. DEMONSTRATION OF COVERAGE OF WORKERS**
13 **WITH POTENTIALLY SEVERE DISABILITIES.**

14 (a) **STATE APPLICATION.**—A State may apply to the
15 Secretary of Health and Human Services (in this section
16 referred to as the “Secretary”) for approval of a dem-
17 onstration project (in this section referred to as a “dem-
18 onstration project”) under which up to a specified max-
19 imum number of individuals who are workers with a po-
20 tentially severe disability (as defined in subsection (b)(1))
21 are provided medical assistance equal to that provided
22 under section 1905(a) of the Social Security Act (42
23 U.S.C. 1396d(a)) to individuals described in section
24 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
25 1396a(a)(10)(A)(ii)(XV)).

1 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
 2 ABILITY DEFINED.—For purposes of this section—

3 (1) IN GENERAL.—The term “worker with a
 4 potentially severe disability” means, with respect to
 5 a demonstration project, an individual who—

6 (A) is at least 16, but less than 65, years
 7 of age;

8 (B) has a specific physical or mental im-
 9 pairment that, as defined by the State under
 10 the demonstration project, is reasonably ex-
 11 pected, but for the receipt of items and services
 12 described in section 1905(a) of the Social Secu-
 13 rity Act, to become blind or disabled (as defined
 14 under section 1614(a) of the Social Security
 15 Act); and

16 (C) is employed (as defined in paragraph
 17 (2)).

18 (2) DEFINITION OF EMPLOYED.—An individual
 19 is considered to be “employed” if the individual—

20 (A) is earning at least the applicable min-
 21 imum wage requirement under section 6 of the
 22 Fair Labor Standards Act (29 U.S.C. 206) and
 23 working at least 40 hours per month; or

24 (B) is engaged in a work effort that meets
 25 substantial and reasonable threshold criteria for

1 hours of work, wages, or other measures, as de-
2 fined under the demonstration project and ap-
3 proved by the Secretary.

4 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

5 (1) IN GENERAL.—Subject to paragraph (3),
6 the Secretary shall approve applications under sub-
7 section (a) that meet the requirements of paragraph
8 (2) and such additional terms and conditions as the
9 Secretary may require. The Secretary may waive the
10 requirement of section 1902(a)(1) of the Social Se-
11 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
12 State demonstrations.

13 (2) TERMS AND CONDITIONS OF DEMONSTRA-
14 TION PROJECTS.—The Secretary may not approve a
15 demonstration project under this section unless the
16 State provides assurances satisfactory to the Sec-
17 retary that the following conditions are or will be
18 met:

19 (A) ELECTION OF OPTIONAL CATEGORY.—

20 The State has elected to provide coverage under
21 its plan under title XIX of the Social Security
22 Act of individuals described in section
23 1902(a)(10)(A)(ii)(XV) of the Social Security
24 Act.

1 ~~(B) MAINTENANCE OF STATE EFFORT.—~~
 2 Federal funds paid to a State pursuant to this
 3 section must be used to supplement, but not
 4 supplant, the level of State funds expended for
 5 workers with potentially severe disabilities
 6 under programs in effect for such individuals at
 7 the time the demonstration project is approved
 8 under this section.

9 ~~(C) INDEPENDENT EVALUATION.—~~The
 10 State provides for an independent evaluation of
 11 the project.

12 ~~(3) LIMITATIONS ON FEDERAL FUNDING.—~~

13 ~~(A) APPROPRIATION.—~~Out of any funds in
 14 the Treasury not otherwise appropriated, there
 15 is authorized to be appropriated and there is
 16 appropriated to carry out this section—

17 (i) for fiscal year 2000, \$70,000,000;

18 (ii) for fiscal year 2001, \$73,000,000;

19 (iii) for fiscal year 2002, \$77,000,000;

20 and

21 (iv) for fiscal year 2003, \$80,000,000.

22 ~~(B) LIMITATION ON PAYMENTS.—~~In no
 23 ease may—

1 (i) the aggregate amount of payment
2 made by the Secretary to States under this
3 section exceed \$300,000,000; or

4 (ii) payment be provided by the Sec-
5 retary for a fiscal year after fiscal year
6 2005.

7 (C) FUNDS ALLOCATED TO STATES.—The
8 Secretary shall allocate funds to States based
9 on their applications and the availability of
10 funds. Funds allocated to a State under a grant
11 made under this section for a fiscal year shall
12 remain available until expended.

13 (D) FUNDS NOT ALLOCATED TO STATES.—
14 Funds not allocated to States in the fiscal year
15 for which they are appropriated shall remain
16 available in succeeding fiscal years for alloca-
17 tion by the Secretary using the allocation for-
18 mula established under this section.

19 (E) PAYMENTS TO STATES.—Subject to
20 the succeeding provisions of this section, the
21 Secretary shall pay to each State with a dem-
22 onstration project approved under this section,
23 from its allocation under subparagraph (C), an
24 amount for each quarter equal to the Federal
25 medical assistance percentage (as defined in

1 section 1905(b) of the Social Security Act (42
 2 U.S.C. 1395d(b)) of expenditures in the quarter
 3 for medical assistance provided to workers with
 4 a potentially severe disability.

5 (d) STATE DEFINED.—In this section, the term
 6 “State” has the meaning given such term for purposes of
 7 title XIX of the Social Security Act.

8 **TITLE II—TICKET TO WORK AND**
 9 **SELF-SUFFICIENCY AND RE-**
 10 **LATED PROVISIONS**

11 **Subtitle A—Ticket to Work and**
 12 **Self-Sufficiency**

13 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
 14 **SELF-SUFFICIENCY PROGRAM.**

15 (a) IN GENERAL.—Part A of title XI of the Social
 16 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
 17 ing after section 1147 (as added by section 8 of the Non-
 18 citizen Benefit Clarification and Other Technical Amend-
 19 ments Act of 1998 (Public Law 105–306; 112 Stat.
 20 2928)) the following:

21 “TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

22 “SEC. 1148. (a) IN GENERAL.—The Commissioner
 23 shall establish a Ticket to Work and Self-Sufficiency Pro-
 24 gram, under which a disabled beneficiary may use a ticket
 25 to work and self-sufficiency issued by the Commissioner
 26 in accordance with this section to obtain employment serv-

1 ices, vocational rehabilitation services, or other support
2 services from an employment network which is of the bene-
3 ficiary's choice and which is willing to provide such serv-
4 ices to the beneficiary.

5 “(b) TICKET SYSTEM.—

6 “(1) DISTRIBUTION OF TICKETS.—The Com-
7 missioner may issue a ticket to work and self-suffi-
8 ciency to disabled beneficiaries for participation in
9 the Program.

10 “(2) ASSIGNMENT OF TICKETS.—A disabled
11 beneficiary holding a ticket to work and self-suffi-
12 ciency may assign the ticket to any employment net-
13 work of the beneficiary's choice which is serving
14 under the Program and is willing to accept the as-
15 signment.

16 “(3) TICKET TERMS.—A ticket issued under
17 paragraph (1) shall consist of a document which evi-
18 dences the Commissioner's agreement to pay (as
19 provided in paragraph (4)) an employment network,
20 which is serving under the Program and to which
21 such ticket is assigned by the beneficiary, for such
22 employment services, vocational rehabilitation serv-
23 ices, and other support services as the employment
24 network may provide to the beneficiary.

1 “(4) PAYMENTS TO EMPLOYMENT NET-
2 WORKS.—The Commissioner shall pay an employ-
3 ment network under the Program in accordance with
4 the outcome payment system under subsection
5 (h)(2) or under the outcome-milestone payment sys-
6 tem under subsection (h)(3) (whichever is elected
7 pursuant to subsection (h)(1)). An employment net-
8 work may not request or receive compensation for
9 such services from the beneficiary.

10 “(c) STATE PARTICIPATION.—

11 “(1) IN GENERAL.—Each State agency admin-
12 istering or supervising the administration of the
13 State plan approved under title I of the Rehabilita-
14 tion Act of 1973 may elect to participate in the Pro-
15 gram as an employment network with respect to a
16 disabled beneficiary. If the State agency does elect
17 to participate in the Program, the State agency also
18 shall elect to be paid under the outcome payment
19 system or the outcome-milestone payment system in
20 accordance with subsection (h)(1). With respect to a
21 disabled beneficiary that the State agency does not
22 elect to have participate in the Program, the State
23 agency shall be paid for services provided to that
24 beneficiary under the system for payment applicable
25 under section 222(d) and subsections (d) and (e) of

1 section 1615. The Commissioner shall provide for
2 periodic opportunities for exercising such elections
3 (and revocations).

4 “(2) EFFECT OF PARTICIPATION BY STATE
5 AGENCY.—

6 “(A) STATE AGENCIES PARTICIPATING.—

7 In any case in which a State agency described
8 in paragraph (1) elects under that paragraph to
9 participate in the Program, the employment
10 services, vocational rehabilitation services, and
11 other support services which, upon assignment
12 of tickets to work and self-sufficiency, are pro-
13 vided to disabled beneficiaries by the State
14 agency acting as an employment network shall
15 be governed by plans for vocational rehabilita-
16 tion services approved under title I of the Reha-
17 bilitation Act of 1973.

18 “(B) STATE AGENCIES ADMINISTERING
19 MATERNAL AND CHILD HEALTH SERVICES PRO-
20 GRAMS.—Subparagraph (A) shall not apply
21 with respect to any State agency administering
22 a program under title V of this Act.

23 “(3) SPECIAL REQUIREMENTS APPLICABLE TO
24 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

1 “(A) IN GENERAL.—In any case in which
2 an employment network has been assigned a
3 ticket to work and self-sufficiency by a disabled
4 beneficiary, no State agency shall be deemed re-
5 quired, under this section, title I of the Work-
6 force Investment Act of 1998, title I of the Re-
7 habilitation Act of 1973, or a State plan ap-
8 proved under such title, to accept any referral
9 of such disabled beneficiary from such employ-
10 ment network unless such employment network
11 and such State agency have entered into a writ-
12 ten agreement that meets the requirements of
13 subparagraph (B). Any beneficiary who has as-
14 signed a ticket to work and self-sufficiency to
15 an employment network that has not entered
16 into such a written agreement with such a
17 State agency may not access vocational rehabili-
18 tation services under title I of the Rehabilita-
19 tion Act of 1973 until such time as the bene-
20 ficiary is reassigned to a State vocational reha-
21 bilitation agency by the Program Manager.

22 “(B) TERMS OF AGREEMENT.—An agree-
23 ment required by subparagraph (A) shall speci-
24 fy, in accordance with regulations prescribed
25 pursuant to subparagraph (C)—

1 “(i) the extent (if any) to which the
2 employment network holding the ticket will
3 provide to the State agency—

4 “(I) reimbursement for costs in-
5 curred in providing services described
6 in subparagraph (A) to the disabled
7 beneficiary; and

8 “(II) other amounts from pay-
9 ments made by the Commissioner to
10 the employment network pursuant to
11 subsection (h); and

12 “(ii) any other conditions that may be
13 required by such regulations.

14 “(C) REGULATIONS.—The Commissioner
15 and the Secretary of Education shall jointly
16 prescribe regulations specifying the terms of
17 agreements required by subparagraph (A) and
18 otherwise necessary to carry out the provisions
19 of this paragraph.

20 “(D) PENALTY.—No payment may be
21 made to an employment network pursuant to
22 subsection (h) in connection with services pro-
23 vided to any disabled beneficiary if such em-
24 ployment network makes referrals described in
25 subparagraph (A) in violation of the terms of

1 the agreement required under subparagraph (A)
2 or without having entered into such an agree-
3 ment.

4 “(d) RESPONSIBILITIES OF THE COMMISSIONER.—

5 “(1) SELECTION AND QUALIFICATIONS OF PRO-
6 GRAM MANAGERS.—The Commissioner shall enter
7 into agreements with 1 or more organizations in the
8 private or public sector for service as a program
9 manager to assist the Commissioner in admin-
10 istering the Program. Any such program manager
11 shall be selected by means of a competitive bidding
12 process, from among organizations in the private or
13 public sector with available expertise and experience
14 in the field of vocational rehabilitation and employ-
15 ment services.

16 “(2) TENURE, RENEWAL, AND EARLY TERMI-
17 NATION.—Each agreement entered into under para-
18 graph (1) shall provide for early termination upon
19 failure to meet performance standards which shall be
20 specified in the agreement and which shall be
21 weighted to take into account any performance in
22 prior terms. Such performance standards shall
23 include—

24 “(A) measures for ease of access by bene-
25 ficiaries to services; and

1 “(B) measures for determining the extent
2 to which failures in obtaining services for bene-
3 ficiaries fall within acceptable parameters, as
4 determined by the Commissioner.

5 “(3) PRECLUSION FROM DIRECT PARTICIPA-
6 TION IN DELIVERY OF SERVICES IN OWN SERVICE
7 AREA.—Agreements under paragraph (1) shall
8 preclude—

9 “(A) direct participation by a program
10 manager in the delivery of employment services,
11 vocational rehabilitation services, or other sup-
12 port services to beneficiaries in the service area
13 covered by the program manager’s agreement;
14 and

15 “(B) the holding by a program manager of
16 a financial interest in an employment network
17 or service provider which provides services in a
18 geographic area covered under the program
19 manager’s agreement.

20 “(4) SELECTION OF EMPLOYMENT NET-
21 WORKS.—

22 “(A) IN GENERAL.—The Commissioner
23 shall select and enter into agreements with em-
24 ployment networks for service under the Pro-
25 gram. Such employment networks shall be in

1 addition to State agencies serving as employ-
2 ment networks pursuant to elections under sub-
3 section (c).

4 “(B) ALTERNATE PARTICIPANTS.—In any
5 State where the Program is being implemented,
6 the Commissioner shall enter into an agreement
7 with any alternate participant that is operating
8 under the authority of section 222(d)(2) in the
9 State as of the date of enactment of this section
10 and chooses to serve as an employment network
11 under the Program.

12 “(5) TERMINATION OF AGREEMENTS WITH EM-
13 PLOYMENT NETWORKS.—The Commissioner shall
14 terminate agreements with employment networks for
15 inadequate performance, as determined by the Com-
16 missioner.

17 “(6) QUALITY ASSURANCE.—The Commissioner
18 shall provide for such periodic reviews as are nec-
19 essary to provide for effective quality assurance in
20 the provision of services by employment networks.
21 The Commissioner shall solicit and consider the
22 views of consumers and the program manager under
23 which the employment networks serve and shall con-
24 sult with providers of services to develop perform-
25 ance measurements. The Commissioner shall ensure

1 that the results of the periodic reviews are made
2 available to beneficiaries who are prospective service
3 recipients as they select employment networks. The
4 Commissioner shall ensure that the periodic surveys
5 of beneficiaries receiving services under the Program
6 are designed to measure customer service satisfac-
7 tion.

8 “(7) DISPUTE RESOLUTION.—The Commis-
9 sioner shall provide for a mechanism for resolving
10 disputes between beneficiaries and employment net-
11 works, between program managers and employment
12 networks, and between program managers and pro-
13 viders of services. The Commissioner shall afford a
14 party to such a dispute a reasonable opportunity for
15 a full and fair review of the matter in dispute.

16 “(e) PROGRAM MANAGERS.—

17 “(1) IN GENERAL.—A program manager shall
18 conduct tasks appropriate to assist the Commis-
19 sioner in carrying out the Commissioner’s duties in
20 administering the Program.

21 “(2) RECRUITMENT OF EMPLOYMENT NET-
22 WORKS.—A program manager shall recruit, and rec-
23 ommend for selection by the Commissioner, employ-
24 ment networks for service under the Program. The
25 program manager shall carry out such recruitment

1 and provide such recommendations, and shall mon-
2 itor all employment networks serving in the Program
3 in the geographic area covered under the program
4 manager's agreement, to the extent necessary and
5 appropriate to ensure that adequate choices of serv-
6 ices are made available to beneficiaries. Employment
7 networks may serve under the Program only pursu-
8 ant to an agreement entered into with the Commis-
9 sioner under the Program incorporating the applica-
10 ble provisions of this section and regulations there-
11 under, and the program manager shall provide and
12 maintain assurances to the Commissioner that pay-
13 ment by the Commissioner to employment networks
14 pursuant to this section is warranted based on com-
15 pliance by such employment networks with the terms
16 of such agreement and this section. The program
17 manager shall not impose numerical limits on the
18 number of employment networks to be recommended
19 pursuant to this paragraph.

20 “(3) FACILITATION OF ACCESS BY BENE-
21 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
22 gram manager shall facilitate access by beneficiaries
23 to employment networks. The program manager
24 shall ensure that each beneficiary is allowed changes
25 in employment networks for good cause, as deter-

1 mined by the Commissioner, without being deemed
2 to have rejected services under the Program. The
3 program manager shall establish and maintain lists
4 of employment networks available to beneficiaries
5 and shall make such lists generally available to the
6 public. The program manager shall ensure that all
7 information provided to disabled beneficiaries pursu-
8 ant to this paragraph is provided in accessible for-
9 mats.

10 “(4) ENSURING AVAILABILITY OF ADEQUATE
11 SERVICES.—The program manager shall ensure that
12 employment services, vocational rehabilitation serv-
13 ices, and other support services are provided to
14 beneficiaries throughout the geographic area covered
15 under the program manager’s agreement, including
16 rural areas.

17 “(5) REASONABLE ACCESS TO SERVICES.—The
18 program manager shall take such measures as are
19 necessary to ensure that sufficient employment net-
20 works are available and that each beneficiary receiv-
21 ing services under the Program has reasonable ac-
22 cess to employment services, vocational rehabilitation
23 services, and other support services. Services pro-
24 vided under the Program may include case manage-
25 ment, work incentives planning, supported employ-

1 ment, career planning, career plan development, vo-
 2 cational assessment, job training, placement, fol-
 3 lowup services, and such other services as may be
 4 specified by the Commissioner under the Program.
 5 The program manager shall ensure that such serv-
 6 ices are available in each service area.

7 ~~“(f) EMPLOYMENT NETWORKS.—~~

8 ~~“(1) QUALIFICATIONS FOR EMPLOYMENT NET-~~
 9 ~~WORKS.—~~

10 ~~“(A) IN GENERAL.—Each employment net-~~
 11 ~~work serving under the Program shall consist of~~
 12 ~~an agency or instrumentality of a State (or a~~
 13 ~~political subdivision thereof) or a private entity~~
 14 ~~that assumes responsibility for the coordination~~
 15 ~~and delivery of services under the Program to~~
 16 ~~individuals assigning to the employment net-~~
 17 ~~work tickets to work and self-sufficiency issued~~
 18 ~~under subsection (b).~~

19 ~~“(B) ONE-STOP DELIVERY SYSTEMS.—An~~
 20 ~~employment network serving under the Pro-~~
 21 ~~gram may consist of a one-stop delivery system~~
 22 ~~established under subtitle B of title I of the~~
 23 ~~Workforce Investment Act of 1998.~~

24 ~~“(C) COMPLIANCE WITH SELECTION CRI-~~
 25 ~~TERIA.—No employment network may serve~~

1 under the Program unless it meets and main-
 2 tains compliance with both general selection cri-
 3 teria (such as professional and educational
 4 qualifications (where applicable)) and specific
 5 selection criteria (such as substantial expertise
 6 and experience in providing relevant employ-
 7 ment services and supports).

8 “(D) SINGLE OR ASSOCIATED PROVIDERS
 9 ALLOWED.—An employment network shall con-
 10 sist of either a single provider of such services
 11 or of an association of such providers organized
 12 so as to combine their resources into a single
 13 entity. An employment network may meet the
 14 requirements of subsection (e)(4) by providing
 15 services directly, or by entering into agreements
 16 with other individuals or entities providing ap-
 17 propriate employment services, vocational reha-
 18 bilitation services, or other support services.

19 “(2) REQUIREMENTS RELATING TO PROVISION
 20 OF SERVICES.—Each employment network serving
 21 under the Program shall be required under the
 22 terms of its agreement with the Commissioner to—

23 “(A) serve prescribed service areas; and

24 “(B) take such measures as are necessary
 25 to ensure that employment services, vocational

1 rehabilitation services, and other support serv-
2 ices provided under the Program by, or under
3 agreements entered into with, the employment
4 network are provided under appropriate indi-
5 vidual work plans meeting the requirements of
6 subsection (g).

7 “(3) ANNUAL FINANCIAL REPORTING.—Each
8 employment network shall meet financial reporting
9 requirements as prescribed by the Commissioner.

10 “(4) PERIODIC OUTCOMES REPORTING.—Each
11 employment network shall prepare periodic reports,
12 on at least an annual basis, itemizing for the covered
13 period specific outcomes achieved with respect to
14 specific services provided by the employment net-
15 work. Such reports shall conform to a national
16 model prescribed under this section. Each employ-
17 ment network shall provide a copy of the latest re-
18 port issued by the employment network pursuant to
19 this paragraph to each beneficiary upon enrollment
20 under the Program for services to be received
21 through such employment network. Upon issuance of
22 each report to each beneficiary, a copy of the report
23 shall be maintained in the files of the employment
24 network. The program manager shall ensure that
25 copies of all such reports issued under this para-

1 graph are made available to the public under reason-
2 able terms.

3 “(g) **INDIVIDUAL WORK PLANS.**—

4 “(1) **REQUIREMENTS.**—Each employment net-
5 work shall—

6 “(A) take such measures as are necessary
7 to ensure that employment services, vocational
8 rehabilitation services, and other support serv-
9 ices provided under the Program by, or under
10 agreements entered into with, the employment
11 network are provided under appropriate indi-
12 vidual work plans that meet the requirements of
13 subparagraph (C);

14 “(B) develop and implement each such in-
15 dividual work plan in partnership with each
16 beneficiary receiving such services in a manner
17 that affords the beneficiary the opportunity to
18 exercise informed choice in selecting an employ-
19 ment goal and specific services needed to
20 achieve that employment goal;

21 “(C) ensure that each individual work plan
22 includes at least—

23 “(i) a statement of the vocational goal
24 developed with the beneficiary;

1 “(ii) a statement of the services and
2 supports that have been deemed necessary
3 for the beneficiary to accomplish that goal;

4 “(iii) a statement of any terms and
5 conditions related to the provision of such
6 services and supports; and

7 “(iv) a statement of understanding re-
8 garding the beneficiary’s rights under the
9 Program (such as the right to retrieve the
10 ticket to work and self-sufficiency if the
11 beneficiary is dissatisfied with the services
12 being provided by the employment net-
13 work) and remedies available to the indi-
14 vidual, including information on the avail-
15 ability of advocacy services and assistance
16 in resolving disputes through the State
17 grant program authorized under section
18 1150;

19 “(D) provide a beneficiary the opportunity
20 to amend the individual work plan if a change
21 in circumstances necessitates a change in the
22 plan; and

23 “(E) make each beneficiary’s individual
24 work plan available to the beneficiary in, as ap-

1 appropriate, an accessible format chosen by the
2 beneficiary.

3 ~~“(2) EFFECTIVE UPON WRITTEN APPROVAL.—~~

4 A beneficiary’s individual work plan shall take effect
5 upon written approval by the beneficiary or a rep-
6 resentative of the beneficiary and a representative of
7 the employment network that, in providing such
8 written approval, acknowledges assignment of the
9 beneficiary’s ticket to work and self-sufficiency.

10 ~~“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—~~

11 ~~“(1) ELECTION OF PAYMENT SYSTEM BY EM-
12 PLOYMENT NETWORKS.—~~

13 ~~“(A) IN GENERAL.—The Program shall~~
14 provide for payment authorized by the Commis-
15 sioner to employment networks under either an
16 outcome payment system or an outcome-mile-
17 stone payment system. Each employment net-
18 work shall elect which payment system will be
19 utilized by the employment network, and, for
20 such period of time as such election remains in
21 effect, the payment system so elected shall be
22 utilized exclusively in connection with such em-
23 ployment network (except as provided in sub-
24 paragraph (B)).

1 “(B) NO CHANGE IN METHOD OF PAY-
2 MENT FOR BENEFICIARIES WITH TICKETS AL-
3 READY ASSIGNED TO THE EMPLOYMENT NET-
4 WORKS.—Any election of a payment system by
5 an employment network that would result in a
6 change in the method of payment to the em-
7 ployment network for services provided to a
8 beneficiary who is receiving services from the
9 employment network at the time of the election
10 shall not be effective with respect to payment
11 for services provided to that beneficiary and the
12 method of payment previously selected shall
13 continue to apply with respect to such services.

14 “(2) OUTCOME PAYMENT SYSTEM.—

15 “(A) IN GENERAL.—The outcome payment
16 system shall consist of a payment structure gov-
17 erning employment networks electing such sys-
18 tem under paragraph (1)(A) which meets the
19 requirements of this paragraph.

20 “(B) PAYMENTS MADE DURING OUTCOME
21 PAYMENT PERIOD.—The outcome payment sys-
22 tem shall provide for a schedule of payments to
23 an employment network in connection with each
24 individual who is a beneficiary for each month
25 during the individual’s outcome payment period

1 for which benefits (described in paragraphs (3)
 2 and (4) of subsection (k)) are not payable to
 3 such individual because of work or earnings.

4 “(C) COMPUTATION OF PAYMENTS TO EM-
 5 PLOYMENT NETWORK.—The payment schedule
 6 of the outcome payment system shall be de-
 7 signed so that—

8 “(i) the payment for each of the 60
 9 months during the outcome payment pe-
 10 riod for which benefits (described in para-
 11 graphs (3) and (4) of subsection (k)) are
 12 not payable is equal to a fixed percentage
 13 of the payment calculation base for the cal-
 14 endar year in which such month occurs;
 15 and

16 “(ii) such fixed percentage is set at a
 17 percentage which does not exceed 40 per-
 18 cent.

19 “(3) OUTCOME-MILESTONE PAYMENT SYS-
 20 TEM.—

21 “(A) IN GENERAL.—The outcome-mile-
 22 stone payment system shall consist of a pay-
 23 ment structure governing employment networks
 24 electing such system under paragraph (1)(A)

1 which meets the requirements of this para-
2 graph.

3 “(B) ~~EARLY PAYMENTS UPON ATTAIN-~~
4 ~~MENT OF MILESTONES IN ADVANCE OF OUT-~~
5 ~~COME PAYMENT PERIODS.~~—The outcome-mile-
6 stone payment system shall provide for 1 or
7 more milestones with respect to beneficiaries re-
8 ceiving services from an employment network
9 under the Program that are directed toward the
10 goal of permanent employment. Such milestones
11 shall form a part of a payment structure that
12 provides, in addition to payments made during
13 outcome payment periods, payments made prior
14 to outcome payment periods in amounts based
15 on the attainment of such milestones.

16 “(C) ~~LIMITATION ON TOTAL PAYMENTS TO~~
17 ~~EMPLOYMENT NETWORK.~~—The payment sched-
18 ule of the outcome-milestone payment system
19 shall be designed so that the total of the pay-
20 ments to the employment network with respect
21 to each beneficiary is less than, on a net
22 present value basis (using an interest rate de-
23 termined by the Commissioner that appro-
24 priately reflects the cost of funds faced by pro-
25 viders), the total amount to which payments to

1 the employment network with respect to the
 2 beneficiary would be limited if the employment
 3 network were paid under the outcome payment
 4 system.

5 “(4) DEFINITIONS.—In this subsection:

6 “(A) PAYMENT CALCULATION BASE.—The
 7 term ‘payment calculation base’ means, for any
 8 calendar year—

9 “(i) in connection with a title II dis-
 10 ability beneficiary, the average disability
 11 insurance benefit payable under section
 12 223 for all beneficiaries for months during
 13 the preceding calendar year; and

14 “(ii) in connection with a title XVI
 15 disability beneficiary (who is not concu-
 16 rently a title II disability beneficiary), the
 17 average payment of supplemental security
 18 income benefits based on disability payable
 19 under title XVI (excluding State sup-
 20 plementation) for months during the pre-
 21 ceeding calendar year to all beneficiaries
 22 who have attained age 18 but have not at-
 23 tained age 65.

24 “(B) OUTCOME PAYMENT PERIOD.—The
 25 term ‘outcome payment period’ means, in con-

1 nection with any individual who had assigned a
 2 ticket to work and self-sufficiency to an employ-
 3 ment network under the Program, a period—

4 “(i) beginning with the first month,
 5 ending after the date on which such ticket
 6 was assigned to the employment network,
 7 for which benefits (described in paragraphs
 8 (3) and (4) of subsection (k)) are not pay-
 9 able to such individual by reason of en-
 10 gagement in substantial gainful activity or
 11 by reason of earnings from work activity;
 12 and

13 “(ii) ending with the 60th month
 14 (consecutive or otherwise), ending after
 15 such date, for which such benefits are not
 16 payable to such individual by reason of en-
 17 gagement in substantial gainful activity or
 18 by reason of earnings from work activity.

19 “(5) PERIODIC REVIEW AND ALTERATIONS OF
 20 PRESCRIBED SCHEDULES.—

21 “(A) PERCENTAGES AND PERIODS.—The
 22 Commissioner shall periodically review the per-
 23 centage specified in paragraph (2)(C), the total
 24 payments permissible under paragraph (3)(C),
 25 and the period of time specified in paragraph

1 (4)(B) to determine whether such percentages,
2 such permissible payments, and such period
3 provide an adequate incentive for employment
4 networks to assist beneficiaries to enter the
5 workforce, while providing for appropriate
6 economies. The Commissioner may alter such
7 percentage, such total permissible payments, or
8 such period of time to the extent that the Com-
9 missioner determines, on the basis of the Com-
10 missioner's review under this paragraph, that
11 such an alteration would better provide the in-
12 centive and economies described in the pre-
13 ceding sentence.

14 “(B) NUMBER AND AMOUNTS OF MILE-
15 STONE PAYMENTS.—The Commissioner shall
16 periodically review the number and amounts of
17 milestone payments established by the Commis-
18 sioner pursuant to this section to determine
19 whether they provide an adequate incentive for
20 employment networks to assist beneficiaries to
21 enter the workforce, taking into account infor-
22 mation provided to the Commissioner by pro-
23 gram managers, the Work Incentives Advisory
24 Panel established under section 202 of the
25 Work Incentives Improvement Act of 1999, and

1 other reliable sources. The Commissioner may
2 from time to time alter the number and
3 amounts of milestone payments initially estab-
4 lished by the Commissioner pursuant to this
5 section to the extent that the Commissioner de-
6 termines that such an alteration would allow an
7 adequate incentive for employment networks to
8 assist beneficiaries to enter the workforce. Such
9 alteration shall be based on information pro-
10 vided to the Commissioner by program man-
11 agers, the Work Incentives Advisory Panel es-
12 tablished under section 202 of the Work Incen-
13 tives Improvement Act of 1999, or other reli-
14 able sources.

15 “(i) **SUSPENSION OF DISABILITY REVIEWS.**—During
16 any period for which an individual is using, as defined by
17 the Commissioner, a ticket to work and self-sufficiency
18 issued under this section, the Commissioner (and any ap-
19 plicable State agency) may not initiate a continuing dis-
20 ability review or other review under section 221 of whether
21 the individual is or is not under a disability or a review
22 under title XVI similar to any such review under section
23 221.

24 “(j) **ALLOCATION OF COSTS.**—

1 “(1) PAYMENTS TO EMPLOYMENT NET-
2 WORKS.—Payments to employment networks (in-
3 cluding State agencies that elect to participate in the
4 Program as an employment network) shall be made
5 from the Federal Old-Age and Survivors Insurance
6 Trust Fund or the Federal Disability Insurance
7 Trust Fund, as appropriate, in the case of ticketed
8 title II disability beneficiaries who return to work,
9 or from the appropriation made available for making
10 supplemental security income payments under title
11 XVI, in the case of title XVI disability beneficiaries
12 who return to work. With respect to ticketed bene-
13 ficiaries who concurrently are entitled to benefits
14 under title II and eligible for payments under title
15 XVI who return to work, the Commissioner shall al-
16 locate the cost of payments to employment networks
17 to which the tickets of such beneficiaries have been
18 assigned among such Trust Funds and appropria-
19 tion, as appropriate.

20 “(2) ADMINISTRATIVE EXPENSES.—The costs
21 of administering this section (other than payments
22 to employment networks) shall be paid from
23 amounts made available for the administration of
24 title II and amounts made available for the adminis-

1 tration of title XVI, and shall be allocated among
2 those amounts as appropriate.

3 “(k) DEFINITIONS.—In this section:

4 “(1) COMMISSIONER.—The term ‘Commis-
5 sioner’ means the Commissioner of Social Security.

6 “(2) DISABLED BENEFICIARY.—The term ‘dis-
7 abled beneficiary’ means a title II disability bene-
8 ficiary or a title XVI disability beneficiary.

9 “(3) TITLE II DISABILITY BENEFICIARY.—The
10 term ‘title II disability beneficiary’ means an indi-
11 vidual entitled to disability insurance benefits under
12 section 223 or to monthly insurance benefits under
13 section 202 based on such individual’s disability (as
14 defined in section 223(d)). An individual is a title II
15 disability beneficiary for each month for which such
16 individual is entitled to such benefits.

17 “(4) TITLE XVI DISABILITY BENEFICIARY.—
18 The term ‘title XVI disability beneficiary’ means an
19 individual eligible for supplemental security income
20 benefits under title XVI on the basis of blindness
21 (within the meaning of section 1614(a)(2)) or dis-
22 ability (within the meaning of section 1614(a)(3)).
23 An individual is a title XVI disability beneficiary for
24 each month for which such individual is eligible for
25 such benefits.

1 “(5) SUPPLEMENTAL SECURITY INCOME BEN-
 2 EFIT UNDER TITLE XVI.—The term ‘supplemental
 3 security income benefit under title XVI’ means a
 4 cash benefit under section 1611 or 1619(a), and
 5 does not include a State supplementary payment,
 6 administered federally or otherwise.

7 “(1) REGULATIONS.—Not later than 1 year after the
 8 date of enactment of this section, the Commissioner shall
 9 prescribe such regulations as are necessary to carry out
 10 the provisions of this section.

11 “(m) SUNSET OF PROGRAM.—The Program estab-
 12 lished under this section shall terminate on September 30,
 13 2004.”.

14 (b) CONFORMING AMENDMENTS.—

15 (1) AMENDMENTS TO TITLE II.—

16 (A) Section 221(i) of the Social Security
 17 Act (42 U.S.C. 421(i)) is amended by adding at
 18 the end the following:

19 “(5) For suspension of reviews under this subsection
 20 in the case of an individual using a ticket to work and
 21 self-sufficiency, see section 1148(i).”.

22 (B) Section 222(a) of the Social Security
 23 Act (42 U.S.C. 422(a)) is repealed.

24 (C) Section 222(b) of the Social Security
 25 Act (42 U.S.C. 422(b)) is repealed.

1 (D) Section 225(b)(1) of the Social Secu-
2 rity Act (42 U.S.C. 425(b)(1)) is amended by
3 striking “a program of vocational rehabilitation
4 services” and inserting “a program consisting
5 of the Ticket to Work and Self-Sufficiency Pro-
6 gram under section 1148 or another program of
7 vocational rehabilitation services, employment
8 services, or other support services”.

9 (2) AMENDMENTS TO TITLE XVI.—

10 (A) Section 1615(a) of the Social Security
11 Act (42 U.S.C. 1382d(a)) is amended to read
12 as follows:

13 “SEC. 1615. (a) In the case of any blind or disabled
14 individual who—

15 “~~(1)~~ has not attained age 16, and

16 “~~(2)~~ with respect to whom benefits are paid
17 under this title,

18 the Commissioner of Social Security shall make provision
19 for referral of such individual to the appropriate State
20 agency administering the State program under title V.”.

21 (B) Section 1615(e) of the Social Security
22 Act (42 U.S.C. 1382d(e)) is repealed.

23 (C) Section 1631(a)(6)(A) of the Social
24 Security Act (42 U.S.C. 1383(a)(6)(A)) is
25 amended by striking “a program of vocational

1 rehabilitation services” and inserting “a pro-
 2 gram consisting of the Ticket to Work and Self-
 3 Sufficiency Program under section 1148 or an-
 4 other program of vocational rehabilitation serv-
 5 ices, employment services, or other support
 6 services”.

7 (D) Section 1633(c) of the Social Security
 8 Act (42 U.S.C. 1383b(c)) is amended—

9 (i) by inserting “(1)” after “(c)”; and

10 (ii) by adding at the end the fol-
 11 lowing:

12 “(2) For suspension of continuing disability reviews
 13 and other reviews under this title similar to reviews under
 14 section 221 in the case of an individual using a ticket to
 15 work and self-sufficiency, see section 1148(i).”.

16 (e) EFFECTIVE DATE.—Subject to subsection (d),
 17 the amendments made by subsections (a) and (b) shall
 18 take effect with the first month following 1 year after the
 19 date of enactment of this Act.

20 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

21 (1) IN GENERAL.—Not later than 1 year after
 22 the date of enactment of this Act, the Commissioner
 23 of Social Security shall commence implementation of
 24 the amendments made by this section (other than
 25 paragraphs (1)(C) and (2)(B) of subsection (b)) in

1 graduated phases at phase-in sites selected by the
2 Commissioner. Such phase-in sites shall be selected
3 so as to ensure, prior to full implementation of the
4 Ticket to Work and Self-Sufficiency Program, the
5 development and refinement of referral processes,
6 payment systems, computer linkages, management
7 information systems, and administrative processes
8 necessary to provide for full implementation of such
9 amendments. Subsection (e) shall apply with respect
10 to paragraphs (1)(C) and (2)(B) of subsection (b)
11 without regard to this subsection.

12 (2) REQUIREMENTS.—Implementation of the
13 Program at each phase-in site shall be carried out
14 on a wide enough scale to permit a thorough evalua-
15 tion of the alternative methods under consideration,
16 so as to ensure that the most efficacious methods
17 are determined and in place for full implementation
18 of the Program on a timely basis.

19 (3) FULL IMPLEMENTATION.—The Commis-
20 sioner shall ensure that the ability to provide tickets
21 and services to individuals under the Program exists
22 in every State as soon as practicable on or after the
23 effective date specified in subsection (e) but not later
24 than 3 years after such date.

25 (4) ONGOING EVALUATION OF PROGRAM.—

1 (A) IN GENERAL.—The Commissioner
2 shall design and conduct a series of evaluations
3 to assess the cost-effectiveness of activities ear-
4 ried out under this section and the amendments
5 made thereby, as well as the effects of this sec-
6 tion and the amendments made thereby on
7 work outcomes for beneficiaries receiving tickets
8 to work and self-sufficiency under the Program.

9 (B) CONSULTATION.—The Commissioner
10 shall design and carry out the series of evalua-
11 tions after receiving relevant advice from ex-
12 perts in the fields of disability, vocational reha-
13 bilitation, and program evaluation and individ-
14 uals using tickets to work and self-sufficiency
15 under the Program and consulting with the
16 Work Incentives Advisory Panel established
17 under section 202, the Comptroller General of
18 the United States, other agencies of the Federal
19 Government, and private organizations with ap-
20 propriate expertise.

21 (C) METHODOLOGY.—

22 (i) IMPLEMENTATION.—The Commis-
23 sioner, in consultation with the Work In-
24 centives Advisory Panel established under
25 section 202, shall ensure that plans for

1 evaluations and data collection methods
2 under the Program are appropriately de-
3 signed to obtain detailed employment infor-
4 mation.

5 (ii) SPECIFIC MATTERS TO BE AD-
6 DRESSED.—Each such evaluation shall ad-
7 dress (but is not limited to)—

8 (I) the annual cost (including net
9 cost) of the Program and the annual
10 cost (including net cost) that would
11 have been incurred in the absence of
12 the Program;

13 (II) the determinants of return to
14 work, including the characteristics of
15 beneficiaries in receipt of tickets
16 under the Program;

17 (III) the types of employment
18 services, vocational rehabilitation serv-
19 ices, and other support services fur-
20 nished to beneficiaries in receipt of
21 tickets under the Program who return
22 to work and to those who do not re-
23 turn to work;

24 (IV) the duration of employment
25 services, vocational rehabilitation serv-

1 ices, and other support services fur-
2 nished to beneficiaries in receipt of
3 tickets under the Program who return
4 to work and the duration of such serv-
5 ices furnished to those who do not re-
6 turn to work and the cost to employ-
7 ment networks of furnishing such
8 services;

9 (V) the employment outcomes,
10 including wages, occupations, benefits,
11 and hours worked, of beneficiaries
12 who return to work after receiving
13 tickets under the Program and those
14 who return to work without receiving
15 such tickets;

16 (VI) the characteristics of pro-
17 viders whose services are provided
18 within an employment network under
19 the Program;

20 (VII) the extent (if any) to which
21 employment networks display a great-
22 er willingness to provide services to
23 beneficiaries with a range of disabil-
24 ities;

1 (VIII) the characteristics (includ-
2 ing employment outcomes) of those
3 beneficiaries who receive services
4 under the outcome payment system
5 and of those beneficiaries who receive
6 services under the outcome-milestone
7 payment system;

8 (IX) measures of satisfaction
9 among beneficiaries in receipt of tick-
10 ets under the Program; and

11 (X) reasons for (including com-
12 ments solicited from beneficiaries re-
13 garding) their choice not to use their
14 tickets or their inability to return to
15 work despite the use of their tickets.

16 (D) PERIODIC EVALUATION REPORTS.—

17 Following the close of the third and fifth fiscal
18 years ending after the effective date under sub-
19 section (c); and prior to the close of the seventh
20 fiscal year ending after such date, the Commis-
21 sioner shall transmit to the Committee on Ways
22 and Means of the House of Representatives and
23 the Committee on Finance of the Senate a re-
24 port containing the Commissioner's evaluation
25 of the progress of activities conducted under the

1 provisions of this section and the amendments
2 made thereby. Each such report shall set forth
3 the Commissioner's evaluation of the extent to
4 which the Program has been successful and the
5 Commissioner's conclusions on whether or how
6 the Program should be modified. Each such re-
7 port shall include such data, findings, materials,
8 and recommendations as the Commissioner may
9 consider appropriate.

10 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
11 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
12 AMENDMENTS IN SUCH STATE.—

13 (A) IN GENERAL.—In the case of any
14 State in which the amendments made by sub-
15 section (a) have not been fully implemented
16 pursuant to this subsection, the Commissioner
17 shall determine by regulation the extent to
18 which—

19 (i) the requirement under section
20 222(a) of the Social Security Act for
21 prompt referrals to a State agency; and

22 (ii) the authority of the Commissioner
23 under section 222(d)(2) of the Social Secu-
24 rity Act to provide vocational rehabilitation
25 services in such State by agreement or

1 contract with other public or private agen-
 2 cies, organizations, institutions, or individ-
 3 uals,

4 shall apply in such State.

5 (B) EXISTING AGREEMENTS.—Nothing in
 6 subparagraph (A) or the amendments made by
 7 subsection (a) shall be construed to limit, im-
 8 pede, or otherwise affect any agreement entered
 9 into pursuant to section 222(d)(2) of the Social
 10 Security Act before the date of enactment of
 11 this Act with respect to services provided pursu-
 12 ant to such agreement to beneficiaries receiving
 13 services under such agreement as of such date,
 14 except with respect to services (if any) to be
 15 provided after 3 years after the effective date
 16 provided in subsection (c).

17 (c) SPECIFIC REGULATIONS REQUIRED.—

18 (1) IN GENERAL.—The Commissioner of Social
 19 Security shall prescribe such regulations as are nec-
 20 essary to implement the amendments made by this
 21 section.

22 (2) SPECIFIC MATTERS TO BE INCLUDED IN
 23 REGULATIONS.—The matters which shall be ad-
 24 dressed in such regulations shall include—

1 (A) the form and manner in which tickets
2 to work and self-sufficiency may be distributed
3 to beneficiaries pursuant to section 1148(b)(1)
4 of the Social Security Act;

5 (B) the format and wording of such tick-
6 ets, which shall incorporate by reference any
7 contractual terms governing service by employ-
8 ment networks under the Program;

9 (C) the form and manner in which State
10 agencies may elect participation in the Ticket to
11 Work and Self-Sufficiency Program (and revoke
12 such an election) pursuant to section
13 1148(c)(1) of the Social Security Act and provi-
14 sion for periodic opportunities for exercising
15 such elections (and revocations);

16 (D) the status of State agencies under sec-
17 tion 1148(e)(1) at the time that State agencies
18 exercise elections (and revocations) under that
19 section;

20 (E) the terms of agreements to be entered
21 into with program managers pursuant to sec-
22 tion 1148(d) of the Social Security Act,
23 including—

24 (i) the terms by which program man-
25 agers are precluded from direct participa-

1 tion in the delivery of services pursuant to
2 section 1148(d)(3) of the Social Security
3 Act;

4 (ii) standards which must be met by
5 quality assurance measures referred to in
6 paragraph (6) of section 1148(d) and
7 methods of recruitment of employment net-
8 works utilized pursuant to paragraph (2)
9 of section 1148(e); and

10 (iii) the format under which dispute
11 resolution will operate under section
12 1148(d)(7);

13 (F) the terms of agreements to be entered
14 into with employment networks pursuant to sec-
15 tion 1148(d)(4) of the Social Security Act,
16 including—

17 (i) the manner in which service areas
18 are specified pursuant to section
19 1148(f)(2)(A) of the Social Security Act;

20 (ii) the general selection criteria and
21 the specific selection criteria which are ap-
22 plicable to employment networks under
23 section 1148(f)(1)(C) of the Social Secu-
24 rity Act in selecting service providers;

1 (iii) specific requirements relating to
2 annual financial reporting by employment
3 networks pursuant to section 1148(f)(3) of
4 the Social Security Act; and

5 (iv) the national model to which peri-
6 odic outcomes reporting by employment
7 networks must conform under section
8 1148(f)(4) of the Social Security Act;

9 (G) standards which must be met by indi-
10 vidual work plans pursuant to section 1148(g)
11 of the Social Security Act;

12 (H) standards which must be met by pay-
13 ment systems required under section 1148(h) of
14 the Social Security Act, including—

15 (i) the form and manner in which
16 elections by employment networks of pay-
17 ment systems are to be exercised pursuant
18 to section 1148(h)(1)(A);

19 (ii) the terms which must be met by
20 an outcome payment system under section
21 1148(h)(2);

22 (iii) the terms which must be met by
23 an outcome-milestone payment system
24 under section 1148(h)(3);

- 1 (iv) any revision of the percentage
2 specified in paragraph (2)(C) of section
3 1148(h) of the Social Security Act or the
4 period of time specified in paragraph
5 (4)(B) of such section 1148(h); and
6 (v) annual oversight procedures for
7 such systems; and
8 (I) procedures for effective oversight of the
9 Program by the Commissioner of Social Secu-
10 rity, including periodic reviews and reporting
11 requirements.

12 **SEC. 202. WORK INCENTIVES ADVISORY PANEL.**

13 (a) **ESTABLISHMENT.**—There is established within
14 the Social Security Administration a panel to be known
15 as the “Work Incentives Advisory Panel” (in this section
16 referred to as the “Panel”).

17 (b) **DUTIES OF PANEL.**—It shall be the duty of the
18 Panel to—

19 (1) advise the Secretary of Health and Human
20 Services, the Secretary of Labor, the Secretary of
21 Education, and the Commissioner of Social Security
22 on issues related to work incentives programs, plan-
23 ning, and assistance for individuals with disabilities,
24 including work incentive provisions under titles II,
25 XI, XVI, XVIII, and XIX of the Social Security Act

1 (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq.,
2 1395 et seq., 1396 et seq.); and

3 (2) with respect to the Ticket to Work and Self-
4 Sufficiency Program established under section 1148
5 of the Social Security Act—

6 (A) advise the Commissioner of Social Se-
7 curity with respect to establishing phase-in sites
8 for such Program and fully implementing the
9 Program thereafter; the refinement of access of
10 disabled beneficiaries to employment networks,
11 payment systems; and management information
12 systems; and advise the Commissioner whether
13 such measures are being taken to the extent
14 necessary to ensure the success of the Program;

15 (B) advise the Commissioner regarding the
16 most effective designs for research and dem-
17 onstration projects associated with the Program
18 or conducted pursuant to section 302;

19 (C) advise the Commissioner on the devel-
20 opment of performance measurements relating
21 to quality assurance under section 1148(d)(6)
22 of the Social Security Act; and

23 (D) furnish progress reports on the Pro-
24 gram to the Commissioner and each House of
25 Congress.

1 ~~(c) MEMBERSHIP.—~~

2 ~~(1) NUMBER AND APPOINTMENT.—~~The Panel
3 shall be composed of ~~12~~ members appointed by the
4 Commissioner of Social Security in consultation with
5 the Speaker of the House of Representatives, the
6 Minority Leader of the House of Representatives,
7 the Majority Leader of the Senate, and the Minority
8 Leader of the Senate.

9 ~~(2) REPRESENTATION.—~~All members appointed
10 to the Panel shall have experience or expert knowl-
11 edge in the fields of, or related to, work incentive
12 programs, employment services, vocational rehabili-
13 tation services, health care services, and other sup-
14 port services for individuals with disabilities. At least
15 7 members of the Panel shall be individuals with dis-
16 abilities or representatives of individuals with dis-
17 abilities, except that, of those 7 members, at least 5
18 members shall be current or former title II disability
19 beneficiaries or title XVI disability beneficiaries (as
20 such terms are defined in section 1148(k) of the So-
21 cial Security Act (as added by section 201(a) of this
22 Act)).

23 ~~(3) TERMS.—~~

24 ~~(A) IN GENERAL.—~~Each member shall be
25 appointed for a term of 4 years (or, if less, for

1 the remaining life of the Panel), except as pro-
2 vided in subparagraphs (B) and (C). The initial
3 members shall be appointed not later than 90
4 days after the date of enactment of this Act.

5 (B) TERMS OF INITIAL APPOINTEES.—As
6 designated by the Commissioner at the time of
7 appointment, of the members first appointed—

8 (i) 6 of the members appointed under
9 paragraph (1) shall be appointed for a
10 term of 2 years; and

11 (ii) 6 of the members appointed under
12 paragraph (1) shall be appointed for a
13 term of 4 years.

14 (C) VACANCIES.—Any member appointed
15 to fill a vacancy occurring before the expiration
16 of the term for which the member's predecessor
17 was appointed shall be appointed only for the
18 remainder of that term. A member may serve
19 after the expiration of that member's term until
20 a successor has taken office. A vacancy in the
21 Panel shall be filled in the manner in which the
22 original appointment was made.

23 (4) BASIC PAY.—Members shall each be paid at
24 a rate, and in a manner, that is consistent with

1 guidelines established under section 7 of the Federal
2 Advisory Committee Act (5 U.S.C. App.):

3 (5) TRAVEL EXPENSES.—Each member shall
4 receive travel expenses, including per diem in lieu of
5 subsistence, in accordance with sections 5702 and
6 5703 of title 5, United States Code.

7 (6) QUORUM.—Eight members of the Panel
8 shall constitute a quorum but a lesser number may
9 hold hearings.

10 (7) CHAIRPERSON.—The Chairperson of the
11 Panel shall be designated by the Commissioner. The
12 term of office of the Chairperson shall be 4 years.

13 (8) MEETINGS.—The Panel shall meet at least
14 quarterly and at other times at the call of the Chair-
15 person or a majority of its members.

16 (d) DIRECTOR AND STAFF OF PANEL; EXPERTS AND
17 CONSULTANTS.—

18 (1) DIRECTOR.—The Panel shall have a Direc-
19 tor who shall be appointed by the Commissioner and
20 paid at a rate, and in a manner, that is consistent
21 with guidelines established under section 7 of the
22 Federal Advisory Committee Act (5 U.S.C. App.):

23 (2) STAFF.—Subject to rules prescribed by the
24 Commissioner, the Director may appoint and fix the

1 pay of additional personnel as the Director considers
2 appropriate.

3 (3) EXPERTS AND CONSULTANTS.—Subject to
4 rules prescribed by the Commissioner, the Director
5 may procure temporary and intermittent services
6 under section 3109(b) of title 5, United States Code.

7 (4) STAFF OF FEDERAL AGENCIES.—Upon re-
8 quest of the Panel, the head of any Federal depart-
9 ment or agency may detail, on a reimbursable basis,
10 any of the personnel of that department or agency
11 to the Panel to assist it in carrying out its duties
12 under this section.

13 (c) POWERS OF PANEL.—

14 (1) HEARINGS AND SESSIONS.—The Panel may,
15 for the purpose of carrying out its duties under this
16 section, hold such hearings, sit and act at such times
17 and places, and take such testimony and evidence as
18 the Panel considers appropriate.

19 (2) POWERS OF MEMBERS AND AGENTS.—Any
20 member or agent of the Panel may, if authorized by
21 the Panel, take any action which the Panel is au-
22 thorized to take by this section.

23 (3) MAILES.—The Panel may use the United
24 States mails in the same manner and under the

1 same conditions as other departments and agencies
2 of the United States.

3 (f) REPORTS.—

4 (1) INTERIM REPORTS.—The Panel shall sub-
5 mit to the President and Congress interim reports at
6 least annually.

7 (2) FINAL REPORT.—The Panel shall transmit
8 a final report to the President and Congress not
9 later than 8 years after the date of enactment of
10 this Act. The final report shall contain a detailed
11 statement of the findings and conclusions of the
12 Panel, together with its recommendations for legisla-
13 tion and administrative actions which the Panel con-
14 siders appropriate.

15 (g) TERMINATION.—The Panel shall terminate 30
16 days after the date of the submission of its final report
17 under subsection (f)(2).

18 (h) ALLOCATION OF COSTS.—The costs of carrying
19 out this section shall be paid from amounts made available
20 for the administration of title II of the Social Security Act
21 (42 U.S.C. 401 et seq.) and amounts made available for
22 the administration of title XVI of that Act (42 U.S.C.
23 1381 et seq.); and shall be allocated among those amounts
24 as appropriate.

1 **Subtitle B—Elimination of Work**
 2 **Disincentives**

3 **SEC. 211. PROHIBITION ON USING WORK ACTIVITY AS A**
 4 **BASIS FOR REVIEW OF AN INDIVIDUAL'S DIS-**
 5 **ABLED STATUS.**

6 Section 221 of the Social Security Act (42 U.S.C.
 7 421) is amended by adding at the end the following:

8 “(m)(1) In any case where an individual entitled to
 9 disability insurance benefits under section 223 or to
 10 monthly insurance benefits under section 202 based on
 11 such individual’s disability (as defined in section 223(d))
 12 has received such benefits for at least 24 months—

13 “(A) no continuing disability review conducted
 14 by the Commissioner may be scheduled for the indi-
 15 vidual solely as a result of the individual’s work ac-
 16 tivity;

17 “(B) no work activity engaged in by the indi-
 18 vidual may be used as evidence that the individual
 19 is no longer disabled; and

20 “(C) no cessation of work activity by the indi-
 21 vidual may give rise to a presumption that the indi-
 22 vidual is unable to engage in work.

23 “(2) An individual to which paragraph (1) applies
 24 shall continue to be subject to—

1 “(A) continuing disability reviews on a regularly
2 scheduled basis that is not triggered by work; and

3 “(B) termination of benefits under this title in
4 the event that the individual has earnings that ex-
5 ceed the level of earnings established by the Com-
6 missioner to represent substantial gainful activity.”.

7 **SEC. 212. EXPEDITED ELIGIBILITY DETERMINATIONS FOR**
8 **APPLICATIONS OF FORMER LONG-TERM**
9 **BENEFICIARIES THAT COMPLETED AN EX-**
10 **TENDED PERIOD OF ELIGIBILITY.**

11 Section 223 of the Social Security Act (42 U.S.C.
12 423) is amended by adding at the end the following:

13 “Expedited Eligibility Determinations for Applications of
14 Former Long-Term Beneficiaries That Completed
15 an Extended Period of Eligibility

16 “(j) The Commissioner of Social Security shall estab-
17 lish a process for providing an expedited eligibility deter-
18 mination in the case of an application for disability insur-
19 ance benefits under this section, or for monthly insurance
20 benefits under section 202 based on another individual’s
21 disability, that is filed by an individual that previously—

22 “(1) received such benefits for at least 24
23 months; and

1 “(2) engaged in substantial gainful activity dur-
2 ing the 36-month period following the end of a trial
3 work period under section 222(c).”.

4 **Subtitle C—Work Incentives**
5 **Planning, Assistance, and Outreach**

6 **SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.**

7 Part A of title XI of the Social Security Act (42
8 U.S.C. 1301 et seq.), as amended by section 201, is
9 amended by adding after section 1148 the following:

10 “WORK INCENTIVES OUTREACH PROGRAM

11 “SEC. 1149. (a) ESTABLISHMENT.—

12 “(1) IN GENERAL.—The Commissioner, in con-
13 sultation with the Work Incentives Advisory Panel
14 established under section 202 of the Work Incentives
15 Improvement Act of 1999, shall establish a commu-
16 nity-based work incentives planning and assistance
17 program for the purpose of disseminating accurate
18 information to disabled beneficiaries on work incen-
19 tives programs and issues related to such programs.

20 “(2) GRANTS, COOPERATIVE AGREEMENTS,
21 CONTRACTS, AND OUTREACH.—Under the program
22 established under this section, the Commissioner
23 shall—

24 “(A) establish a competitive program of
25 grants, cooperative agreements, or contracts to
26 provide benefits planning and assistance, in-

1 including information on the availability of pro-
2 tection and advocacy services, to disabled bene-
3 ficiaries, including individuals participating in
4 the Ticket to Work and Self-Sufficiency Pro-
5 gram established under section 1148, the pro-
6 gram established under section 1619, and other
7 programs that are designed to encourage dis-
8 abled beneficiaries to work;

9 “(B) conduct directly, or through grants,
10 cooperative agreements, or contracts, ongoing
11 outreach efforts to disabled beneficiaries (and
12 to the families of such beneficiaries) who are
13 potentially eligible to participate in Federal or
14 State work incentive programs that are de-
15 signed to assist disabled beneficiaries to work,
16 including—

17 “(i) preparing and disseminating in-
18 formation explaining such programs; and

19 “(ii) working in cooperation with
20 other Federal, State, and private agencies
21 and nonprofit organizations that serve dis-
22 abled beneficiaries, and with agencies and
23 organizations that focus on vocational re-
24 habilitation and work-related training and
25 counseling;

1 “(C) establish a corps of trained, acces-
 2 sible, and responsive work incentives specialists
 3 within the Social Security Administration who
 4 will specialize in disability work incentives
 5 under titles II and XVI for the purpose of dis-
 6 seminating accurate information with respect to
 7 inquiries and issues relating to work incentives
 8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
 11 and XVI; and

12 “(iii) individuals or entities awarded
 13 grants under subparagraphs (A) or (B);
 14 and

15 “(D) provide—

16 “(i) training for the work incentive
 17 specialists and the individuals providing
 18 planning assistance described in subpara-
 19 graph (C); and

20 “(ii) technical assistance to organiza-
 21 tions and entities that are designed to en-
 22 courage disabled beneficiaries to return to
 23 work.

24 “(3) COORDINATION WITH OTHER PRO-
 25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), and other serv-
15 ices.

16 “(b) CONDITIONS.—

17 “(1) SELECTION OF ENTITIES.—

18 “(A) APPLICATION.—An entity shall sub-
19 mit an application for a grant, cooperative
20 agreement, or contract to provide benefits plan-
21 ning and assistance to the Commissioner at
22 such time, in such manner, and containing such
23 information as the Commissioner may deter-
24 mine is necessary to meet the requirements of
25 this section.

1 “(B) STATEWIDENESS.—The Commis-
 2 sioner shall ensure that the planning, assist-
 3 ance, and information described in paragraph
 4 (2) shall be available on a statewide basis.

5 “(C) ELIGIBILITY OF STATES AND PRI-
 6 VATE ORGANIZATIONS.—

7 “(i) IN GENERAL.—The Commissioner
 8 may award a grant, cooperative agreement,
 9 or contract under this section to a State or
 10 a private agency or organization (other
 11 than Social Security Administration Field
 12 Offices and the State agency administering
 13 the State medicaid program under title
 14 XIX, including any agency or entity de-
 15 scribed in clause (ii), that the Commis-
 16 sioner determines is qualified to provide
 17 the planning, assistance, and information
 18 described in paragraph (2)).

19 “(ii) AGENCIES AND ENTITIES DE-
 20 SCRIBED.—The agencies and entities de-
 21 scribed in this clause are the following:

22 “(I) Any public or private agency
 23 or organization (including Centers for
 24 Independent Living established under
 25 title VII of the Rehabilitation Act of

1 ~~1973~~, protection and advocacy organi-
2 zations, client assistance programs es-
3 tablished in accordance with section
4 ~~112~~ of the Rehabilitation Act of ~~1973~~,
5 and State Developmental Disabilities
6 Councils established in accordance
7 with section ~~124~~ of the Developmental
8 Disabilities Assistance and Bill of
9 Rights Act (~~42 U.S.C. 6024~~) that the
10 Commissioner determines satisfies the
11 requirements of this section.

12 ~~“(H) The State agency admin-~~
13 ~~istering the State program funded~~
14 ~~under part A of title IV.~~

15 ~~“(D) EXCLUSION FOR CONFLICT OF IN-~~
16 ~~TEREST.—The Commissioner may not award a~~
17 ~~grant, cooperative agreement, or contract under~~
18 ~~this section to any entity that the Commissioner~~
19 ~~determines would have a conflict of interest if~~
20 ~~the entity were to receive a grant, cooperative~~
21 ~~agreement, or contract under this section.~~

22 ~~“(2) SERVICES PROVIDED.—A recipient of a~~
23 ~~grant, cooperative agreement, or contract to provide~~
24 ~~benefits planning and assistance shall select individ-~~
25 ~~uals who will act as planners and provide informa-~~

1 tion, guidance, and planning to disabled beneficiaries
2 on the—

3 “(A) availability and interrelation of any
4 Federal or State work incentives programs de-
5 signed to assist disabled beneficiaries that the
6 individual may be eligible to participate in;

7 “(B) adequacy of any health benefits cov-
8 erage that may be offered by an employer of
9 the individual and the extent to which other
10 health benefits coverage may be available to the
11 individual; and

12 “(C) availability of protection and advo-
13 cacy services for disabled beneficiaries and how
14 to access such services.

15 “(3) AMOUNT OF GRANTS, COOPERATIVE
16 AGREEMENTS, OR CONTRACTS.—

17 “(A) BASED ON POPULATION OF DIS-
18 ABLED BENEFICIARIES.—Subject to subpara-
19 graph (B), the Commissioner shall award a
20 grant, cooperative agreement, or contract under
21 this section to an entity based on the percent-
22 age of the population of the State where the en-
23 tity is located who are disabled beneficiaries.

24 “(B) LIMITATIONS.—

1 “(i) PER GRANT.—No entity shall re-
2 ceive a grant, cooperative agreement, or
3 contract under this section for a fiscal year
4 that is less than \$50,000 or more than
5 \$300,000.

6 “(ii) TOTAL AMOUNT FOR ALL
7 GRANTS, COOPERATIVE AGREEMENTS, AND
8 CONTRACTS.—The total amount of all
9 grants, cooperative agreements, and con-
10 tracts awarded under this section for a fis-
11 cal year may not exceed \$23,000,000.

12 “(4) ALLOCATION OF COSTS.—The costs of ear-
13 rying out this section shall be paid from amounts
14 made available for the administration of title II and
15 amounts made available for the administration of
16 title XVI, and shall be allocated among those
17 amounts as appropriate.

18 “(e) DEFINITIONS.—In this section:

19 “(1) COMMISSIONER.—The term ‘Commis-
20 sioner’ means the Commissioner of Social Security.

21 “(2) DISABLED BENEFICIARY.—The term ‘dis-
22 abled beneficiary’ has the meaning given that term
23 in section 1148(k)(2).”.

1 **SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSIST-**
 2 **ANCE TO DISABLED BENEFICIARIES.**

3 Part A of title XI of the Social Security Act (42
 4 U.S.C. 1301 et seq.), as amended by section 221, is
 5 amended by adding after section 1149 the following:

6 “STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO
 7 DISABLED BENEFICIARIES

8 “SEC. 1150. (a) IN GENERAL.—Subject to subsection
 9 (e), the Commissioner may make payments in each State
 10 to the protection and advocacy system established pursu-
 11 ant to part C of title I of the Developmental Disabilities
 12 Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.)
 13 for the purpose of providing services to disabled bene-
 14 ficiaries.

15 “(b) SERVICES PROVIDED.—

16 “(1) IN GENERAL.—Subject to paragraph (2),
 17 services provided to disabled beneficiaries pursuant
 18 to a payment made under this section may include—

19 “(A) information and advice about obtain-
 20 ing vocational rehabilitation and employment
 21 services; and

22 “(B) advocacy or other services that a dis-
 23 abled beneficiary may need to secure or regain
 24 gainful employment.

25 “(c) APPLICATION.—In order to receive payments
 26 under this section, a protection and advocacy system shall

1 submit an application to the Commissioner, at such time,
2 in such form and manner, and accompanied by such infor-
3 mation and assurances as the Commissioner may require.

4 “(d) AMOUNT OF PAYMENTS.—

5 “(1) IN GENERAL.—Subject to the amount ap-
6 propriated for a fiscal year for making payments
7 under this section, a protection and advocacy system
8 shall not be paid an amount that is less than—

9 “(A) in the case of a protection and advo-
10 cacy system located in a State (including the
11 District of Columbia and Puerto Rico) other
12 than Guam, American Samoa, the United
13 States Virgin Islands, and the Commonwealth
14 of the Northern Mariana Islands, the greater
15 of—

16 “(i) \$100,000; or

17 “(ii) $\frac{1}{3}$ of 1 percent of the amount
18 available for payments under this section;
19 and

20 “(B) in the case of a protection and advo-
21 cacy system located in Guam, American Samoa,
22 the United States Virgin Islands, and the Com-
23 monwealth of the Northern Mariana Islands,
24 \$50,000.

1 “(2) INFLATION ADJUSTMENT.—For each fiscal
2 year in which the total amount appropriated to carry
3 out this section exceeds the total amount appro-
4 priated to carry out this section in the preceding fis-
5 cal year, the Commissioner shall increase each min-
6 imum payment under subparagraphs (A) and (B) of
7 paragraph (1) by a percentage equal to the percent-
8 age increase in the total amount appropriated to
9 carry out this section between the preceding fiscal
10 year and the fiscal year involved.

11 “(e) ANNUAL REPORT.—Each protection and advo-
12 cacy system that receives a payment under this section
13 shall submit an annual report to the Commissioner and
14 the Work Incentives Advisory Panel established under sec-
15 tion 202 of the Work Incentives Improvement Act of 1999
16 on the services provided to individuals by the system.

17 “(f) FUNDING.—

18 “(1) ALLOCATION OF PAYMENTS.—Payments
19 under this section shall be made from amounts made
20 available for the administration of title II and
21 amounts made available for the administration of
22 title XVI, and shall be allocated among those
23 amounts as appropriate.

24 “(2) CARRYOVER.—Any amounts allotted for
25 payment to a protection and advocacy system under

1 this section for a fiscal year shall remain available
 2 for payment to or on behalf of the protection and
 3 advocacy system until the end of the succeeding fis-
 4 cal year.

5 “(g) DEFINITIONS.—In this section:

6 “(1) COMMISSIONER.—The term ‘Commis-
 7 sioner’ means the Commissioner of Social Security.

8 “(2) DISABLED BENEFICIARY.—The term ‘dis-
 9 abled beneficiary’ has the meaning given that term
 10 in section 1148(k)(2).

11 “(3) PROTECTION AND ADVOCACY SYSTEM.—
 12 The term ‘protection and advocacy system’ means a
 13 protection and advocacy system established pursuant
 14 to part C of title I of the Developmental Disabilities
 15 Assistance and Bill of Rights Act (42 U.S.C. 6041
 16 et seq.).”

17 **TITLE III—DEMONSTRATION**
 18 **PROJECTS AND STUDIES**

19 **SEC. 301. EXTENSION OF DISABILITY INSURANCE PRO-**
 20 **GRAM DEMONSTRATION PROJECT AUTHOR-**
 21 **ITY.**

22 Section 505 of the Social Security Disability Amend-
 23 ments of 1980 (42 U.S.C. 1310 note) is amended—

24 (1) in subsection (a)(1)—

1 (A) by striking “and (B)” and inserting “,
2 (B)”;

3 (B) by inserting “, and (C) implementing
4 sliding scale benefit offsets using variations in
5 the amount of the offset as a proportion of
6 earned income, the duration of the offset pe-
7 riod, and the method of determining the
8 amount of income earned by the beneficiaries,
9 and using state-of-the-art information tech-
10 nology and electronic funds transfer technology
11 to streamline the reporting of data and the im-
12 plementation of the offsets, and developing and
13 making available to beneficiaries, their families,
14 guardians, and advocates, through the Internet
15 information regarding work incentives and as-
16 sistance for beneficiaries to make informed deci-
17 sions regarding work,” after “rehabilitation),”;
18 and

19 (C) by adding at the end the following:
20 “The Commissioner may expand the scope of
21 any such demonstration project to include any
22 group of applicants for benefits under such pro-
23 gram with impairments which may reasonably
24 be presumed to be disabling for purposes of
25 such demonstration project, and may limit any

1 such demonstration project to any such group
 2 of applicants, subject to the terms of such dem-
 3 onstration project which shall define the extent
 4 of any such presumption.”;

5 (2) in subsection (a)(3), by striking “June 10,
 6 1996” and inserting “June 10, 2001”;

7 (3) in subsection (a)(4), by inserting “and on or
 8 before October 1, 2000,” after “1995,”; and

9 (4) in subsection (c), by striking “October 1,
 10 1996” and inserting “October 1, 2002”.

11 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
 12 **DUCTIONS IN DISABILITY INSURANCE BENE-**
 13 **FITS BASED ON EARNINGS.**

14 (a) **AUTHORITY.**—The Commissioner of Social Secu-
 15 rity shall conduct demonstration projects for the purpose
 16 of evaluating, through the collection of data, a program
 17 for title II disability beneficiaries (as defined in section
 18 1148(k)(3) of the Social Security Act) under which each
 19 \$1 of benefits payable under section 223, or under section
 20 202 based on the beneficiary’s disability, is reduced for
 21 each \$2 of such beneficiary’s earnings that is above a level
 22 to be determined by the Commissioner. Such projects shall
 23 be conducted at a number of localities which the Commis-
 24 sioner shall determine is sufficient to adequately evaluate
 25 the appropriateness of national implementation of such a

1 program. Such projects shall identify reductions in Fed-
2 eral expenditures that may result from the permanent im-
3 plementation of such a program.

4 (b) SCOPE AND SCALE AND MATTERS TO BE DETER-
5 MINED.—

6 (1) IN GENERAL.—The demonstration projects
7 developed under subsection (a) shall be of sufficient
8 duration, shall be of sufficient scope, and shall be
9 carried out on a wide enough scale to permit a thor-
10 ough evaluation of the project to determine—

11 (A) the effects, if any, of induced entry
12 into the project and reduced exit from the
13 project;

14 (B) the extent, if any, to which the project
15 being tested is affected by whether it is in oper-
16 ation in a locality within an area under the ad-
17 ministration of the Ticket to Work and Self-
18 Sufficiency Program established under section
19 1148 of the Social Security Act; and

20 (C) the savings that accrue to the Federal
21 Old-Age and Survivors Insurance Trust Fund,
22 the Federal Disability Insurance Trust Fund,
23 and other Federal programs under the project
24 being tested.

1 The Commissioner shall take into account advice
 2 provided by the Work Incentives Advisory Panel pur-
 3 suant to section 202(b)(2)(B).

4 ~~(2) ADDITIONAL MATTERS.—~~The Commissioner
 5 shall also determine with respect to each project—

6 ~~(A) the annual cost (including net cost) of~~
 7 ~~the project and the annual cost (including net~~
 8 ~~cost) that would have been incurred in the ab-~~
 9 ~~sence of the project;~~

10 ~~(B) the determinants of return to work, in-~~
 11 ~~cluding the characteristics of the beneficiaries~~
 12 ~~who participate in the project; and~~

13 ~~(C) the employment outcomes, including~~
 14 ~~wages, occupations, benefits, and hours worked,~~
 15 ~~of beneficiaries who return to work as a result~~
 16 ~~of participation in the project.~~

17 The Commissioner may include within the matters
 18 evaluated under the project the merits of trial work
 19 periods and periods of extended eligibility.

20 ~~(e) WAIVERS.—~~The Commissioner may waive compli-
 21 ~~ance with the benefit provisions of title II of the Social~~
 22 ~~Security Act, and the Secretary of Health and Human~~
 23 ~~Services may waive compliance with the benefit require-~~
 24 ~~ments of title XVIII of that Act, insofar as is necessary~~
 25 ~~for a thorough evaluation of the alternative methods under~~

1 consideration. No such project shall be actually placed in
2 operation unless at least 90 days prior thereto a written
3 report, prepared for purposes of notification and informa-
4 tion only and containing a full and complete description
5 thereof, has been transmitted by the Commissioner to the
6 Committee on Ways and Means of the House of Rep-
7 resentatives and to the Committee on Finance of the Sen-
8 ate. Periodic reports on the progress of such projects shall
9 be submitted by the Commissioner to such committees.
10 When appropriate, such reports shall include detailed rec-
11 ommendations for changes in administration or law, or
12 both, to carry out the objectives stated in subsection (a).

13 (d) INTERIM REPORTS.—Not later than 2 years after
14 the date of enactment of this Act, and annually thereafter,
15 the Commissioner of Social Security shall submit to Con-
16 gress an interim report on the progress of the demonstra-
17 tion projects carried out under this subsection together
18 with any related data and materials which the Commis-
19 sioner of Social Security may consider appropriate.

20 (e) FINAL REPORT.—The Commissioner of Social Se-
21 curity shall submit to Congress a final report with respect
22 to all demonstration projects carried out under this section
23 not later than 1 year after their completion.

24 (f) EXPENDITURES.—Expenditures made for dem-
25 onstration projects under this section shall be made from

1 the Federal Disability Insurance Trust Fund and the Fed-
2 eral Old-Age and Survivors Insurance Trust Fund, as de-
3 termined appropriate by the Commissioner of Social Secu-
4 rity, and from the Federal Hospital Insurance Trust Fund
5 and the Federal Supplementary Medical Insurance Trust
6 Fund, as determined appropriate by the Secretary of
7 Health and Human Services, to the extent provided in ad-
8 vance in appropriation Acts.

9 **SEC. 303. SENSE OF CONGRESS REGARDING ADDITIONAL**
10 **DEMONSTRATION PROJECTS.**

11 It is the sense of Congress that the Commissioner
12 of Social Security and the Secretary of Health and Human
13 Services should establish additional demonstration
14 projects to assist individuals with disabilities to engage in
15 work.

16 **SEC. 304. STUDIES AND REPORTS.**

17 (a) **STUDY BY GENERAL ACCOUNTING OFFICE OF**
18 **EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-**
19 **TIVES.—**

20 (1) **STUDY.**—As soon as practicable after the
21 date of enactment of this Act, the Comptroller Gen-
22 eral of the United States shall undertake a study to
23 assess existing tax credits and other disability-re-
24 lated employment incentives under the Americans
25 with Disabilities Act of 1990 and other Federal

1 laws. In such study, the Comptroller General shall
2 specifically address the extent to which such credits
3 and other incentives would encourage employers to
4 hire and retain individuals with disabilities.

5 (2) REPORT.—Not later than 3 years after the
6 date of enactment of this Act, the Comptroller Gen-
7 eral shall transmit to the Committee on Ways and
8 Means of the House of Representatives and the
9 Committee on Finance of the Senate a written re-
10 port presenting the results of the Comptroller Gen-
11 eral's study conducted pursuant to this subsection,
12 together with such recommendations for legislative
13 or administrative changes as the Comptroller Gen-
14 eral determines are appropriate.

15 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
16 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
17 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
18 ING CONCURRENT ENTITLEMENT.—

19 (1) STUDY.—As soon as practicable after the
20 date of enactment of this Act, the Comptroller Gen-
21 eral of the United States shall undertake a study to
22 evaluate the coordination under current law of the
23 disability insurance program under title II of the So-
24 cial Security Act and the supplemental security in-
25 come program under title XVI of that Act, as such

1 programs relate to individuals entering or leaving
2 concurrent entitlement under such programs. In
3 such study, the Comptroller General shall specifically
4 address the effectiveness of work incentives under
5 such programs with respect to such individuals and
6 the effectiveness of coverage of such individuals
7 under titles XVIII and XIX of the Social Security
8 Act.

9 (2) REPORT.—Not later than 3 years after the
10 date of enactment of this Act, the Comptroller Gen-
11 eral shall transmit to the Committee on Ways and
12 Means of the House of Representatives and the
13 Committee on Finance of the Senate a written re-
14 port presenting the results of the Comptroller Gen-
15 eral's study conducted pursuant to this subsection,
16 together with such recommendations for legislative
17 or administrative changes as the Comptroller Gen-
18 eral determines are appropriate.

19 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
20 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
21 LIMIT ON RETURN TO WORK.—

22 (1) STUDY.—As soon as practicable after the
23 date of enactment of this Act, the Comptroller Gen-
24 eral of the United States shall undertake a study of
25 the substantial gainful activity level applicable as of

1 that date to recipients of benefits under section 223
2 of the Social Security Act (42 U.S.C. 423) and
3 under section 202 of that Act (42 U.S.C. 402) on
4 the basis of a recipient having a disability, and the
5 effect of such level as a disincentive for those recipi-
6 ents to return to work. In the study, the Comptroller
7 General also shall address the merits of increasing
8 the substantial gainful activity level applicable to
9 such recipients of benefits and the rationale for not
10 yearly indexing that level to inflation.

11 (2) REPORT.—Not later than 2 years after the
12 date of enactment of this Act, the Comptroller Gen-
13 eral shall transmit to the Committee on Ways and
14 Means of the House of Representatives and the
15 Committee on Finance of the Senate a written re-
16 port presenting the results of the Comptroller Gen-
17 eral's study conducted pursuant to this subsection,
18 together with such recommendations for legislative
19 or administrative changes as the Comptroller Gen-
20 eral determines are appropriate.

1 **TITLE IV—TECHNICAL**
2 **AMENDMENTS**

3 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
4 **ADDICTS AND ALCOHOLICS.**

5 (a) CLARIFICATION RELATING TO THE EFFECTIVE
6 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
7 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
8 tion 105(a)(5) of the Contract with America Advancement
9 Act of 1996 (Public Law 104–121; 110 Stat. 853) is
10 amended—

11 (1) in subparagraph (A), by striking “by the
12 Commissioner of Social Security” and “by the Com-
13 missioner”; and

14 (2) by adding at the end the following:

15 “(D) For purposes of this paragraph, an
16 individual’s claim, with respect to benefits
17 under title II of the Social Security Act based
18 on disability, which has been denied in whole
19 before the date of enactment of this Act, may
20 not be considered to be finally adjudicated be-
21 fore such date if, on or after such date—

22 “(i) there is pending a request for ei-
23 ther administrative or judicial review with
24 respect to such claim; or

1 “(ii) there is pending, with respect to
2 such claim, a readjudication by the Com-
3 missioner of Social Security pursuant to
4 relief in a class action or implementation
5 by the Commissioner of a court remand
6 order.

7 “(E) Notwithstanding the provisions of
8 this paragraph, with respect to any individual
9 for whom the Commissioner of Social Security
10 does not perform the entitlement redetermina-
11 tion before the date prescribed in subparagraph
12 (C), the Commissioner shall perform such enti-
13 tlement redetermination in lieu of a continuing
14 disability review whenever the Commissioner de-
15 termines that the individual’s entitlement is
16 subject to redetermination based on the pre-
17 ceding provisions of this paragraph, and the
18 provisions of section 223(f) of the Social Secu-
19 rity Act shall not apply to such redetermina-
20 tion.”.

21 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
22 SIONS CONCERNING REPRESENTATIVE PAYEES AND
23 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
24 FIICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
25 Section 105(a)(5)(B) of the Contract with America Ad-

1 vancement Act of 1996 (42 U.S.C. 405 note) is amended
2 to read as follows:

3 “(B) The amendments made by para-
4 graphs (2) and (3) shall take effect on July 1,
5 1996, with respect to any individual—

6 “(i) whose claim for benefits is finally
7 adjudicated on or after the date of enact-
8 ment of this Act; or

9 “(ii) whose entitlement to benefits is
10 based on an entitlement redetermination
11 made pursuant to subparagraph (C).”.

12 (c) **EFFECTIVE DATES.**—The amendments made by
13 this section shall take effect as if included in the enact-
14 ment of section 105 of the Contract with America Ad-
15 vancement Act of 1996 (Public Law 104–121; 110 Stat.
16 852 et seq.).

17 **SEC. 402. TREATMENT OF PRISONERS.**

18 (a) **IMPLEMENTATION OF PROHIBITION AGAINST**
19 **PAYMENT OF TITLE II BENEFITS TO PRISONERS.—**

20 (1) **IN GENERAL.**—Section 202(x)(3) of the So-
21 cial Security Act (42 U.S.C. 402(x)(3)) is
22 amended—

23 (A) by inserting “(A)” after “(3)”; and

24 (B) by adding at the end the following:

1 “(B)(i) The Commissioner shall enter into an agree-
2 ment under this subparagraph with any interested State
3 or local institution comprising a jail, prison, penal institu-
4 tion, or correctional facility, or comprising any other insti-
5 tution a purpose of which is to confine individuals as de-
6 scribed in paragraph (1)(A)(ii). Under such agreement—

7 “(I) the institution shall provide to the Com-
8 missioner, on a monthly basis and in a manner spec-
9 ified by the Commissioner, the names, Social Secu-
10 rity account numbers, dates of birth, confinement
11 commencement dates, and, to the extent available to
12 the institution, such other identifying information
13 concerning the individuals confined in the institution
14 as the Commissioner may require for the purpose of
15 carrying out paragraph (1); and

16 “(II) the Commissioner shall pay to the institu-
17 tion, with respect to information described in sub-
18 clause (I) concerning each individual who is confined
19 therein as described in paragraph (1)(A), who re-
20 ceives a benefit under this title for the month pre-
21 ceeding the first month of such confinement, and
22 whose benefit under this title is determined by the
23 Commissioner to be not payable by reason of con-
24 finement based on the information provided by the
25 institution, \$400 (subject to reduction under clause

1 (ii) if the institution furnishes the information to
2 the Commissioner within 30 days after the date such
3 individual's confinement in such institution begins,
4 or \$200 (subject to reduction under clause (ii)) if
5 the institution furnishes the information after 30
6 days after such date but within 90 days after such
7 date.

8 “(ii) The dollar amounts specified in clause (i)(II)
9 shall be reduced by 50 percent if the Commissioner is also
10 required to make a payment to the institution with respect
11 to the same individual under an agreement entered into
12 under section 1611(c)(1)(I).

13 “(iii) The provisions of section 552a of title 5, United
14 States Code, shall not apply to any agreement entered into
15 under clause (i) or to information exchanged pursuant to
16 such agreement.

17 “(iv) There is authorized to be transferred from the
18 Federal Old-Age and Survivors Insurance Trust Fund and
19 the Federal Disability Insurance Trust Fund, as appro-
20 priate, such sums as may be necessary to enable the Com-
21 missioner to make payments to institutions required by
22 clause (i)(II).

23 “(v) The Commissioner is authorized to provide, on
24 a reimbursable basis, information obtained pursuant to
25 agreements entered into under clause (i) to any agency

1 administering a Federal or federally assisted cash, food,
2 or medical assistance program for eligibility purposes.”.

3 (2) EFFECTIVE DATE.—The amendments made
4 by this subsection shall apply to individuals whose
5 period of confinement in an institution commences
6 on or after the first day of the fourth month begin-
7 ning after the month in which this Act is enacted.

8 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
9 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
10 PRISONMENT FOR MORE THAN 1 YEAR.—

11 (1) IN GENERAL.—Section 202(x)(1)(A) of the
12 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
13 amended—

14 (A) in the matter preceding clause (i), by
15 striking “during” and inserting “throughout”;

16 (B) in clause (i), by striking “an offense
17 punishable by imprisonment for more than 1
18 year (regardless of the actual sentence im-
19 posed)” and inserting “a criminal offense”; and

20 (C) in clause (ii)(I), by striking “an of-
21 fense punishable by imprisonment for more
22 than 1 year” and inserting “a criminal of-
23 fense”.

24 (2) EFFECTIVE DATE.—The amendments made
25 by this subsection shall apply to individuals whose

1 period of confinement in an institution commences
 2 on or after the first day of the fourth month begin-
 3 ning after the month in which this Act is enacted.

4 (c) CONFORMING TITLE XVI AMENDMENTS.—

5 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
 6 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
 7 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
 8 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

9 (A) in clause (i)(II), by inserting “(subject
 10 to reduction under clause (ii))” after “\$400”
 11 and after “\$200”;

12 (B) by redesignating clauses (ii) and (iii)
 13 as clauses (iii) and (iv), respectively; and

14 (C) by inserting after clause (i) the fol-
 15 lowing:

16 “(ii) The dollar amounts specified in clause (i)(II)
 17 shall be reduced by 50 percent if the Commissioner is also
 18 required to make a payment to the institution with respect
 19 to the same individual under an agreement entered into
 20 under section 202(x)(3)(B).”.

21 (2) EXPANSION OF CATEGORIES OF INSTITU-
 22 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
 23 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
 24 the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i))
 25 is amended in the matter preceding subclause (I) by

1 striking “institution” and all that follows through
 2 “section 202(x)(1)(A),” and inserting “institution
 3 comprising a jail, prison, penal institution, or correc-
 4 tional facility, or with any other interested State or
 5 local institution a purpose of which is to confine in-
 6 dividuals as described in section 202(x)(1)(A)(ii).”

7 (3) EFFECTIVE DATE.—The amendments made
 8 by this subsection shall take effect as if included in
 9 the enactment of section 203(a) of the Personal Re-
 10 sponsibility and Work Opportunity Reconciliation
 11 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
 12 The reference to section 202(x)(1)(A)(ii) of the So-
 13 cial Security Act in section 1611(e)(1)(I)(i) of the
 14 Social Security Act as amended by paragraph (2)
 15 shall be deemed a reference to such section
 16 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

17 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
 18 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
 19 TIONS UPON COMPLETION OF PRISON TERM.—

20 (1) IN GENERAL.—Section 202(x)(1)(A) of the
 21 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
 22 amended—

23 (A) in clause (i), by striking “or” at the
 24 end;

1 censed minister of a church, a member of a religious order,
2 or a Christian Science practitioner, and which is effective
3 for the taxable year in which this Act is enacted, may be
4 revoked by filing an application therefore (in such form
5 and manner, and with such official, as may be prescribed
6 in regulations made under chapter 2 of such Code), if such
7 application is filed no later than the due date of the Fed-
8 eral income tax return (including any extension thereof)
9 for the applicant's second taxable year beginning after De-
10 cember 31, 1999. Any such revocation shall be effective
11 (for purposes of chapter 2 of the Internal Revenue Code
12 of 1986 and title II of the Social Security Act), as speci-
13 fied in the application, either with respect to the appli-
14 cant's first taxable year beginning after December 31,
15 1999, or with respect to the applicant's second taxable
16 year beginning after such date, and for all succeeding tax-
17 able years; and the applicant for any such revocation may
18 not thereafter again file application for an exemption
19 under such section 1402(c)(1). If the application is filed
20 after the due date of the applicant's Federal income tax
21 return for a taxable year and is effective with respect to
22 that taxable year, it shall include or be accompanied by
23 payment in full of an amount equal to the total of the
24 taxes that would have been imposed by section 1401 of
25 the Internal Revenue Code of 1986 with respect to all of

1 the applicant's income derived in that taxable year which
 2 would have constituted net earnings from self-employment
 3 for purposes of chapter 2 of such Code (notwithstanding
 4 paragraph (4) or (5) of section 1402(e) of such Code) ex-
 5 cept for the exemption under section 1402(e)(1) of such
 6 Code.

7 (b) **EFFECTIVE DATE.**—Subsection (a) shall apply
 8 with respect to service performed (to the extent specified
 9 in such subsection) in taxable years beginning after De-
 10 cember 31, 1999, and with respect to monthly insurance
 11 benefits payable under title II of the Social Security Act
 12 on the basis of the wages and self-employment income of
 13 any individual for months in or after the calendar year
 14 in which such individual's application for revocation (as
 15 described in such subsection) is effective (and lump-sum
 16 death payments payable under such title on the basis of
 17 such wages and self-employment income in the case of
 18 deaths occurring in or after such calendar year).

19 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
 20 **TO COOPERATIVE RESEARCH OR DEM-**
 21 **ONSTRATION PROJECTS UNDER TITLES II**
 22 **AND XVI.**

23 (a) **IN GENERAL.**—Section 1110(a)(3) of the Social
 24 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
 25 ing “title XVI” and inserting “title II or XVI”.

1 (b) **EFFECTIVE DATE.**—The amendment made by
 2 subsection (a) shall take effect as if included in the enact-
 3 ment of the Social Security Independence and Program
 4 Improvements Act of 1994 (Public Law 103–296; 108
 5 Stat. 1464).

6 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
 7 **WAGE REPORTS.**

8 (a) **IN GENERAL.**—Section 1137(a)(3) of the Social
 9 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
 10 inserting before the semicolon the following: “, and except
 11 that in the case of wage reports with respect to domestic
 12 service employment, a State may permit employers (as so
 13 defined) that make returns with respect to such employ-
 14 ment on a calendar year basis pursuant to section 3510
 15 of the Internal Revenue Code of 1986 to make such re-
 16 ports on an annual basis”.

17 (b) **TECHNICAL AMENDMENTS.**—Section 1137(a)(3)
 18 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
 19 amended—

20 (1) by striking “(as defined in section
 21 453A(a)(2)(B)(iii))”; and

22 (2) by inserting “(as defined in section
 23 453A(a)(2)(B))” after “employers” ;

1 ~~(e) EFFECTIVE DATE.—The amendments made by~~
 2 this section shall apply to wage reports required to be sub-
 3 mitted on and after the date of enactment of this Act.

4 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

5 (a) *SHORT TITLE.—This Act may be cited as the*
 6 *“Work Incentives Improvement Act of 1999”.*

7 (b) *TABLE OF CONTENTS.—The table of contents of this*
 8 *Act is as follows:*

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under the medicaid program for workers with disabilities.

Sec. 102. Continuation of medicare coverage for working individuals with disabilities.

Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 104. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 211. Work activity standard as a basis for review of an individual’s disabled status.

Sec. 212. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 221. Work incentives outreach program.

Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Permanent extension of disability insurance program demonstration project authority.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

Sec. 401. *Technical amendments relating to drug addicts and alcoholics.*

Sec. 402. *Treatment of prisoners.*

Sec. 403. *Revocation by members of the clergy of exemption from Social Security coverage.*

Sec. 404. *Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.*

Sec. 405. *Authorization for State to permit annual wage reports.*

TITLE V—REVENUE

Sec. 501. *Modification to foreign tax credit carryback and carryover periods.*

Sec. 502. *Limitation on use of non-accrual experience method of accounting.*

Sec. 503. *Extension of Internal Revenue Service user fees.*

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) *FINDINGS.*—Congress makes the following findings:

3 (1) *Health care is important to all Americans.*

4 (2) *Health care is particularly important to in-*
 5 *dividuals with disabilities and special health care*
 6 *needs who often cannot afford the insurance available*
 7 *to them through the private market, are uninsurable*
 8 *by the plans available in the private sector, and are*
 9 *at great risk of incurring very high and economically*
 10 *devastating health care costs.*

11 (3) *Americans with significant disabilities often*
 12 *are unable to obtain health care insurance that pro-*
 13 *vides coverage of the services and supports that enable*
 14 *them to live independently and enter or rejoin the*
 15 *workforce. Personal assistance services (such as at-*
 16 *tendant services, personal assistance with transpor-*
 17 *tation to and from work, reader services, job coaches,*
 18 *and related assistance) remove many of the barriers*
 19 *between significant disability and work. Coverage for*

1 *such services, as well as for prescription drugs, dura-*
2 *ble medical equipment, and basic health care are*
3 *powerful and proven tools for individuals with sig-*
4 *nificant disabilities to obtain and retain employment.*

5 *(4) For individuals with disabilities, the fear of*
6 *losing health care and related services is one of the*
7 *greatest barriers keeping the individuals from maxi-*
8 *mizing their employment, earning potential, and*
9 *independence.*

10 *(5) Individuals with disabilities who are bene-*
11 *ficiaries under title II or XVI of the Social Security*
12 *Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing*
13 *medicare or medicaid coverage that is linked to their*
14 *cash benefits, a risk that is an equal, or greater, work*
15 *disincentive than the loss of cash benefits associated*
16 *with working.*

17 *(6) Currently, less than 1/2 of 1 percent of social*
18 *security disability insurance and supplemental secu-*
19 *rity income beneficiaries cease to receive benefits as a*
20 *result of employment.*

21 *(7) Beneficiaries have cited the lack of adequate*
22 *employment training and placement services as an*
23 *additional barrier to employment.*

24 *(8) If an additional 1/2 of 1 percent of the cur-*
25 *rent social security disability insurance (DI) and*

1 *supplemental security income (SSI) recipients were to*
2 *cease receiving benefits as a result of employment, the*
3 *savings to the Social Security Trust Funds in cash*
4 *assistance would total \$3,500,000,000 over the*
5 *worklife of the individuals.*

6 *(b) PURPOSES.—The purposes of this Act are as fol-*
7 *lows:*

8 *(1) To provide health care and employment*
9 *preparation and placement services to individuals*
10 *with disabilities that will enable those individuals to*
11 *reduce their dependency on cash benefit programs.*

12 *(2) To encourage States to adopt the option of*
13 *allowing individuals with disabilities to purchase*
14 *medicaid coverage that is necessary to enable such in-*
15 *dividuals to maintain employment.*

16 *(3) To provide individuals with disabilities the*
17 *option of maintaining medicare coverage while work-*
18 *ing.*

19 *(4) To establish a return to work ticket program*
20 *that will allow individuals with disabilities to seek*
21 *the services necessary to obtain and retain employ-*
22 *ment and reduce their dependency on cash benefit*
23 *programs.*

1 **TITLE I—EXPANDED AVAIL-**
 2 **ABILITY OF HEALTH CARE**
 3 **SERVICES**

4 **SEC. 101. EXPANDING STATE OPTIONS UNDER THE MED-**
 5 **ICAID PROGRAM FOR WORKERS WITH DIS-**
 6 **ABILITIES.**

7 *(a) IN GENERAL.—*

8 *(1) STATE OPTION TO ELIMINATE INCOME, AS-*
 9 *SETS, AND RESOURCE LIMITATIONS FOR WORKERS*
 10 *WITH DISABILITIES BUYING INTO MEDICAID.—Section*
 11 *1902(a)(10)(A)(ii) of the Social Security Act (42*
 12 *U.S.C. 1396a(a)(10)(A)(ii)) is amended—*

13 *(A) in subclause (XIII), by striking “or” at*
 14 *the end;*

15 *(B) in subclause (XIV), by adding “or” at*
 16 *the end; and*

17 *(C) by adding at the end the following:*

18 *“(XV) who, but for earnings in*
 19 *excess of the limit established under*
 20 *section 1905(q)(2)(B), would be consid-*
 21 *ered to be receiving supplemental secu-*
 22 *rity income and whose assets, re-*
 23 *sources, and earned or unearned in-*
 24 *come (or both) do not exceed such limi-*

1 *tations (if any) as the State may es-*
 2 *tablish;”.*

3 (2) *STATE OPTION TO PROVIDE OPPORTUNITY*
 4 *FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IM-*
 5 *PROVED DISABILITY TO BUY INTO MEDICAID.—*

6 (A) *ELIGIBILITY.—Section 1902(a)(10)*
 7 *(A)(ii) of the Social Security Act (42 U.S.C.*
 8 *1396a(a)(10)(A)(ii)), as amended by paragraph*
 9 *(1), is amended—*

10 *(i) in subclause (XIV), by striking “or”*
 11 *at the end;*

12 *(ii) in subclause (XV), by adding “or”*
 13 *at the end; and*

14 *(iii) by adding at the end the fol-*
 15 *lowing:*

16 *“(XVI) who are employed individ-*
 17 *uals with a medically improved dis-*
 18 *ability described in section 1905(v)(1)*
 19 *and whose assets, resources, and earned*
 20 *or unearned income (or both) do not*
 21 *exceed such limitations (if any) as the*
 22 *State may establish, but only if the*
 23 *State provides medical assistance to*
 24 *individuals described in subclause*
 25 *(XV);”.*

1 (B) *DEFINITION OF EMPLOYED INDIVIDUALS*
2 WITH A MEDICALLY IMPROVED DISABILITY.—*Sec-*
3 tion 1905 of the Social Security Act (42 U.S.C.
4 1396d) is amended by adding at the end the fol-
5 lowing:

6 “(v)(1) The term ‘employed individual with a medi-
7 cally improved disability’ means an individual who—

8 “(A) is at least 16, but less than 65, years of age;

9 “(B) is employed (as defined in paragraph (2));

10 “(C) ceases to be eligible for medical assistance
11 under section 1902(a)(10)(A)(ii)(XV) because the in-
12 dividual, by reason of medical improvement, is deter-
13 mined at the time of a regularly scheduled continuing
14 disability review to no longer be eligible for benefits
15 under section 223(d) or 1614(a)(3); and

16 “(D) continues to have a severe medically deter-
17 minable impairment, as determined under regulations
18 of the Secretary.

19 “(2) For purposes of paragraph (1), an individual is
20 considered to be ‘employed’ if the individual—

21 “(A) is earning at least the applicable minimum
22 wage requirement under section 6 of the Fair Labor
23 Standards Act (29 U.S.C. 206) and working at least
24 40 hours per month; or

1 “(B) is engaged in a work effort that meets sub-
 2 stantial and reasonable threshold criteria for hours of
 3 work, wages, or other measures, as defined by the
 4 State and approved by the Secretary.”.

5 (C) CONFORMING AMENDMENT.—Section
 6 1905(a) of such Act (42 U.S.C. 1396d(a)) is
 7 amended in the matter preceding paragraph
 8 (1)—

9 (i) in clause (x), by striking “or” at
 10 the end;

11 (ii) in clause (xi), by adding “or” at
 12 the end; and

13 (iii) by inserting after clause (xi), the
 14 following:

15 “(xii) employed individuals with a medically
 16 improved disability (as defined in subsection (v)),”.

17 (3) STATE AUTHORITY TO IMPOSE INCOME-RE-
 18 LATED PREMIUMS AND COST-SHARING.—Section 1916
 19 of such Act (42 U.S.C. 1396o) is amended—

20 (A) in subsection (a), by striking “The
 21 State plan” and inserting “Subject to subsection
 22 (g), the State plan”; and

23 (B) by adding at the end the following:

24 “(g) With respect to individuals provided medical as-
 25 sistance only under subclause (XV) or (XVI) of section

1 1902(a)(10)(A)(ii), a State may (in a uniform manner for
2 individuals described in either such subclause)—

3 “(1) require such individuals to pay premiums
4 or other cost-sharing charges set on a sliding scale
5 based on income that the State may determine; and

6 “(2) require payment of 100 percent of such pre-
7 miums in the case of such an individual who has in-
8 come that exceeds 250 percent of the income official
9 poverty line (referred to in subsection (c)(1)) applica-
10 ble to a family of the size involved.”

11 (4) PROHIBITION AGAINST SUPPLANTATION OF
12 STATE FUNDS AND STATE FAILURE TO MAINTAIN EF-
13 FORT.—Section 1903(i) of such Act (42 U.S.C.
14 1396b(i)) is amended—

15 (A) by striking the period at the end of
16 paragraph (18) and inserting “; or”; and

17 (B) by inserting after such paragraph the
18 following:

19 “(19) with respect to amounts expended for med-
20 ical assistance provided to an individual described in
21 subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii)
22 for a fiscal year unless the State demonstrates to the
23 satisfaction of the Secretary that the level of State
24 funds expended for such fiscal year for programs to
25 enable working individuals with disabilities to work

1 *(other than for such medical assistance) is not less*
 2 *than the level expended for such programs during the*
 3 *most recent State fiscal year ending before the date*
 4 *of enactment of this paragraph.”.*

5 ***(b) CONFORMING AMENDMENTS.—***

6 *(1) Section 1903(f)(4) of the Social Security Act*
 7 *(42 U.S.C. 1396b(f)(4) is amended in the matter pre-*
 8 *ceding subparagraph (A) by inserting*
 9 *“1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI)”*
 10 *after “1902(a)(10)(A)(ii)(X),”.*

11 *(2) Section 1903(f)(4) of such Act, as amended*
 12 *by paragraph (1), is amended by inserting*
 13 *“1902(a)(10)(A)(ii)(XIII),”* *before*
 14 *“1902(a)(10)(A)(ii)(XV)”.*

15 ***(c) EFFECTIVE DATE.—***

16 *(1) IN GENERAL.—Except as provided in para-*
 17 *graph (2), the amendments made by this section*
 18 *apply to medical assistance for items and services*
 19 *furnished on or after October 1, 1999.*

20 *(2) RETROACTIVITY OF CONFORMING AMEND-*
 21 *MENT.—The amendment made by subsection (b)(2)*
 22 *takes effect as if included in the enactment of the*
 23 *Balanced Budget Act of 1997.*

1 **SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR**
2 **WORKING INDIVIDUALS WITH DISABILITIES.**

3 *(a) CONTINUATION OF COVERAGE.—*

4 *(1) IN GENERAL.—Section 226 of the Social Se-*
5 *curity Act (42 U.S.C. 426) is amended—*

6 *(A) in the third sentence of subsection (b),*
7 *by inserting “, except as provided in subsection*
8 *(j)” after “but not in excess of 24 such months”;*
9 *and*

10 *(B) by adding at the end the following:*

11 *“(j) The 24-month limitation on deemed entitlement*
12 *under the third sentence of subsection (b) shall not apply—*

13 *“(1) for months occurring during the 10-year pe-*
14 *riod beginning with the first month that begins after*
15 *the date of enactment of this subsection; and*

16 *“(2) for subsequent months, in the case of an in-*
17 *dividual who was entitled to benefits under subsection*
18 *(b) as of the last month of such 10-year period and*
19 *would continue (but for such 24-month limitation) to*
20 *be so entitled.”.*

21 *(2) CONFORMING AMENDMENT.—Section*
22 *1818A(a)(2)(C) of the Social Security Act (42 U.S.C.*
23 *1395i-2a(a)(2)(C)) is amended—*

24 *(A) by striking “solely”; and*

1 (B) by inserting “or the expiration of the
2 last month of the 10-year period described in sec-
3 tion 226(j)” before the semicolon.

4 (b) *GAO REPORT*.—Not later than 8 years after the
5 date of the enactment of this Act, the Comptroller General
6 of the United States shall submit a report to Congress
7 that—

8 (1) examines the effectiveness and cost of sub-
9 section (j) of section 226 of the Social Security Act
10 (42 U.S.C. 426); and

11 (2) recommends whether that subsection should
12 continue to be applied beyond the 10-year period de-
13 scribed in the subsection.

14 (c) *EFFECTIVE DATE*.—The amendments made by sub-
15 section (a) apply to months beginning with the first month
16 that begins after the date of the enactment of this Act.

17 (d) *TREATMENT OF CERTAIN INDIVIDUALS*.—An indi-
18 vidual enrolled under section 1818A of the Social Security
19 Act (42 U.S.C. 1395i–2a) shall be treated with respect to
20 premium payment obligations under such section as though
21 the individual had continued to be entitled to benefits under
22 section 226(b) of such Act for—

23 (1) months described in section 226(j)(1) of such
24 Act (42 U.S.C. 426(j)(1)) (as added by subsection
25 (a)); and

1 (2) *subsequent months, in the case of an indi-*
 2 *vidual who was so enrolled as of the last month de-*
 3 *scribed in section 226(j)(2) of such Act (42 U.S.C.*
 4 *426(j)(2)) (as so added).*

5 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
 6 **FRASTRUCTURES TO SUPPORT WORKING IN-**
 7 **DIVIDUALS WITH DISABILITIES.**

8 (a) *ESTABLISHMENT.*—

9 (1) *IN GENERAL.*—*The Secretary of Health and*
 10 *Human Services (in this section referred to as the*
 11 *“Secretary”)* shall award grants described in sub-
 12 *section (b) to States to support the design, establish-*
 13 *ment, and operation of State infrastructures that pro-*
 14 *vide items and services to support working individ-*
 15 *uals with disabilities.*

16 (2) *APPLICATION.*—*In order to be eligible for an*
 17 *award of a grant under this section, a State shall*
 18 *submit an application to the Secretary at such time,*
 19 *in such manner, and containing such information as*
 20 *the Secretary shall require.*

21 (3) *DEFINITION OF STATE.*—*In this section, the*
 22 *term “State” means each of the 50 States, the District*
 23 *of Columbia, Puerto Rico, Guam, the United States*
 24 *Virgin Islands, American Samoa, and the Common-*
 25 *wealth of the Northern Mariana Islands.*

1 **(b) GRANTS FOR INFRASTRUCTURE AND OUTREACH.**—

2 **(1) IN GENERAL.**—*Out of the funds appropriated*
3 *under subsection (e), the Secretary shall award grants*
4 *to States to—*

5 **(A)** *support the establishment, implementa-*
6 *tion, and operation of the State infrastructures*
7 *described in subsection (a); and*

8 **(B)** *conduct outreach campaigns regarding*
9 *the existence of such infrastructures.*

10 **(2) ELIGIBILITY FOR GRANTS.**—

11 **(A) IN GENERAL.**—*No State may receive a*
12 *grant under this subsection unless the State—*

13 **(i)** *has an approved amendment to the*
14 *State plan under title XIX of the Social Se-*
15 *curity Act (42 U.S.C. 1396 et seq.) that pro-*
16 *vides medical assistance under such plan to*
17 *individuals described in section*
18 *1902(a)(10)(A)(ii)(XV) of the Social Secu-*
19 *rity Act (42 U.S.C.*
20 *1396a(a)(10)(A)(ii)(XV)); and*

21 **(ii)** *demonstrates to the satisfaction of*
22 *the Secretary that the State makes personal*
23 *assistance services available under the State*
24 *plan under title XIX of the Social Security*
25 *Act (42 U.S.C. 1396 et seq.) to the extent*

1 *necessary to enable individuals described in*
2 *clause (i) to remain employed (as deter-*
3 *mined under section 1905(v)(2) of the So-*
4 *cial Security Act (42 U.S.C. 1396d(v)(2))).*

5 *(B) DEFINITION OF PERSONAL ASSISTANCE*
6 *SERVICES.—In this paragraph, the term “per-*
7 *sonal assistance services” means a range of serv-*
8 *ices, provided by 1 or more persons, designed to*
9 *assist an individual with a disability to perform*
10 *daily activities on and off the job that the indi-*
11 *vidual would typically perform if the individual*
12 *did not have a disability. Such services shall be*
13 *designed to increase the individual’s control in*
14 *life and ability to perform everyday activities on*
15 *or off the job.*

16 *(3) DETERMINATION OF AWARDS.—*

17 *(A) IN GENERAL.—Subject to subparagraph*
18 *(B), the Secretary shall determine a formula for*
19 *awarding grants to States under this section that*
20 *provides special consideration to States that pro-*
21 *vide medical assistance under title XIX of the*
22 *Social Security Act to individuals described in*
23 *section 1902(a)(10)(A)(ii)(XVI) of that Act (42*
24 *U.S.C. 1396a(a)(10)(A)(ii)(XVI)).*

25 *(B) AWARD LIMITS.—*

1 (i) *MINIMUM AWARDS.*—

2 (I) *IN GENERAL.*—Subject to sub-
3 clause (II), no State with an approved
4 application under this section shall re-
5 ceive a grant for a fiscal year that is
6 less than \$500,000.

7 (II) *PRO RATA REDUCTIONS.*—If
8 the funds appropriated under sub-
9 section (e) for a fiscal year are not suf-
10 ficient to pay each State with an ap-
11 plication approved under this section
12 the minimum amount described in
13 subclause (I), the Secretary shall pay
14 each such State an amount equal to the
15 pro rata share of the amount made
16 available.

17 (ii) *MAXIMUM AWARDS.*—No State
18 with an application that has been approved
19 under this section shall receive a grant for
20 a fiscal year that exceeds 15 percent of the
21 total expenditures by the State (including
22 the reimbursed Federal share of such ex-
23 penditures) for medical assistance for indi-
24 viduals eligible under subclause (XV) and
25 (XVI) of section 1902(a)(10)(A)(ii) of the

1 *Social Security Act (42 U.S.C.*
2 *1396a(a)(10)(A)(ii)), as estimated by the*
3 *State and approved by the Secretary.*

4 *(c) AVAILABILITY OF FUNDS.—*

5 *(1) FUNDS AWARDED TO STATES.—Funds*
6 *awarded to a State under a grant made under this*
7 *section for a fiscal year shall remain available until*
8 *expended.*

9 *(2) FUNDS NOT AWARDED TO STATES.—Funds*
10 *not awarded to States in the fiscal year for which*
11 *they are appropriated shall remain available in suc-*
12 *ceeding fiscal years for awarding by the Secretary.*

13 *(d) ANNUAL REPORT.—A State that is awarded a*
14 *grant under this section shall submit an annual report to*
15 *the Secretary on the use of funds provided under the grant.*
16 *Each report shall include the percentage increase in the*
17 *number of title II disability beneficiaries, as defined in sec-*
18 *tion 1148(k)(3) of the Social Security Act (as amended by*
19 *section 201) in the State, and title XVI disability bene-*
20 *ficiaries, as defined in section 1148(k)(4) of the Social Secu-*
21 *rity Act (as so amended) in the State who return to work.*

22 *(e) APPROPRIATION.—*

23 *(1) IN GENERAL.—Out of any funds in the*
24 *Treasury not otherwise appropriated, there is appro-*
25 *priated to make grants under this section—*

1 (A) for fiscal year 2000, \$20,000,000;
2 (B) for fiscal year 2001, \$25,000,000;
3 (C) for fiscal year 2002, \$30,000,000;
4 (D) for fiscal year 2003, \$35,000,000;
5 (E) for fiscal year 2004, \$40,000,000; and
6 (F) for each of fiscal years 2005 through
7 2010, the amount appropriated for the preceding
8 fiscal year increased by the percentage increase
9 (if any) in the Consumer Price Index for All
10 Urban Consumers (United States city average)
11 for the preceding fiscal year.

12 (2) *BUDGET AUTHORITY.*—*This subsection con-*
13 *stitutes budget authority in advance of appropria-*
14 *tions Acts and represents the obligation of the Federal*
15 *Government to provide for the payment of the*
16 *amounts appropriated under paragraph (1).*

17 (f) *RECOMMENDATION.*—*Not later than October 1,*
18 *2009, the Secretary, in consultation with the Work Incen-*
19 *tives Advisory Panel established under section 201(f), shall*
20 *submit a recommendation to the Committee on Commerce*
21 *of the House of Representatives and the Committee on Fi-*
22 *nance of the Senate regarding whether the grant program*
23 *established under this section should be continued after fis-*
24 *cal year 2010.*

1 **SEC. 104. DEMONSTRATION OF COVERAGE UNDER THE**
 2 **MEDICAID PROGRAM OF WORKERS WITH PO-**
 3 **TENTIALLY SEVERE DISABILITIES.**

4 (a) *STATE APPLICATION.*—A State may apply to the
 5 Secretary of Health and Human Services (in this section
 6 referred to as the “Secretary”) for approval of a demonstra-
 7 tion project (in this section referred to as a “demonstration
 8 project”) under which up to a specified maximum number
 9 of individuals who are workers with a potentially severe
 10 disability (as defined in subsection (b)(1)) are provided
 11 medical assistance equal to that provided under section
 12 1905(a) of the Social Security Act (42 U.S.C. 1396d(a))
 13 to individuals described in section 1902(a)(10)(A)(ii)(XV)
 14 of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

15 (b) *WORKER WITH A POTENTIALLY SEVERE DIS-*
 16 *ABILITY DEFINED.*—For purposes of this section—

17 (1) *IN GENERAL.*—The term “worker with a po-
 18 tentially severe disability” means, with respect to a
 19 demonstration project, an individual who—

20 (A) is at least 16, but less than 65, years
 21 of age;

22 (B) has a specific physical or mental im-
 23 pairment that, as defined by the State under the
 24 demonstration project, is reasonably expected,
 25 but for the receipt of items and services described
 26 in section 1905(a) of the Social Security Act (42

1 *U.S.C. 1396d(a)*), to become blind or disabled (as
2 *defined under section 1614(a) of the Social Security*
3 *Act (42 U.S.C. 1382c(a))*); and

4 *(C) is employed (as defined in paragraph*
5 *(2))*.

6 (2) *DEFINITION OF EMPLOYED.*—*An individual*
7 *is considered to be “employed” if the individual—*

8 *(A) is earning at least the applicable min-*
9 *imum wage requirement under section 6 of the*
10 *Fair Labor Standards Act (29 U.S.C. 206) and*
11 *working at least 40 hours per month; or*

12 *(B) is engaged in a work effort that meets*
13 *substantial and reasonable threshold criteria for*
14 *hours of work, wages, or other measures, as de-*
15 *fined under the demonstration project and ap-*
16 *proved by the Secretary.*

17 (c) *APPROVAL OF DEMONSTRATION PROJECTS.*—

18 (1) *IN GENERAL.*—*Subject to paragraph (3), the*
19 *Secretary shall approve applications under subsection*
20 *(a) that meet the requirements of paragraph (2) and*
21 *such additional terms and conditions as the Secretary*
22 *may require. The Secretary may waive the require-*
23 *ment of section 1902(a)(1) of the Social Security Act*
24 *(42 U.S.C. 1396a(a)(1)) to allow for sub-State dem-*
25 *onstrations.*

1 (2) *TERMS AND CONDITIONS OF DEMONSTRATION*
2 *PROJECTS.*—*The Secretary may not approve a dem-*
3 *onstration project under this section unless the State*
4 *provides assurances satisfactory to the Secretary that*
5 *the following conditions are or will be met:*

6 (A) *ELECTION OF OPTIONAL CATEGORY.*—

7 *The State has elected to provide coverage under*
8 *its plan under title XIX of the Social Security*
9 *Act of individuals described in section*
10 *1902(a)(10)(A)(ii)(XV) of the Social Security*
11 *Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).*

12 (B) *MAINTENANCE OF STATE EFFORT.*—

13 *Federal funds paid to a State pursuant to this*
14 *section must be used to supplement, but not sup-*
15 *plant, the level of State funds expended for work-*
16 *ers with potentially severe disabilities under pro-*
17 *grams in effect for such individuals at the time*
18 *the demonstration project is approved under this*
19 *section.*

20 (C) *INDEPENDENT EVALUATION.*—*The State*

21 *provides for an independent evaluation of the*
22 *project.*

23 (3) *LIMITATIONS ON FEDERAL FUNDING.*—

24 (A) *APPROPRIATION.*—

1 *(i) IN GENERAL.—Out of any funds in*
2 *the Treasury not otherwise appropriated,*
3 *there is appropriated to carry out this*
4 *section—*

5 *(I) for fiscal year 2000,*
6 *\$70,000,000;*

7 *(II) for fiscal year 2001,*
8 *\$73,000,000;*

9 *(III) for fiscal year 2002,*
10 *\$77,000,000; and*

11 *(IV) for fiscal year 2003,*
12 *\$80,000,000.*

13 *(ii) BUDGET AUTHORITY.—Clause (i)*
14 *constitutes budget authority in advance of*
15 *appropriations Acts and represents the obli-*
16 *gation of the Federal Government to provide*
17 *for the payment of the amounts appro-*
18 *priated under clause (i).*

19 *(B) LIMITATION ON PAYMENTS.—In no case*
20 *may—*

21 *(i) the aggregate amount of payments*
22 *made by the Secretary to States under this*
23 *section exceed \$300,000,000; or*

1 (ii) payments be provided by the Sec-
2 retary for a fiscal year after fiscal year
3 2005.

4 (C) *FUNDS ALLOCATED TO STATES.*—The
5 Secretary shall allocate funds to States based on
6 their applications and the availability of funds.
7 Funds allocated to a State under a grant made
8 under this section for a fiscal year shall remain
9 available until expended.

10 (D) *FUNDS NOT ALLOCATED TO STATES.*—
11 Funds not allocated to States in the fiscal year
12 for which they are appropriated shall remain
13 available in succeeding fiscal years for allocation
14 by the Secretary using the allocation formula es-
15 tablished under this section.

16 (E) *PAYMENTS TO STATES.*—The Secretary
17 shall pay to each State with a demonstration
18 project approved under this section, from its al-
19 location under subparagraph (C), an amount for
20 each quarter equal to the Federal medical assist-
21 ance percentage (as defined in section 1905(b) of
22 the Social Security Act (42 U.S.C. 1395d(b)) of
23 expenditures in the quarter for medical assist-
24 ance provided to workers with a potentially se-
25 vere disability.

1 (d) *RECOMMENDATION.*—Not later than October 1,
 2 2002, the Secretary shall submit a recommendation to the
 3 Committee on Commerce of the House of Representatives
 4 and the Committee on Finance of the Senate regarding
 5 whether the demonstration project established under this
 6 section should be continued after fiscal year 2003.

7 (e) *STATE DEFINED.*—In this section, the term “State”
 8 has the meaning given such term for purposes of title XIX
 9 of the Social Security Act (42 U.S.C. 1396 et seq.).

10 **TITLE II—TICKET TO WORK AND**
 11 **SELF-SUFFICIENCY AND RE-**
 12 **LATED PROVISIONS**

13 **Subtitle A—Ticket to Work and**
 14 **Self-Sufficiency**

15 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
 16 **SELF-SUFFICIENCY PROGRAM.**

17 (a) *IN GENERAL.*—Part A of title XI of the Social Se-
 18 curity Act (42 U.S.C. 1301 et seq.) is amended by adding
 19 after section 1147 (as added by section 8 of the Noncitizen
 20 Benefit Clarification and Other Technical Amendments Act
 21 of 1998 (Public Law 105–306; 112 Stat. 2928)) the fol-
 22 lowing:

23 “*TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM*

24 “*SEC. 1148. (a) IN GENERAL.*—The Commissioner
 25 shall establish a Ticket to Work and Self-Sufficiency Pro-
 26 gram, under which a disabled beneficiary may use a ticket

1 *to work and self-sufficiency issued by the Commissioner in*
2 *accordance with this section to obtain employment services,*
3 *vocational rehabilitation services, or other support services*
4 *from an employment network which is of the beneficiary's*
5 *choice and which is willing to provide such services to the*
6 *beneficiary.*

7 “(b) *TICKET SYSTEM.*—

8 “(1) *DISTRIBUTION OF TICKETS.*—*The Commis-*
9 *sioner may issue a ticket to work and self-sufficiency*
10 *to disabled beneficiaries for participation in the Pro-*
11 *gram.*

12 “(2) *ASSIGNMENT OF TICKETS.*—*A disabled ben-*
13 *eficiary holding a ticket to work and self-sufficiency*
14 *may assign the ticket to any employment network of*
15 *the beneficiary's choice which is serving under the*
16 *Program and is willing to accept the assignment.*

17 “(3) *TICKET TERMS.*—*A ticket issued under*
18 *paragraph (1) shall consist of a document which evi-*
19 *dences the Commissioner's agreement to pay (as pro-*
20 *vided in paragraph (4)) an employment network,*
21 *which is serving under the Program and to which*
22 *such ticket is assigned by the beneficiary, for such em-*
23 *ployment services, vocational rehabilitation services,*
24 *and other support services as the employment network*
25 *may provide to the beneficiary.*

1 “(4) *PAYMENTS TO EMPLOYMENT NETWORKS.*—
2 *The Commissioner shall pay an employment network*
3 *under the Program in accordance with the outcome*
4 *payment system under subsection (h)(2) or under the*
5 *outcome-milestone payment system under subsection*
6 *(h)(3) (whichever is elected pursuant to subsection*
7 *(h)(1)). An employment network may not request or*
8 *receive compensation for such services from the bene-*
9 *ficiary.*

10 “(c) *STATE PARTICIPATION.*—

11 “(1) *IN GENERAL.*—*Each State agency admin-*
12 *istering or supervising the administration of the*
13 *State plan approved under title I of the Rehabilita-*
14 *tion Act of 1973 may elect to participate in the Pro-*
15 *gram as an employment network with respect to a*
16 *disabled beneficiary. If the State agency does elect to*
17 *participate in the Program, the State agency also*
18 *shall elect to be paid under the outcome payment sys-*
19 *tem or the outcome-milestone payment system in ac-*
20 *cordance with subsection (h)(1). With respect to a dis-*
21 *abled beneficiary that the State agency does not elect*
22 *to have participate in the Program, the State agency*
23 *shall be paid for services provided to that beneficiary*
24 *under the system for payment applicable under sec-*
25 *tion 222(d) and subsections (d) and (e) of section*

1 1615. *The Commissioner shall provide for periodic*
 2 *opportunities for exercising such elections (and rev-*
 3 *ocations).*

4 “(2) *EFFECT OF PARTICIPATION BY STATE*
 5 *AGENCY.—*

6 “(A) *STATE AGENCIES PARTICIPATING.—In*
 7 *any case in which a State agency described in*
 8 *paragraph (1) elects under that paragraph to*
 9 *participate in the Program, the employment*
 10 *services, vocational rehabilitation services, and*
 11 *other support services which, upon assignment of*
 12 *tickets to work and self-sufficiency, are provided*
 13 *to disabled beneficiaries by the State agency act-*
 14 *ing as an employment network shall be governed*
 15 *by plans for vocational rehabilitation services*
 16 *approved under title I of the Rehabilitation Act*
 17 *of 1973.*

18 “(B) *STATE AGENCIES ADMINISTERING MA-*
 19 *TERNAL AND CHILD HEALTH SERVICES PRO-*
 20 *GRAMS.—Subparagraph (A) shall not apply with*
 21 *respect to any State agency administering a pro-*
 22 *gram under title V of this Act.*

23 “(3) *SPECIAL REQUIREMENTS APPLICABLE TO*
 24 *CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—*

1 “(A) *IN GENERAL.*—*In any case in which*
2 *an employment network has been assigned a*
3 *ticket to work and self-sufficiency by a disabled*
4 *beneficiary, no State agency shall be deemed re-*
5 *quired, under this section, title I of the Workforce*
6 *Investment Act of 1998, title I of the Rehabilita-*
7 *tion Act of 1973, or a State plan approved under*
8 *such title, to accept any referral of such disabled*
9 *beneficiary from such employment network un-*
10 *less such employment network and such State*
11 *agency have entered into a written agreement*
12 *that meets the requirements of subparagraph (B).*
13 *Any beneficiary who has assigned a ticket to*
14 *work and self-sufficiency to an employment net-*
15 *work that has not entered into such a written*
16 *agreement with such a State agency may not ac-*
17 *cess vocational rehabilitation services under title*
18 *I of the Rehabilitation Act of 1973 until such*
19 *time as the beneficiary is reassigned to a State*
20 *vocational rehabilitation agency by the Program*
21 *Manager.*

22 “(B) *TERMS OF AGREEMENT.*—*An agree-*
23 *ment required by subparagraph (A) shall specify,*
24 *in accordance with regulations prescribed pursu-*
25 *ant to subparagraph (C)—*

1 “(i) the extent (if any) to which the
2 employment network holding the ticket will
3 provide to the State agency—

4 “(I) reimbursement for costs in-
5 curred in providing services described
6 in subparagraph (A) to the disabled
7 beneficiary; and

8 “(II) other amounts from pay-
9 ments made by the Commissioner to
10 the employment network pursuant to
11 subsection (h); and

12 “(ii) any other conditions that may be
13 required by such regulations.

14 “(C) *REGULATIONS.*—The Commissioner
15 and the Secretary of Education shall jointly pre-
16 scribe regulations specifying the terms of agree-
17 ments required by subparagraph (A) and other-
18 wise necessary to carry out the provisions of this
19 paragraph.

20 “(D) *PENALTY.*—No payment may be made
21 to an employment network pursuant to sub-
22 section (h) in connection with services provided
23 to any disabled beneficiary if such employment
24 network makes referrals described in subpara-
25 graph (A) in violation of the terms of the agree-

1 *ment required under subparagraph (A) or with-*
2 *out having entered into such an agreement.*

3 “(d) *RESPONSIBILITIES OF THE COMMISSIONER.—*

4 “(1) *SELECTION AND QUALIFICATIONS OF PRO-*
5 *GRAM MANAGERS.—The Commissioner shall enter into*
6 *agreements with 1 or more organizations in the pri-*
7 *vate or public sector for service as a program man-*
8 *ager to assist the Commissioner in administering the*
9 *Program. Any such program manager shall be se-*
10 *lected by means of a competitive bidding process,*
11 *from among organizations in the private or public*
12 *sector with available expertise and experience in the*
13 *field of vocational rehabilitation and employment*
14 *services.*

15 “(2) *TENURE, RENEWAL, AND EARLY TERMI-*
16 *NATION.—Each agreement entered into under para-*
17 *graph (1) shall provide for early termination upon*
18 *failure to meet performance standards which shall be*
19 *specified in the agreement and which shall be weight-*
20 *ed to take into account any performance in prior*
21 *terms. Such performance standards shall include—*

22 “(A) *measures for ease of access by bene-*
23 *ficiaries to services; and*

24 “(B) *measures for determining the extent to*
25 *which failures in obtaining services for bene-*

1 *ficiaries fall within acceptable parameters, as de-*
2 *termined by the Commissioner.*

3 “(3) *PRECLUSION FROM DIRECT PARTICIPATION*
4 *IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—*
5 *Agreements under paragraph (1) shall preclude—*

6 “(A) *direct participation by a program*
7 *manager in the delivery of employment services,*
8 *vocational rehabilitation services, or other sup-*
9 *port services to beneficiaries in the service area*
10 *covered by the program manager’s agreement;*
11 *and*

12 “(B) *the holding by a program manager of*
13 *a financial interest in an employment network*
14 *or service provider which provides services in a*
15 *geographic area covered under the program man-*
16 *ager’s agreement.*

17 “(4) *SELECTION OF EMPLOYMENT NETWORKS.—*

18 “(A) *IN GENERAL.—The Commissioner shall*
19 *select and enter into agreements with employ-*
20 *ment networks for service under the Program.*
21 *Such employment networks shall be in addition*
22 *to State agencies serving as employment net-*
23 *works pursuant to elections under subsection (c).*

24 “(B) *ALTERNATE PARTICIPANTS.—In any*
25 *State where the Program is being implemented,*

1 *the Commissioner shall enter into an agreement*
2 *with any alternate participant that is operating*
3 *under the authority of section 222(d)(2) in the*
4 *State as of the date of enactment of this section*
5 *and chooses to serve as an employment network*
6 *under the Program.*

7 “(5) *TERMINATION OF AGREEMENTS WITH EM-*
8 *PLOYMENT NETWORKS.—The Commissioner shall ter-*
9 *minate agreements with employment networks for in-*
10 *adequate performance, as determined by the Commis-*
11 *sioner.*

12 “(6) *QUALITY ASSURANCE.—The Commissioner*
13 *shall provide for such periodic reviews as are nec-*
14 *essary to provide for effective quality assurance in the*
15 *provision of services by employment networks. The*
16 *Commissioner shall solicit and consider the views of*
17 *consumers and the program manager under which the*
18 *employment networks serve and shall consult with*
19 *providers of services to develop performance measure-*
20 *ments. The Commissioner shall ensure that the results*
21 *of the periodic reviews are made available to bene-*
22 *ficiaries who are prospective service recipients as they*
23 *select employment networks. The Commissioner shall*
24 *ensure that the periodic surveys of beneficiaries re-*

1 *ceiving services under the Program are designed to*
2 *measure customer service satisfaction.*

3 *“(7) DISPUTE RESOLUTION.—The Commissioner*
4 *shall provide for a mechanism for resolving disputes*
5 *between beneficiaries and employment networks, be-*
6 *tween program managers and employment networks,*
7 *and between program managers and providers of*
8 *services. The Commissioner shall afford a party to*
9 *such a dispute a reasonable opportunity for a full*
10 *and fair review of the matter in dispute.*

11 *“(e) PROGRAM MANAGERS.—*

12 *“(1) IN GENERAL.—A program manager shall*
13 *conduct tasks appropriate to assist the Commissioner*
14 *in carrying out the Commissioner’s duties in admin-*
15 *istering the Program.*

16 *“(2) RECRUITMENT OF EMPLOYMENT NET-*
17 *WORKS.—A program manager shall recruit, and rec-*
18 *ommend for selection by the Commissioner, employ-*
19 *ment networks for service under the Program. The*
20 *program manager shall carry out such recruitment*
21 *and provide such recommendations, and shall mon-*
22 *itor all employment networks serving in the Program*
23 *in the geographic area covered under the program*
24 *manager’s agreement, to the extent necessary and ap-*
25 *propriate to ensure that adequate choices of services*

1 *are made available to beneficiaries. Employment net-*
2 *works may serve under the Program only pursuant*
3 *to an agreement entered into with the Commissioner*
4 *under the Program incorporating the applicable pro-*
5 *visions of this section and regulations thereunder, and*
6 *the program manager shall provide and maintain as-*
7 *surances to the Commissioner that payment by the*
8 *Commissioner to employment networks pursuant to*
9 *this section is warranted based on compliance by such*
10 *employment networks with the terms of such agree-*
11 *ment and this section. The program manager shall*
12 *not impose numerical limits on the number of em-*
13 *ployment networks to be recommended pursuant to*
14 *this paragraph.*

15 *“(3) FACILITATION OF ACCESS BY BENE-*
16 *FICIARIES TO EMPLOYMENT NETWORKS.—A program*
17 *manager shall facilitate access by beneficiaries to em-*
18 *ployment networks. The program manager shall en-*
19 *sure that each beneficiary is allowed changes in em-*
20 *ployment networks for good cause, as determined by*
21 *the Commissioner, without being deemed to have re-*
22 *jected services under the Program. The program man-*
23 *ager shall establish and maintain lists of employment*
24 *networks available to beneficiaries and shall make*
25 *such lists generally available to the public. The pro-*

1 *gram manager shall ensure that all information pro-*
2 *vided to disabled beneficiaries pursuant to this para-*
3 *graph is provided in accessible formats.*

4 “(4) *ENSURING AVAILABILITY OF ADEQUATE*
5 *SERVICES.—The program manager shall ensure that*
6 *employment services, vocational rehabilitation serv-*
7 *ices, and other support services are provided to bene-*
8 *ficiaries throughout the geographic area covered under*
9 *the program manager’s agreement, including rural*
10 *areas.*

11 “(5) *REASONABLE ACCESS TO SERVICES.—The*
12 *program manager shall take such measures as are*
13 *necessary to ensure that sufficient employment net-*
14 *works are available and that each beneficiary receiv-*
15 *ing services under the Program has reasonable access*
16 *to employment services, vocational rehabilitation serv-*
17 *ices, and other support services. Services provided*
18 *under the Program may include case management,*
19 *work incentives planning, supported employment, ca-*
20 *reer planning, career plan development, vocational*
21 *assessment, job training, placement, followup services,*
22 *and such other services as may be specified by the*
23 *Commissioner under the Program. The program man-*
24 *ager shall ensure that such services are available in*
25 *each service area.*

1 “(f) *EMPLOYMENT NETWORKS.*—

2 “(1) *QUALIFICATIONS FOR EMPLOYMENT NET-*
3 *WORKS.*—

4 “(A) *IN GENERAL.*—*Each employment net-*
5 *work serving under the Program shall consist of*
6 *an agency or instrumentality of a State (or a*
7 *political subdivision thereof) or a private entity*
8 *that assumes responsibility for the coordination*
9 *and delivery of services under the Program to in-*
10 *dividuals assigning to the employment network*
11 *tickets to work and self-sufficiency issued under*
12 *subsection (b).*

13 “(B) *ONE-STOP DELIVERY SYSTEMS.*—*An*
14 *employment network serving under the Program*
15 *may consist of a one-stop delivery system estab-*
16 *lished under subtitle B of title I of the Workforce*
17 *Investment Act of 1998.*

18 “(C) *COMPLIANCE WITH SELECTION CRI-*
19 *TERIA.*—*No employment network may serve*
20 *under the Program unless it meets and main-*
21 *tains compliance with both general selection cri-*
22 *teria (such as professional and educational*
23 *qualifications (where applicable)) and specific*
24 *selection criteria (such as substantial expertise*

1 *and experience in providing relevant employ-*
2 *ment services and supports).*

3 “(D) *SINGLE OR ASSOCIATED PROVIDERS*
4 *ALLOWED.—An employment network shall con-*
5 *sist of either a single provider of such services or*
6 *of an association of such providers organized so*
7 *as to combine their resources into a single entity.*
8 *An employment network may meet the require-*
9 *ments of subsection (e)(4) by providing services*
10 *directly, or by entering into agreements with*
11 *other individuals or entities providing appro-*
12 *priate employment services, vocational rehabili-*
13 *tation services, or other support services.*

14 “(2) *REQUIREMENTS RELATING TO PROVISION OF*
15 *SERVICES.—Each employment network serving under*
16 *the Program shall be required under the terms of its*
17 *agreement with the Commissioner to—*

18 “(A) *serve prescribed service areas; and*

19 “(B) *take such measures as are necessary to*
20 *ensure that employment services, vocational re-*
21 *habilitation services, and other support services*
22 *provided under the Program by, or under agree-*
23 *ments entered into with, the employment network*
24 *are provided under appropriate individual work*
25 *plans meeting the requirements of subsection (g).*

1 “(3) *ANNUAL FINANCIAL REPORTING.*—*Each em-*
2 *ployment network shall meet financial reporting re-*
3 *quirements as prescribed by the Commissioner.*

4 “(4) *PERIODIC OUTCOMES REPORTING.*—*Each*
5 *employment network shall prepare periodic reports,*
6 *on at least an annual basis, itemizing for the covered*
7 *period specific outcomes achieved with respect to spe-*
8 *cific services provided by the employment network.*
9 *Such reports shall conform to a national model pre-*
10 *scribed under this section. Each employment network*
11 *shall provide a copy of the latest report issued by the*
12 *employment network pursuant to this paragraph to*
13 *each beneficiary upon enrollment under the Program*
14 *for services to be received through such employment*
15 *network. Upon issuance of each report to each bene-*
16 *ficiary, a copy of the report shall be maintained in*
17 *the files of the employment network. The program*
18 *manager shall ensure that copies of all such reports*
19 *issued under this paragraph are made available to the*
20 *public under reasonable terms.*

21 “(g) *INDIVIDUAL WORK PLANS.*—

22 “(1) *REQUIREMENTS.*—*Each employment net-*
23 *work shall—*

24 “(A) *take such measures as are necessary to*
25 *ensure that employment services, vocational re-*

1 *habilitation services, and other support services*
2 *provided under the Program by, or under agree-*
3 *ments entered into with, the employment network*
4 *are provided under appropriate individual work*
5 *plans that meet the requirements of subpara-*
6 *graph (C);*

7 “(B) *develop and implement each such indi-*
8 *vidual work plan in partnership with each bene-*
9 *ficiary receiving such services in a manner that*
10 *affords the beneficiary the opportunity to exer-*
11 *cise informed choice in selecting an employment*
12 *goal and specific services needed to achieve that*
13 *employment goal;*

14 “(C) *ensure that each individual work plan*
15 *includes at least—*

16 “(i) *a statement of the vocational goal*
17 *developed with the beneficiary;*

18 “(ii) *a statement of the services and*
19 *supports that have been deemed necessary*
20 *for the beneficiary to accomplish that goal;*

21 “(iii) *a statement of any terms and*
22 *conditions related to the provision of such*
23 *services and supports; and*

24 “(iv) *a statement of understanding re-*
25 *garding the beneficiary’s rights under the*

1 *Program (such as the right to retrieve the*
2 *ticket to work and self-sufficiency if the ben-*
3 *eficiary is dissatisfied with the services*
4 *being provided by the employment network)*
5 *and remedies available to the individual,*
6 *including information on the availability of*
7 *advocacy services and assistance in resolv-*
8 *ing disputes through the State grant pro-*
9 *gram authorized under section 1150;*

10 *“(D) provide a beneficiary the opportunity*
11 *to amend the individual work plan if a change*
12 *in circumstances necessitates a change in the*
13 *plan; and*

14 *“(E) make each beneficiary’s individual*
15 *work plan available to the beneficiary in, as ap-*
16 *propriate, an accessible format chosen by the*
17 *beneficiary.*

18 *“(2) EFFECTIVE UPON WRITTEN APPROVAL.—A*
19 *beneficiary’s individual work plan shall take effect*
20 *upon written approval by the beneficiary or a rep-*
21 *resentative of the beneficiary and a representative of*
22 *the employment network that, in providing such writ-*
23 *ten approval, acknowledges assignment of the bene-*
24 *ficiary’s ticket to work and self-sufficiency.*

25 *“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—*

1 “(1) *ELECTION OF PAYMENT SYSTEM BY EM-*
2 *PLOYMENT NETWORKS.—*

3 “(A) *IN GENERAL.—The Program shall pro-*
4 *vide for payment authorized by the Commis-*
5 *sioner to employment networks under either an*
6 *outcome payment system or an outcome-mile-*
7 *stone payment system. Each employment net-*
8 *work shall elect which payment system will be*
9 *utilized by the employment network, and, for*
10 *such period of time as such election remains in*
11 *effect, the payment system so elected shall be uti-*
12 *lized exclusively in connection with such employ-*
13 *ment network (except as provided in subpara-*
14 *graph (B)).*

15 “(B) *NO CHANGE IN METHOD OF PAYMENT*
16 *FOR BENEFICIARIES WITH TICKETS ALREADY AS-*
17 *SIGNED TO THE EMPLOYMENT NETWORKS.—Any*
18 *election of a payment system by an employment*
19 *network that would result in a change in the*
20 *method of payment to the employment network*
21 *for services provided to a beneficiary who is re-*
22 *ceiving services from the employment network at*
23 *the time of the election shall not be effective with*
24 *respect to payment for services provided to that*
25 *beneficiary and the method of payment pre-*

1 *viously selected shall continue to apply with re-*
2 *spect to such services.*

3 *“(2) OUTCOME PAYMENT SYSTEM.—*

4 *“(A) IN GENERAL.—The outcome payment*
5 *system shall consist of a payment structure gov-*
6 *erning employment networks electing such sys-*
7 *tem under paragraph (1)(A) which meets the re-*
8 *quirements of this paragraph.*

9 *“(B) PAYMENTS MADE DURING OUTCOME*
10 *PAYMENT PERIOD.—The outcome payment sys-*
11 *tem shall provide for a schedule of payments to*
12 *an employment network in connection with each*
13 *individual who is a beneficiary for each month*
14 *during the individual’s outcome payment period*
15 *for which benefits (described in paragraphs (3)*
16 *and (4) of subsection (k)) are not payable to such*
17 *individual because of work or earnings.*

18 *“(C) COMPUTATION OF PAYMENTS TO EM-*
19 *PLOYMENT NETWORK.—The payment schedule of*
20 *the outcome payment system shall be designed so*
21 *that—*

22 *“(i) the payment for each of the 60*
23 *months during the outcome payment period*
24 *for which benefits (described in paragraphs*
25 *(3) and (4) of subsection (k)) are not pay-*

1 *able is equal to a fixed percentage of the*
2 *payment calculation base for the calendar*
3 *year in which such month occurs; and*

4 “(ii) *such fixed percentage is set at a*
5 *percentage which does not exceed 40 percent.*

6 “(3) *OUTCOME-MILESTONE PAYMENT SYSTEM.—*

7 “(A) *IN GENERAL.—The outcome-milestone*
8 *payment system shall consist of a payment*
9 *structure governing employment networks elect-*
10 *ing such system under paragraph (1)(A) which*
11 *meets the requirements of this paragraph.*

12 “(B) *EARLY PAYMENTS UPON ATTAINMENT*
13 *OF MILESTONES IN ADVANCE OF OUTCOME PAY-*
14 *MENT PERIODS.—The outcome-milestone pay-*
15 *ment system shall provide for 1 or more mile-*
16 *stones with respect to beneficiaries receiving serv-*
17 *ices from an employment network under the Pro-*
18 *gram that are directed toward the goal of perma-*
19 *nent employment. Such milestones shall form a*
20 *part of a payment structure that provides, in*
21 *addition to payments made during outcome pay-*
22 *ment periods, payments made prior to outcome*
23 *payment periods in amounts based on the at-*
24 *tainment of such milestones.*

1 “(C) *LIMITATION ON TOTAL PAYMENTS TO*
2 *EMPLOYMENT NETWORK.*—*The payment schedule*
3 *of the outcome-milestone payment system shall be*
4 *designed so that the total of the payments to the*
5 *employment network with respect to each bene-*
6 *ficiary is less than, on a net present value basis*
7 *(using an interest rate determined by the Com-*
8 *missioner that appropriately reflects the cost of*
9 *funds faced by providers), the total amount to*
10 *which payments to the employment network with*
11 *respect to the beneficiary would be limited if the*
12 *employment network were paid under the out-*
13 *come payment system.*

14 “(4) *DEFINITIONS.*—*In this subsection:*

15 “(A) *PAYMENT CALCULATION BASE.*—*The*
16 *term ‘payment calculation base’ means, for any*
17 *calendar year—*

18 “(i) *in connection with a title II dis-*
19 *ability beneficiary, the average disability*
20 *insurance benefit payable under section 223*
21 *for all beneficiaries for months during the*
22 *preceding calendar year; and*

23 “(ii) *in connection with a title XVI*
24 *disability beneficiary (who is not concu-*
25 *rently a title II disability beneficiary), the*

1 *average payment of supplemental security*
2 *income benefits based on disability payable*
3 *under title XVI (excluding State supplemen-*
4 *tation) for months during the preceding cal-*
5 *endar year to all beneficiaries who have at-*
6 *tained age 18 but have not attained age 65.*

7 “(B) *OUTCOME PAYMENT PERIOD.*—*The*
8 *term ‘outcome payment period’ means, in con-*
9 *nection with any individual who had assigned a*
10 *ticket to work and self-sufficiency to an employ-*
11 *ment network under the Program, a period—*

12 *“(i) beginning with the first month,*
13 *ending after the date on which such ticket*
14 *was assigned to the employment network,*
15 *for which benefits (described in paragraphs*
16 *(3) and (4) of subsection (k)) are not pay-*
17 *able to such individual by reason of engage-*
18 *ment in substantial gainful activity or by*
19 *reason of earnings from work activity; and*

20 *“(ii) ending with the 60th month (con-*
21 *secutive or otherwise), ending after such*
22 *date, for which such benefits are not pay-*
23 *able to such individual by reason of engage-*
24 *ment in substantial gainful activity or by*
25 *reason of earnings from work activity.*

1 “(5) *PERIODIC REVIEW AND ALTERATIONS OF*
2 *PRESCRIBED SCHEDULES.—*

3 “(A) *PERCENTAGES AND PERIODS.—The*
4 *Commissioner shall periodically review the per-*
5 *centage specified in paragraph (2)(C), the total*
6 *payments permissible under paragraph (3)(C),*
7 *and the period of time specified in paragraph*
8 *(4)(B) to determine whether such percentages,*
9 *such permissible payments, and such period pro-*
10 *vide an adequate incentive for employment net-*
11 *works to assist beneficiaries to enter the work-*
12 *force, while providing for appropriate economies.*
13 *The Commissioner may alter such percentage,*
14 *such total permissible payments, or such period*
15 *of time to the extent that the Commissioner de-*
16 *termines, on the basis of the Commissioner’s re-*
17 *view under this paragraph, that such an alter-*
18 *ation would better provide the incentive and*
19 *economies described in the preceding sentence.*

20 “(B) *NUMBER AND AMOUNTS OF MILESTONE*
21 *PAYMENTS.—The Commissioner shall periodi-*
22 *cally review the number and amounts of mile-*
23 *stone payments established by the Commissioner*
24 *pursuant to this section to determine whether*
25 *they provide an adequate incentive for employ-*

1 *ment networks to assist beneficiaries to enter the*
2 *workforce, taking into account information pro-*
3 *vided to the Commissioner by program man-*
4 *agers, the Work Incentives Advisory Panel estab-*
5 *lished under section 201(f) of the Work Incen-*
6 *tives Improvement Act of 1999, and other reli-*
7 *able sources. The Commissioner may from time*
8 *to time alter the number and amounts of mile-*
9 *stone payments initially established by the Com-*
10 *missioner pursuant to this section to the extent*
11 *that the Commissioner determines that such an*
12 *alteration would allow an adequate incentive for*
13 *employment networks to assist beneficiaries to*
14 *enter the workforce. Such alteration shall be*
15 *based on information provided to the Commis-*
16 *sioner by program managers, the Work Incen-*
17 *tives Advisory Panel established under section*
18 *201(f) of the Work Incentives Improvement Act*
19 *of 1999, or other reliable sources.*

20 *“(i) SUSPENSION OF DISABILITY REVIEWS.—During*
21 *any period for which an individual is using, as defined*
22 *by the Commissioner, a ticket to work and self-sufficiency*
23 *issued under this section, the Commissioner (and any ap-*
24 *plicable State agency) may not initiate a continuing dis-*
25 *ability review or other review under section 221 of whether*

1 *the individual is or is not under a disability or a review*
2 *under title XVI similar to any such review under section*
3 *221.*

4 “(j) *ALLOCATION OF COSTS.—*

5 “(1) *PAYMENTS TO EMPLOYMENT NETWORKS.—*

6 *Payments to employment networks (including State*
7 *agencies that elect to participate in the Program as*
8 *an employment network) shall be made from the Fed-*
9 *eral Old-Age and Survivors Insurance Trust Fund or*
10 *the Federal Disability Insurance Trust Fund, as ap-*
11 *propriate, in the case of ticketed title II disability*
12 *beneficiaries who return to work, or from the appro-*
13 *priation made available for making supplemental se-*
14 *curity income payments under title XVI, in the case*
15 *of title XVI disability beneficiaries who return to*
16 *work. With respect to ticketed beneficiaries who con-*
17 *currently are entitled to benefits under title II and el-*
18 *igible for payments under title XVI who return to*
19 *work, the Commissioner shall allocate the cost of pay-*
20 *ments to employment networks to which the tickets of*
21 *such beneficiaries have been assigned among such*
22 *Trust Funds and appropriation, as appropriate.*

23 “(2) *ADMINISTRATIVE EXPENSES.—The costs of*
24 *administering this section (other than payments to*
25 *employment networks) shall be paid from amounts*

1 *made available for the administration of title II and*
2 *amounts made available for the administration of*
3 *title XVI, and shall be allocated among those amounts*
4 *as appropriate.*

5 “(k) *DEFINITIONS.—In this section:*

6 “(1) *COMMISSIONER.—The term ‘Commissioner’*
7 *means the Commissioner of Social Security.*

8 “(2) *DISABLED BENEFICIARY.—The term ‘dis-*
9 *abled beneficiary’ means a title II disability bene-*
10 *ficiary or a title XVI disability beneficiary.*

11 “(3) *TITLE II DISABILITY BENEFICIARY.—The*
12 *term ‘title II disability beneficiary’ means an indi-*
13 *vidual entitled to disability insurance benefits under*
14 *section 223 or to monthly insurance benefits under*
15 *section 202 based on such individual’s disability (as*
16 *defined in section 223(d)). An individual is a title II*
17 *disability beneficiary for each month for which such*
18 *individual is entitled to such benefits.*

19 “(4) *TITLE XVI DISABILITY BENEFICIARY.—The*
20 *term ‘title XVI disability beneficiary’ means an indi-*
21 *vidual eligible for supplemental security income bene-*
22 *fits under title XVI on the basis of blindness (within*
23 *the meaning of section 1614(a)(2)) or disability*
24 *(within the meaning of section 1614(a)(3)). An indi-*
25 *vidual is a title XVI disability beneficiary for each*

1 *month for which such individual is eligible for such*
2 *benefits.*

3 “(5) *SUPPLEMENTAL SECURITY INCOME BENEFIT*
4 *UNDER TITLE XVI.—The term ‘supplemental security*
5 *income benefit under title XVI’ means a cash benefit*
6 *under section 1611 or 1619(a), and does not include*
7 *a State supplementary payment, administered feder-*
8 *ally or otherwise.*

9 “(l) *REGULATIONS.—Not later than 1 year after the*
10 *date of enactment of this section, the Commissioner shall*
11 *prescribe such regulations as are necessary to carry out the*
12 *provisions of this section.*

13 “(m) *REAUTHORIZATION OF PROGRAM.—*

14 “(1) *IN GENERAL.—The Program established*
15 *under this section shall terminate on the date that is*
16 *5 years after the date that the Commissioner com-*
17 *mences implementation of the Program.*

18 “(2) *ASSURANCE OF OUTCOME PAYMENT PE-*
19 *RIOD.—Notwithstanding paragraph (1)—*

20 “(A) *any individual who has initiated a*
21 *work plan in accordance with subsection (g) may*
22 *use services provided under the Program in ac-*
23 *cordance with this section; and*

1 “(B) any employment network that provides
2 services to such an individual shall receive pay-
3 ments for such services,
4 during the individual’s outcome payment period (as
5 defined in paragraph (4)(B) of subsection (h), includ-
6 ing any alteration of such period in accordance with
7 paragraph (5) of that subsection).”.

8 (b) CONFORMING AMENDMENTS.—

9 (1) AMENDMENTS TO TITLE II.—

10 (A) Section 221(i) of the Social Security
11 Act (42 U.S.C. 421(i)) is amended by adding at
12 the end the following:

13 “(5) For suspension of reviews under this subsection
14 in the case of an individual using a ticket to work and
15 self-sufficiency, see section 1148(i).”.

16 (B) Section 222(a) of the Social Security
17 Act (42 U.S.C. 422(a)) is repealed.

18 (C) Section 222(b) of the Social Security
19 Act (42 U.S.C. 422(b)) is repealed.

20 (D) Section 225(b)(1) of the Social Security
21 Act (42 U.S.C. 425(b)(1)) is amended by striking
22 “a program of vocational rehabilitation services”
23 and inserting “a program consisting of the Tick-
24 et to Work and Self-Sufficiency Program under
25 section 1148 or another program of vocational

1 *rehabilitation services, employment services, or*
2 *other support services”.*

3 (2) *AMENDMENTS TO TITLE XVI.—*

4 (A) *Section 1615(a) of the Social Security*
5 *Act (42 U.S.C. 1382d(a)) is amended to read as*
6 *follows:*

7 “*SEC. 1615. (a) In the case of any blind or disabled*
8 *individual who—*

9 “*(1) has not attained age 16, and*

10 “*(2) with respect to whom benefits are paid*
11 *under this title,*

12 *the Commissioner of Social Security shall make provision*
13 *for referral of such individual to the appropriate State*
14 *agency administering the State program under title V.”.*

15 (B) *Section 1615(c) of the Social Security*
16 *Act (42 U.S.C. 1382d(c)) is repealed.*

17 (C) *Section 1631(a)(6)(A) of the Social Se-*
18 *curity Act (42 U.S.C. 1383(a)(6)(A)) is amended*
19 *by striking “a program of vocational rehabilita-*
20 *tion services” and inserting “a program con-*
21 *sisting of the Ticket to Work and Self-Sufficiency*
22 *Program under section 1148 or another program*
23 *of vocational rehabilitation services, employment*
24 *services, or other support services”.*

1 (D) *Section 1633(c) of the Social Security*
2 *Act (42 U.S.C. 1383b(c)) is amended—*

3 (i) *by inserting “(1)” after “(c)”;* and

4 (ii) *by adding at the end the following:*

5 “(2) *For suspension of continuing disability reviews*
6 *and other reviews under this title similar to reviews under*
7 *section 221 in the case of an individual using a ticket to*
8 *work and self-sufficiency, see section 1148(i).”.*

9 (c) *EFFECTIVE DATE.—Subject to subsection (d), the*
10 *amendments made by subsections (a) and (b) shall take ef-*
11 *fect with the first month following 1 year after the date*
12 *of enactment of this Act.*

13 (d) *GRADUATED IMPLEMENTATION OF PROGRAM.—*

14 (1) *IN GENERAL.—Not later than 1 year after*
15 *the date of enactment of this Act, the Commissioner*
16 *of Social Security shall commence implementation of*
17 *the amendments made by this section (other than*
18 *paragraphs (1)(C) and (2)(B) of subsection (b)) in*
19 *graduated phases at phase-in sites selected by the*
20 *Commissioner. Such phase-in sites shall be selected so*
21 *as to ensure, prior to full implementation of the Tick-*
22 *et to Work and Self-Sufficiency Program, the develop-*
23 *ment and refinement of referral processes, payment*
24 *systems, computer linkages, management information*
25 *systems, and administrative processes necessary to*

1 *provide for full implementation of such amendments.*
2 *Subsection (c) shall apply with respect to paragraphs*
3 *(1)(C) and (2)(B) of subsection (b) without regard to*
4 *this subsection.*

5 (2) *REQUIREMENTS.—Implementation of the*
6 *Program at each phase-in site shall be carried out on*
7 *a wide enough scale to permit a thorough evaluation*
8 *of the alternative methods under consideration, so as*
9 *to ensure that the most efficacious methods are deter-*
10 *mined and in place for full implementation of the*
11 *Program on a timely basis.*

12 (3) *FULL IMPLEMENTATION.—The Commissioner*
13 *shall ensure that the ability to provide tickets and*
14 *services to individuals under the Program exists in*
15 *every State as soon as practicable on or after the ef-*
16 *fective date specified in subsection (c) but not later*
17 *than 3 years after such date.*

18 (4) *ONGOING EVALUATION OF PROGRAM.—*

19 (A) *IN GENERAL.—The Commissioner shall*
20 *design and conduct a series of evaluations to as-*
21 *sess the cost-effectiveness of activities carried out*
22 *under this section and the amendments made*
23 *thereby, as well as the effects of this section and*
24 *the amendments made thereby on work outcomes*

1 *for beneficiaries receiving tickets to work and*
2 *self-sufficiency under the Program.*

3 (B) *CONSULTATION.*—*The Commissioner*
4 *shall design and carry out the series of evalua-*
5 *tions after receiving relevant advice from experts*
6 *in the fields of disability, vocational rehabilita-*
7 *tion, and program evaluation and individuals*
8 *using tickets to work and self-sufficiency under*
9 *the Program and consulting with the Work In-*
10 *centives Advisory Panel established under section*
11 *201(f), the Comptroller General of the United*
12 *States, other agencies of the Federal Government,*
13 *and private organizations with appropriate ex-*
14 *pertise.*

15 (C) *METHODOLOGY.*—

16 (i) *IMPLEMENTATION.*—*The Commis-*
17 *sioner, in consultation with the Work Incen-*
18 *tives Advisory Panel established under sec-*
19 *tion 201(f), shall ensure that plans for eval-*
20 *uations and data collection methods under*
21 *the Program are appropriately designed to*
22 *obtain detailed employment information.*

23 (ii) *SPECIFIC MATTERS TO BE AD-*
24 *DRESSED.*—*Each such evaluation shall ad-*
25 *dress (but is not limited to)—*

1 (I) the annual cost (including net
2 cost) of the Program and the annual
3 cost (including net cost) that would
4 have been incurred in the absence of
5 the Program;

6 (II) the determinants of return to
7 work, including the characteristics of
8 beneficiaries in receipt of tickets under
9 the Program;

10 (III) the types of employment
11 services, vocational rehabilitation serv-
12 ices, and other support services fur-
13 nished to beneficiaries in receipt of
14 tickets under the Program who return
15 to work and to those who do not return
16 to work;

17 (IV) the duration of employment
18 services, vocational rehabilitation serv-
19 ices, and other support services fur-
20 nished to beneficiaries in receipt of
21 tickets under the Program who return
22 to work and the duration of such serv-
23 ices furnished to those who do not re-
24 turn to work and the cost to employ-

1 *ment networks of furnishing such serv-*
2 *ices;*

3 *(V) the employment outcomes, in-*
4 *cluding wages, occupations, benefits,*
5 *and hours worked, of beneficiaries who*
6 *return to work after receiving tickets*
7 *under the Program and those who re-*
8 *turn to work without receiving such*
9 *tickets;*

10 *(VI) the characteristics of pro-*
11 *viders whose services are provided*
12 *within an employment network under*
13 *the Program;*

14 *(VII) the extent (if any) to which*
15 *employment networks display a greater*
16 *willingness to provide services to bene-*
17 *ficiaries with a range of disabilities;*

18 *(VIII) the characteristics (includ-*
19 *ing employment outcomes) of those*
20 *beneficiaries who receive services under*
21 *the outcome payment system and of*
22 *those beneficiaries who receive services*
23 *under the outcome-milestone payment*
24 *system;*

1 *(IX) measures of satisfaction*
2 *among beneficiaries in receipt of tick-*
3 *ets under the Program; and*

4 *(X) reasons for (including com-*
5 *ments solicited from beneficiaries re-*
6 *garding) their choice not to use their*
7 *tickets or their inability to return to*
8 *work despite the use of their tickets.*

9 *(D) PERIODIC EVALUATION REPORTS.—Fol-*
10 *lowing the close of the third and fifth fiscal years*
11 *ending after the effective date under subsection*
12 *(c), and prior to the close of the seventh fiscal*
13 *year ending after such date, the Commissioner*
14 *shall transmit to the Committee on Ways and*
15 *Means of the House of Representatives and the*
16 *Committee on Finance of the Senate a report*
17 *containing the Commissioner's evaluation of the*
18 *progress of activities conducted under the provi-*
19 *sions of this section and the amendments made*
20 *thereby. Each such report shall set forth the*
21 *Commissioner's evaluation of the extent to which*
22 *the Program has been successful and the Com-*
23 *missioner's conclusions on whether or how the*
24 *Program should be modified. Each such report*
25 *shall include such data, findings, materials, and*

1 *recommendations as the Commissioner may con-*
 2 *sider appropriate.*

3 (5) *EXTENT OF STATE'S RIGHT OF FIRST RE-*
 4 *FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF*
 5 *AMENDMENTS IN SUCH STATE.—*

6 (A) *IN GENERAL.—In the case of any State*
 7 *in which the amendments made by subsection (a)*
 8 *have not been fully implemented pursuant to this*
 9 *subsection, the Commissioner shall determine by*
 10 *regulation the extent to which—*

11 (i) *the requirement under section*
 12 *222(a) of the Social Security Act for*
 13 *prompt referrals to a State agency, and*

14 (ii) *the authority of the Commissioner*
 15 *under section 222(d)(2) of the Social Secu-*
 16 *rity Act to provide vocational rehabilitation*
 17 *services in such State by agreement or con-*
 18 *tract with other public or private agencies,*
 19 *organizations, institutions, or individuals,*
 20 *shall apply in such State.*

21 (B) *EXISTING AGREEMENTS.—Nothing in*
 22 *subparagraph (A) or the amendments made by*
 23 *subsection (a) shall be construed to limit, im-*
 24 *pede, or otherwise affect any agreement entered*
 25 *into pursuant to section 222(d)(2) of the Social*

1 *Security Act before the date of enactment of this*
2 *Act with respect to services provided pursuant to*
3 *such agreement to beneficiaries receiving services*
4 *under such agreement as of such date, except*
5 *with respect to services (if any) to be provided*
6 *after 3 years after the effective date provided in*
7 *subsection (c).*

8 *(e) SPECIFIC REGULATIONS REQUIRED.—*

9 *(1) IN GENERAL.—The Commissioner of Social*
10 *Security shall prescribe such regulations as are nec-*
11 *essary to implement the amendments made by this*
12 *section.*

13 *(2) SPECIFIC MATTERS TO BE INCLUDED IN REG-*
14 *ULATIONS.—The matters which shall be addressed in*
15 *such regulations shall include—*

16 *(A) the form and manner in which tickets*
17 *to work and self-sufficiency may be distributed to*
18 *beneficiaries pursuant to section 1148(b)(1) of*
19 *the Social Security Act;*

20 *(B) the format and wording of such tickets,*
21 *which shall incorporate by reference any contrac-*
22 *tual terms governing service by employment net-*
23 *works under the Program;*

24 *(C) the form and manner in which State*
25 *agencies may elect participation in the Ticket to*

1 *Work and Self-Sufficiency Program (and revoke*
2 *such an election) pursuant to section 1148(c)(1)*
3 *of the Social Security Act and provision for*
4 *periodic opportunities for exercising such elec-*
5 *tions (and revocations);*

6 *(D) the status of State agencies under sec-*
7 *tion 1148(c)(1) at the time that State agencies*
8 *exercise elections (and revocations) under that*
9 *section;*

10 *(E) the terms of agreements to be entered*
11 *into with program managers pursuant to section*
12 *1148(d) of the Social Security Act, including—*

13 *(i) the terms by which program man-*
14 *agers are precluded from direct participa-*
15 *tion in the delivery of services pursuant to*
16 *section 1148(d)(3) of the Social Security*
17 *Act;*

18 *(ii) standards which must be met by*
19 *quality assurance measures referred to in*
20 *paragraph (6) of section 1148(d) and meth-*
21 *ods of recruitment of employment networks*
22 *utilized pursuant to paragraph (2) of sec-*
23 *tion 1148(e); and*

1 (iii) the format under which dispute
2 resolution will operate under section
3 1148(d)(7);

4 (F) the terms of agreements to be entered
5 into with employment networks pursuant to sec-
6 tion 1148(d)(4) of the Social Security Act,
7 including—

8 (i) the manner in which service areas
9 are specified pursuant to section
10 1148(f)(2)(A) of the Social Security Act;

11 (ii) the general selection criteria and
12 the specific selection criteria which are ap-
13 plicable to employment networks under sec-
14 tion 1148(f)(1)(C) of the Social Security
15 Act in selecting service providers;

16 (iii) specific requirements relating to
17 annual financial reporting by employment
18 networks pursuant to section 1148(f)(3) of
19 the Social Security Act; and

20 (iv) the national model to which peri-
21 odic outcomes reporting by employment net-
22 works must conform under section
23 1148(f)(4) of the Social Security Act;

1 (G) standards which must be met by indi-
2 vidual work plans pursuant to section 1148(g) of
3 the Social Security Act;

4 (H) standards which must be met by pay-
5 ment systems required under section 1148(h) of
6 the Social Security Act, including—

7 (i) the form and manner in which elec-
8 tions by employment networks of payment
9 systems are to be exercised pursuant to sec-
10 tion 1148(h)(1)(A);

11 (ii) the terms which must be met by an
12 outcome payment system under section
13 1148(h)(2);

14 (iii) the terms which must be met by
15 an outcome-milestone payment system
16 under section 1148(h)(3);

17 (iv) any revision of the percentage
18 specified in paragraph (2)(C) of section
19 1148(h) of the Social Security Act or the
20 period of time specified in paragraph
21 (4)(B) of such section 1148(h); and

22 (v) annual oversight procedures for
23 such systems; and

24 (I) procedures for effective oversight of the
25 Program by the Commissioner of Social Secu-

1 *rity, including periodic reviews and reporting*
2 *requirements.*

3 *(f) WORK INCENTIVES ADVISORY PANEL.—*

4 *(1) ESTABLISHMENT.—There is established with-*
5 *in the Social Security Administration a panel to be*
6 *known as the “Work Incentives Advisory Panel” (in*
7 *this subsection referred to as the “Panel”).*

8 *(2) DUTIES OF PANEL.—It shall be the duty of*
9 *the Panel to—*

10 *(A) advise the Secretary of Health and*
11 *Human Services, the Secretary of Labor, the*
12 *Secretary of Education, and the Commissioner of*
13 *Social Security on issues related to work incen-*
14 *tives programs, planning, and assistance for in-*
15 *dividuals with disabilities, including work in-*
16 *centive provisions under titles II, XI, XVI,*
17 *XVIII, and XIX of the Social Security Act (42*
18 *U.S.C. 401 et seq., 1301 et seq., 1381 et seq.,*
19 *1395 et seq., 1396 et seq.); and*

20 *(B) with respect to the Ticket to Work and*
21 *Self-Sufficiency Program established under sec-*
22 *tion 1148 of the Social Security Act—*

23 *(i) advise the Commissioner of Social*
24 *Security with respect to establishing phase-*
25 *in sites for such Program and fully imple-*

1 *menting the Program thereafter, the refine-*
2 *ment of access of disabled beneficiaries to*
3 *employment networks, payment systems,*
4 *and management information systems, and*
5 *advise the Commissioner whether such*
6 *measures are being taken to the extent nec-*
7 *essary to ensure the success of the Program;*

8 *(ii) advise the Commissioner regarding*
9 *the most effective designs for research and*
10 *demonstration projects associated with the*
11 *Program or conducted pursuant to section*
12 *302;*

13 *(iii) advise the Commissioner on the*
14 *development of performance measurements*
15 *relating to quality assurance under section*
16 *1148(d)(6) of the Social Security Act; and*

17 *(iv) furnish progress reports on the*
18 *Program to the Commissioner and each*
19 *House of Congress.*

20 *(3) MEMBERSHIP.—*

21 *(A) NUMBER AND APPOINTMENT.—The*
22 *Panel shall be composed of 12 members ap-*
23 *pointed by the Commissioner of Social Security*
24 *in consultation with the Speaker of the House of*
25 *Representatives, the Minority Leader of the*

1 *House of Representatives, the Majority Leader of*
2 *the Senate, and the Minority Leader of the Sen-*
3 *ate.*

4 (B) *REPRESENTATION.*—*All members ap-*
5 *pointed to the Panel shall have experience or ex-*
6 *pert knowledge in the fields of, or related to,*
7 *work incentive programs, employment services,*
8 *vocational rehabilitation services, health care*
9 *services, and other support services for individ-*
10 *uals with disabilities. At least 7 members of the*
11 *Panel shall be individuals with disabilities or*
12 *representatives of individuals with disabilities,*
13 *except that, of those 7 members, at least 5 mem-*
14 *bers shall be current or former title II disability*
15 *beneficiaries or title XVI disability beneficiaries*
16 *(as such terms are defined in section 1148(k) of*
17 *the Social Security Act (as added by subsection*
18 *(a)).*

19 (C) *TERMS.*—

20 (i) *IN GENERAL.*—*Each member shall*
21 *be appointed for a term of 4 years (or, if*
22 *less, for the remaining life of the Panel), ex-*
23 *cept as provided in clauses (ii) and (iii).*
24 *The initial members shall be appointed not*

1 later than 90 days after the date of enact-
2 ment of this Act.

3 (ii) *TERMS OF INITIAL APPOINTEES.*—

4 As designated by the Commissioner at the
5 time of appointment, of the members first
6 appointed—

7 (I) 6 of the members appointed
8 under subparagraph (A) shall be ap-
9 pointed for a term of 2 years; and

10 (II) 6 of the members appointed
11 under subparagraph (A) shall be ap-
12 pointed for a term of 4 years.

13 (iii) *VACANCIES.*—Any member ap-
14 pointed to fill a vacancy occurring before
15 the expiration of the term for which the
16 member's predecessor was appointed shall be
17 appointed only for the remainder of that
18 term. A member may serve after the expira-
19 tion of that member's term until a successor
20 has taken office. A vacancy in the Panel
21 shall be filled in the manner in which the
22 original appointment was made.

23 (D) *BASIC PAY.*—Members shall each be
24 paid at a rate, and in a manner, that is con-
25 sistent with guidelines established under section

1 7 of the Federal Advisory Committee Act (5
2 U.S.C. App.).

3 (E) TRAVEL EXPENSES.—Each member
4 shall receive travel expenses, including per diem
5 in lieu of subsistence, in accordance with sections
6 5702 and 5703 of title 5, United States Code.

7 (F) QUORUM.—Eight members of the Panel
8 shall constitute a quorum but a lesser number
9 may hold hearings.

10 (G) CHAIRPERSON.—The Chairperson of the
11 Panel shall be designated by the Commissioner.
12 The term of office of the Chairperson shall be 4
13 years.

14 (H) MEETINGS.—The Panel shall meet at
15 least quarterly and at other times at the call of
16 the Chairperson or a majority of its members.

17 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
18 AND CONSULTANTS.—

19 (A) DIRECTOR.—The Panel shall have a Di-
20 rector who shall be appointed by the Commis-
21 sioner and paid at a rate, and in a manner,
22 that is consistent with guidelines established
23 under section 7 of the Federal Advisory Com-
24 mittee Act (5 U.S.C. App.).

1 (B) *STAFF*.—Subject to rules prescribed by
2 the Commissioner, the Director may appoint and
3 fix the pay of additional personnel as the Direc-
4 tor considers appropriate.

5 (C) *EXPERTS AND CONSULTANTS*.—Subject
6 to rules prescribed by the Commissioner, the Di-
7 rector may procure temporary and intermittent
8 services under section 3109(b) of title 5, United
9 States Code.

10 (D) *STAFF OF FEDERAL AGENCIES*.—Upon
11 request of the Panel, the head of any Federal de-
12 partment or agency may detail, on a reimburs-
13 able basis, any of the personnel of that depart-
14 ment or agency to the Panel to assist it in car-
15 rying out its duties under this subsection.

16 (5) *POWERS OF PANEL*.—

17 (A) *HEARINGS AND SESSIONS*.—The Panel
18 may, for the purpose of carrying out its duties
19 under this subsection, hold such hearings, sit and
20 act at such times and places, and take such testi-
21 mony and evidence as the Panel considers appro-
22 priate.

23 (B) *POWERS OF MEMBERS AND AGENTS*.—
24 Any member or agent of the Panel may, if au-

1 *thorized by the Panel, take any action which the*
2 *Panel is authorized to take by this subsection.*

3 (C) *MAILS.*—*The Panel may use the United*
4 *States mails in the same manner and under the*
5 *same conditions as other departments and agen-*
6 *cies of the United States.*

7 (6) *REPORTS.*—

8 (A) *INTERIM REPORTS.*—*The Panel shall*
9 *submit to the President and Congress interim re-*
10 *ports at least annually.*

11 (B) *FINAL REPORT.*—*The Panel shall trans-*
12 *mit a final report to the President and Congress*
13 *not later than 8 years after the date of enact-*
14 *ment of this Act. The final report shall contain*
15 *a detailed statement of the findings and conclu-*
16 *sions of the Panel, together with its recommenda-*
17 *tions for legislation and administrative actions*
18 *which the Panel considers appropriate.*

19 (7) *TERMINATION.*—*The Panel shall terminate*
20 *30 days after the date of the submission of its final*
21 *report under paragraph (6)(B).*

22 (8) *ALLOCATION OF COSTS.*—*The costs of car-*
23 *rying out this subsection shall be paid from amounts*
24 *made available for the administration of title II of*
25 *the Social Security Act (42 U.S.C. 401 et seq.) and*

1 “(2) *An individual to which paragraph (1) applies*
2 *shall continue to be subject to—*

3 “(A) *continuing disability reviews on a regu-*
4 *larly scheduled basis that is not triggered by work;*
5 *and*

6 “(B) *termination of benefits under this title in*
7 *the event that the individual has earnings that exceed*
8 *the level of earnings established by the Commissioner*
9 *to represent substantial gainful activity.”.*

10 **SEC. 212. EXPEDITED REINSTATEMENT OF DISABILITY BEN-**
11 **EFITS.**

12 (a) *OASDI BENEFITS.—Section 223 of the Social Se-*
13 *curity Act (42 U.S.C. 423) is amended—*

14 (1) *by redesignating subsection (i) as subsection*
15 *(j); and*

16 (2) *by inserting after subsection (h) the fol-*
17 *lowing:*

18 “*Reinstatement of Entitlement*

19 “(i)(1)(A) *Entitlement to benefits described in sub-*
20 *paragraph (B)(i)(I) shall be reinstated in any case where*
21 *the Commissioner determines that an individual described*
22 *in subparagraph (B) has filed a request for reinstatement*
23 *meeting the requirements of paragraph (2)(A) during the*
24 *period prescribed in subparagraph (C). Reinstatement of*

1 *such entitlement shall be in accordance with the terms of*
2 *this subsection.*

3 “(B) *An individual is described in this subparagraph*
4 *if—*

5 “(i) *prior to the month in which the individual*
6 *files a request for reinstatement—*

7 “(I) *the individual was entitled to benefits*
8 *under this section or section 202 on the basis of*
9 *disability pursuant to an application filed there-*
10 *fore; and*

11 “(II) *such entitlement terminated due to the*
12 *performance of substantial gainful activity;*

13 “(ii) *the individual is under a disability and the*
14 *physical or mental impairment that is the basis for*
15 *the finding of disability is the same as (or related to)*
16 *the physical or mental impairment that was the basis*
17 *for the finding of disability that gave rise to the enti-*
18 *tlement described in clause (i); and*

19 “(iii) *the individual’s disability renders the in-*
20 *dividual unable to perform substantial gainful activ-*
21 *ity.*

22 “(C)(i) *Except as provided in clause (ii), the period*
23 *prescribed in this subparagraph with respect to an indi-*
24 *vidual is 60 consecutive months beginning with the month*
25 *following the most recent month for which the individual*

1 *was entitled to a benefit described in subparagraph*
2 *(B)(i)(I) prior to the entitlement termination described in*
3 *subparagraph (B)(i)(II).*

4 “(ii) *In the case of an individual who fails to file a*
5 *reinstatement request within the period prescribed in clause*
6 *(i), the Commissioner may extend the period if the Commis-*
7 *sioner determines that the individual had good cause for*
8 *the failure to so file.*

9 “(2)(A)(i) *A request for reinstatement shall be filed in*
10 *such form, and containing such information, as the Com-*
11 *missioner may prescribe.*

12 “(ii) *A request for reinstatement shall include express*
13 *declarations by the individual that the individual meets the*
14 *requirements specified in clauses (i) and (iii) of paragraph*
15 *(1)(B).*

16 “(B) *A request for reinstatement filed in accordance*
17 *with subparagraph (A) may constitute an application for*
18 *benefits in the case of any individual who the Commissioner*
19 *determines is not entitled to reinstated benefits under this*
20 *subsection.*

21 “(3) *In determining whether an individual meets the*
22 *requirements of paragraph (1)(B)(ii), the provisions of sub-*
23 *section (f) shall apply.*

24 “(4)(A)(i) *Subject to clause (ii), entitlement to benefits*
25 *reinstated under this subsection shall commence with the*

1 benefit payable for the month in which a request for rein-
2 statement is filed.

3 “(ii) An individual whose entitlement to a benefit for
4 any month would have been reinstated under this subsection
5 had the individual filed a request for reinstatement before
6 the end of such month shall be entitled to such benefit for
7 such month if such request for reinstatement is filed before
8 the end of the twelfth month immediately succeeding such
9 month.

10 “(B)(i) Subject to clauses (ii) and (iii), the amount
11 of the benefit payable for any month pursuant to the rein-
12 statement of entitlement under this subsection shall be deter-
13 mined in accordance with the provisions of this title.

14 “(ii) For purposes of computing the primary insur-
15 ance amount of an individual whose entitlement to benefits
16 under this section is reinstated under this subsection, the
17 date of onset of the individual’s disability shall be the date
18 of onset used in determining the individual’s most recent
19 period of disability arising in connection with such benefits
20 payable on the basis of an application.

21 “(iii) Benefits under this section or section 202 pay-
22 able for any month pursuant to a request for reinstatement
23 filed in accordance with paragraph (2) shall be reduced by
24 the amount of any provisional benefit paid to such indi-
25 vidual for such month under paragraph (7).

1 “(C) No benefit shall be payable pursuant to an enti-
2 tlement reinstated under this subsection to an individual
3 for any month in which the individual engages in substan-
4 tial gainful activity.

5 “(D) The entitlement of any individual that is rein-
6 stated under this subsection shall end with the benefits pay-
7 able for the month preceding whichever of the following
8 months is the earliest:

9 “(i) The month in which the individual dies.

10 “(ii) The month in which the individual attains
11 retirement age.

12 “(iii) The third month following the month in
13 which the individual’s disability ceases.

14 “(5) Whenever an individual’s entitlement to benefits
15 under this section is reinstated under this subsection, enti-
16 tlement to benefits payable on the basis of such individual’s
17 wages and self-employment income may be reinstated with
18 respect to any person previously entitled to such benefits
19 on the basis of an application if the Commissioner deter-
20 mines that such person satisfies all the requirements for en-
21 titlement to such benefits except requirements related to the
22 filing of an application. The provisions of paragraph (4)
23 shall apply to the reinstated entitlement of any such person
24 to the same extent that they apply to the reinstated entitle-
25 ment of such individual.

1 “(6) *An individual to whom benefits are payable under*
2 *this section or section 202 pursuant to a reinstatement of*
3 *entitlement under this subsection for 24 months (whether*
4 *or not consecutive) shall, with respect to benefits so payable*
5 *after such twenty-fourth month, be deemed for purposes of*
6 *paragraph (1)(B)(i)(I) and the determination, if appro-*
7 *priate, of the termination month in accordance with sub-*
8 *section (a)(1) of this section, or subsection (d)(1), (e)(1),*
9 *or (f)(1) of section 202, to be entitled to such benefits on*
10 *the basis of an application filed therefore.*

11 “(7)(A) *An individual described in paragraph (1)(B)*
12 *who files a request for reinstatement in accordance with the*
13 *provisions of paragraph (2)(A) shall be entitled to provi-*
14 *sional benefits payable in accordance with this paragraph,*
15 *unless the Commissioner determines that the individual*
16 *does not meet the requirements of paragraph (1)(B)(i) or*
17 *that the individual’s declaration under paragraph*
18 *(2)(A)(ii) is false. Any such determination by the Commis-*
19 *sioner shall be final and not subject to review under sub-*
20 *section (b) or (g) of section 205.*

21 “(B) *The amount of a provisional benefit for a month*
22 *shall equal the amount of the last monthly benefit payable*
23 *to the individual under this title on the basis of an applica-*
24 *tion increased by an amount equal to the amount, if any,*

1 *by which such last monthly benefit would have been in-*
2 *creased as a result of the operation of section 215(i).*

3 “(C)(i) *Provisional benefits shall begin with the month*
4 *in which a request for reinstatement is filed in accordance*
5 *with paragraph (2)(A).*

6 “(ii) *Provisional benefits shall end with the earliest*
7 *of—*

8 “(I) *the month in which the Commissioner*
9 *makes a determination regarding the individual’s en-*
10 *titlement to reinstated benefits;*

11 “(II) *the fifth month following the month de-*
12 *scribed in clause (i);*

13 “(III) *the month in which the individual per-*
14 *forms substantial gainful activity; or*

15 “(IV) *the month in which the Commissioner de-*
16 *termines that the individual does not meet the re-*
17 *quirements of paragraph (1)(B)(i) or that the indi-*
18 *vidual’s declaration made in accordance with para-*
19 *graph (2)(A)(ii) is false.*

20 “(D) *In any case in which the Commissioner deter-*
21 *mines that an individual is not entitled to reinstated bene-*
22 *fits, any provisional benefits paid to the individual under*
23 *this paragraph shall not be subject to recovery as an over-*
24 *payment unless the Commissioner determines that the indi-*

1 *vidual knew or should have known that the individual did*
 2 *not meet the requirements of paragraph (1)(B).”.*

3 *(b) SSI BENEFITS.—*

4 *(1) IN GENERAL.—Section 1631 of the Social Se-*
 5 *curity Act (42 U.S.C. 1383) is amended by adding at*
 6 *the end the following:*

7 *“Reinstatement of Eligibility on the Basis of Blindness or*
 8 *Disability*

9 *“(p)(1)(A) Eligibility for benefits under this title shall*
 10 *be reinstated in any case where the Commissioner deter-*
 11 *mines that an individual described in subparagraph (B)*
 12 *has filed a request for reinstatement meeting the require-*
 13 *ments of paragraph (2)(A) during the period prescribed in*
 14 *subparagraph (C). Reinstatement of eligibility shall be in*
 15 *accordance with the terms of this subsection.*

16 *“(B) An individual is described in this subparagraph*
 17 *if—*

18 *“(i) prior to the month in which the individual*
 19 *files a request for reinstatement—*

20 *“(I) the individual was eligible for benefits*
 21 *under this title on the basis of blindness or dis-*
 22 *ability pursuant to an application filed there-*
 23 *fore; and*

24 *“(II) the individual thereafter was ineligible*
 25 *for such benefits due to earned income (or earned*

1 *and unearned income) for a period of 12 or more*
2 *consecutive months;*

3 “(ii) *the individual is blind or disabled and the*
4 *physical or mental impairment that is the basis for*
5 *the finding of blindness or disability is the same as*
6 *(or related to) the physical or mental impairment*
7 *that was the basis for the finding of blindness or dis-*
8 *ability that gave rise to the eligibility described in*
9 *clause (i);*

10 “(iii) *the individual’s blindness or disability*
11 *renders the individual unable to perform substantial*
12 *gainful activity; and*

13 “(iv) *the individual satisfies the nonmedical re-*
14 *quirements for eligibility for benefits under this title.*

15 “(C)(i) *Except as provided in clause (ii), the period*
16 *prescribed in this subparagraph with respect to an indi-*
17 *vidual is 60 consecutive months beginning with the month*
18 *following the most recent month for which the individual*
19 *was eligible for a benefit under this title (including section*
20 *1619) prior to the period of ineligibility described in sub-*
21 *paragraph (B)(i)(II).*

22 “(ii) *In the case of an individual who fails to file a*
23 *reinstatement request within the period prescribed in clause*
24 *(i), the Commissioner may extend the period if the Commis-*

1 sioner determines that the individual had good cause for
2 the failure to so file.

3 “(2)(A)(i) A request for reinstatement shall be filed in
4 such form, and containing such information, as the Com-
5 missioner may prescribe.

6 “(ii) A request for reinstatement shall include express
7 declarations by the individual that the individual meets the
8 requirements specified in clauses (ii) through (iv) of para-
9 graph (1)(B).

10 “(B) A request for reinstatement filed in accordance
11 with subparagraph (A) may constitute an application for
12 benefits in the case of any individual who the Commissioner
13 determines is not eligible for reinstated benefits under this
14 subsection.

15 “(3) In determining whether an individual meets the
16 requirements of paragraph (1)(B)(ii), the provisions of sec-
17 tion 1614(a)(4) shall apply.

18 “(4)(A) Eligibility for benefits reinstated under this
19 subsection shall commence with the benefit payable for the
20 month following the month in which a request for reinstate-
21 ment is filed.

22 “(B)(i) Subject to clause (ii), the amount of the benefit
23 payable for any month pursuant to the reinstatement of eli-
24 gibility under this subsection shall be determined in accord-
25 ance with the provisions of this title.

1 “(ii) *The benefit under this title payable for any*
2 *month pursuant to a request for reinstatement filed in ac-*
3 *cordance with paragraph (2) shall be reduced by the*
4 *amount of any provisional benefit paid to such individual*
5 *for such month under paragraph (7).*

6 “(C) *Except as otherwise provided in this subsection,*
7 *eligibility for benefits under this title reinstated pursuant*
8 *to a request filed under paragraph (2) shall be subject to*
9 *the same terms and conditions as eligibility established pur-*
10 *suant to an application filed therefore.*

11 “(5) *Whenever an individual’s eligibility for benefits*
12 *under this title is reinstated under this subsection, eligi-*
13 *bility for such benefits shall be reinstated with respect to*
14 *the individual’s spouse if such spouse was previously an*
15 *eligible spouse of the individual under this title and the*
16 *Commissioner determines that such spouse satisfies all the*
17 *requirements for eligibility for such benefits except require-*
18 *ments related to the filing of an application. The provisions*
19 *of paragraph (4) shall apply to the reinstated eligibility*
20 *of the spouse to the same extent that they apply to the rein-*
21 *stated eligibility of such individual.*

22 “(6) *An individual to whom benefits are payable under*
23 *this title pursuant to a reinstatement of eligibility under*
24 *this subsection for twenty-four months (whether or not con-*
25 *secutive) shall, with respect to benefits so payable after such*

1 *twenty-fourth month, be deemed for purposes of paragraph*
2 *(1)(B)(i)(I) to be eligible for such benefits on the basis of*
3 *an application filed therefore.*

4 “(7)(A) *An individual described in paragraph (1)(B)*
5 *who files a request for reinstatement in accordance with the*
6 *provisions of paragraph (2)(A) shall be eligible for provi-*
7 *sional benefits payable in accordance with this paragraph,*
8 *unless the Commissioner determines that the individual*
9 *does not meet the requirements of paragraph (1)(B)(i) or*
10 *that the individual’s declaration under paragraph*
11 *(2)(A)(ii) is false. Any such determination by the Commis-*
12 *sioner shall be final and not subject to review under para-*
13 *graph (1) or (3) of subsection (c).*

14 “(B)(i) *Except as otherwise provided in clause (ii), the*
15 *amount of a provisional benefit for a month shall equal the*
16 *amount of the monthly benefit that would be payable to an*
17 *eligible individual under this title with the same kind and*
18 *amount of income.*

19 “(ii) *If the individual has a spouse who was previously*
20 *an eligible spouse of the individual under this title and the*
21 *Commissioner determines that such spouse satisfies all the*
22 *requirements of section 1614(b) except requirements related*
23 *to the filing of an application, the amount of a provisional*
24 *benefit for a month shall equal the amount of the month*
25 *benefit that would be payable to an eligible individual and*

1 *eligible spouse under this title with the same kind and*
2 *amount of income.*

3 “(C)(i) *Provisional benefits shall begin with the month*
4 *following the month in which a request for reinstatement*
5 *is filed in accordance with paragraph (2)(A).*

6 “(ii) *Provisional benefits shall end with the earliest*
7 *of—*

8 “(I) *the month in which the Commissioner*
9 *makes a determination regarding the individual’s eli-*
10 *gibility for reinstated benefits;*

11 “(II) *the fifth month following the month for*
12 *which provisional benefits are first payable under*
13 *clause (i); or*

14 “(III) *the month in which the Commissioner de-*
15 *termines that the individual does not meet the re-*
16 *quirements of paragraph (1)(B)(i) or that the indi-*
17 *vidual’s declaration made in accordance with para-*
18 *graph (2)(A)(ii) is false.*

19 “(D) *In any case in which the Commissioner deter-*
20 *mines that an individual is not eligible for reinstated bene-*
21 *fits, any provisional benefits paid to the individual under*
22 *this paragraph shall not be subject to recovery as an over-*
23 *payment unless the Commissioner determines that the indi-*
24 *vidual knew or should have known that the individual did*
25 *not meet the requirements of paragraph (1)(B).*

1 “(8) *For purposes of this subsection other than para-*
2 *graph (7), the term ‘benefits under this title’ includes State*
3 *supplementary payments made pursuant to an agreement*
4 *under section 1616(a) or section 212(b) of Public Law 93-*
5 *66.”.*

6 (2) *CONFORMING AMENDMENTS.—*

7 (A) *Section 1631(j)(1) of such Act (42*
8 *U.S.C. 1383(j)(1)) is amended by striking the pe-*
9 *riod and inserting “, or has filed a request for*
10 *reinstatement of eligibility under subsection*
11 *(p)(2) and been determined to be eligible for re-*
12 *instatement.”.*

13 (B) *Section 1631(j)(2)(A)(i)(I) of such Act*
14 *(42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by*
15 *inserting “(other than pursuant to a request for*
16 *reinstatement under subsection (p))” after “eligi-*
17 *ble”.*

18 (c) *EFFECTIVE DATE.—*

19 (1) *IN GENERAL.—The amendments made by*
20 *this section shall take effect on the first day of the*
21 *thirteenth month beginning after the date of enact-*
22 *ment of this Act.*

23 (2) *LIMITATION.—No benefit shall be payable*
24 *under title II or XVI of the Social Security Act on*
25 *the basis of a request for reinstatement filed under*

1 *section 223(i) or 1631(p) of such Act before the effec-*
 2 *tive date described in paragraph (1).*

3 ***Subtitle C—Work Incentives Plan-***
 4 ***ning, Assistance, and Outreach***

5 ***SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.***

6 *Part A of title XI of the Social Security Act (42 U.S.C.*
 7 *1301 et seq.), as amended by section 201, is amended by*
 8 *adding after section 1148 the following:*

9 *“WORK INCENTIVES OUTREACH PROGRAM*

10 *“SEC. 1149. (a) ESTABLISHMENT.—*

11 *“(1) IN GENERAL.—The Commissioner, in con-*
 12 *sultation with the Work Incentives Advisory Panel es-*
 13 *tablished under section 201(f) of the Work Incentives*
 14 *Improvement Act of 1999, shall establish a commu-*
 15 *nity-based work incentives planning and assistance*
 16 *program for the purpose of disseminating accurate in-*
 17 *formation to disabled beneficiaries on work incentives*
 18 *programs and issues related to such programs.*

19 *“(2) GRANTS, COOPERATIVE AGREEMENTS, CON-*
 20 *TRACTS, AND OUTREACH.—Under the program estab-*
 21 *lished under this section, the Commissioner shall—*

22 *“(A) establish a competitive program of*
 23 *grants, cooperative agreements, or contracts to*
 24 *provide benefits planning and assistance, includ-*
 25 *ing information on the availability of protection*
 26 *and advocacy services, to disabled beneficiaries,*

1 *including individuals participating in the Ticket*
2 *to Work and Self-Sufficiency Program estab-*
3 *lished under section 1148, the program estab-*
4 *lished under section 1619, and other programs*
5 *that are designed to encourage disabled bene-*
6 *ficiaries to work;*

7 “(B) *conduct directly, or through grants, co-*
8 *operative agreements, or contracts, ongoing out-*
9 *reach efforts to disabled beneficiaries (and to the*
10 *families of such beneficiaries) who are poten-*
11 *tially eligible to participate in Federal or State*
12 *work incentive programs that are designed to as-*
13 *sist disabled beneficiaries to work, including—*

14 “(i) *preparing and disseminating in-*
15 *formation explaining such programs; and*

16 “(ii) *working in cooperation with other*
17 *Federal, State, and private agencies and*
18 *nonprofit organizations that serve disabled*
19 *beneficiaries, and with agencies and organi-*
20 *zations that focus on vocational rehabilita-*
21 *tion and work-related training and coun-*
22 *seling;*

23 “(C) *establish a corps of trained, accessible,*
24 *and responsive work incentives specialists within*
25 *the Social Security Administration who will spe-*

1 *cialize in disability work incentives under titles*
2 *II and XVI for the purpose of disseminating ac-*
3 *curate information with respect to inquiries and*
4 *issues relating to work incentives to—*

5 *“(i) disabled beneficiaries;*

6 *“(ii) benefit applicants under titles II*
7 *and XVI; and*

8 *“(iii) individuals or entities awarded*
9 *grants under subparagraphs (A) or (B);*
10 *and*

11 *“(D) provide—*

12 *“(i) training for work incentives spe-*
13 *cialists and individuals providing planning*
14 *assistance described in subparagraph (C);*
15 *and*

16 *“(ii) technical assistance to organiza-*
17 *tions and entities that are designed to en-*
18 *courage disabled beneficiaries to return to*
19 *work.*

20 *“(3) COORDINATION WITH OTHER PROGRAMS.—*

21 *The responsibilities of the Commissioner established*
22 *under this section shall be coordinated with other*
23 *public and private programs that provide informa-*
24 *tion and assistance regarding rehabilitation services*
25 *and independent living supports and benefits plan-*

1 *ning for disabled beneficiaries including the program*
2 *under section 1619, the plans for achieving self-sup-*
3 *port program (PASS), and any other Federal or*
4 *State work incentives programs that are designed to*
5 *assist disabled beneficiaries, including educational*
6 *agencies that provide information and assistance re-*
7 *garding rehabilitation, school-to-work programs, tran-*
8 *sition services (as defined in, and provided in accord-*
9 *ance with, the Individuals with Disabilities Edu-*
10 *cation Act (20 U.S.C. 1400 et seq.)), a one-stop deliv-*
11 *ery system established under subtitle B of title I of the*
12 *Workforce Investment Act of 1998, and other services.*

13 “(b) *CONDITIONS.—*

14 “(1) *SELECTION OF ENTITIES.—*

15 “(A) *APPLICATION.—An entity shall submit*
16 *an application for a grant, cooperative agree-*
17 *ment, or contract to provide benefits planning*
18 *and assistance to the Commissioner at such time,*
19 *in such manner, and containing such informa-*
20 *tion as the Commissioner may determine is nec-*
21 *essary to meet the requirements of this section.*

22 “(B) *STATEWIDENESS.—The Commissioner*
23 *shall ensure that the planning, assistance, and*
24 *information described in paragraph (2) shall be*
25 *available on a statewide basis.*

1 “(C) *ELIGIBILITY OF STATES AND PRIVATE*
2 *ORGANIZATIONS.—*

3 “(i) *IN GENERAL.—The Commissioner*
4 *may award a grant, cooperative agreement,*
5 *or contract under this section to a State or*
6 *a private agency or organization (other*
7 *than Social Security Administration Field*
8 *Offices and the State agency administering*
9 *the State medicaid program under title*
10 *XIX, including any agency or entity de-*
11 *scribed in clause (ii), that the Commissioner*
12 *determines is qualified to provide the plan-*
13 *ning, assistance, and information described*
14 *in paragraph (2)).*

15 “(ii) *AGENCIES AND ENTITIES DE-*
16 *SCRIBED.—The agencies and entities de-*
17 *scribed in this clause are the following:*

18 “(I) *Any public or private agency*
19 *or organization (including Centers for*
20 *Independent Living established under*
21 *title VII of the Rehabilitation Act of*
22 *1973, protection and advocacy organi-*
23 *zations, client assistance programs es-*
24 *tablished in accordance with section*
25 *112 of the Rehabilitation Act of 1973,*

1 *and State Developmental Disabilities*
2 *Councils established in accordance*
3 *with section 124 of the Developmental*
4 *Disabilities Assistance and Bill of*
5 *Rights Act (42 U.S.C. 6024)) that the*
6 *Commissioner determines satisfies the*
7 *requirements of this section.*

8 “(II) *The State agency admin-*
9 *istering the State program funded*
10 *under part A of title IV.*

11 “(D) *EXCLUSION FOR CONFLICT OF INTER-*
12 *EST.—The Commissioner may not award a*
13 *grant, cooperative agreement, or contract under*
14 *this section to any entity that the Commissioner*
15 *determines would have a conflict of interest if the*
16 *entity were to receive a grant, cooperative agree-*
17 *ment, or contract under this section.*

18 “(2) *SERVICES PROVIDED.—A recipient of a*
19 *grant, cooperative agreement, or contract to provide*
20 *benefits planning and assistance shall select individ-*
21 *uals who will act as planners and provide informa-*
22 *tion, guidance, and planning to disabled beneficiaries*
23 *on the—*

24 “(A) *availability and interrelation of any*
25 *Federal or State work incentives programs de-*

1 *signed to assist disabled beneficiaries that the in-*
2 *dividual may be eligible to participate in;*

3 “(B) *adequacy of any health benefits cov-*
4 *erage that may be offered by an employer of the*
5 *individual and the extent to which other health*
6 *benefits coverage may be available to the indi-*
7 *vidual; and*

8 “(C) *availability of protection and advocacy*
9 *services for disabled beneficiaries and how to ac-*
10 *cess such services.*

11 “(3) *AMOUNT OF GRANTS, COOPERATIVE AGREE-*
12 *MENTS, OR CONTRACTS.—*

13 “(A) *BASED ON POPULATION OF DISABLED*
14 *BENEFICIARIES.—Subject to subparagraph (B),*
15 *the Commissioner shall award a grant, coopera-*
16 *tive agreement, or contract under this section to*
17 *an entity based on the percentage of the popu-*
18 *lation of the State where the entity is located*
19 *who are disabled beneficiaries.*

20 “(B) *LIMITATIONS.—*

21 “(i) *PER GRANT.—No entity shall re-*
22 *ceive a grant, cooperative agreement, or*
23 *contract under this section for a fiscal year*
24 *that is less than \$50,000 or more than*
25 *\$300,000.*

1 “(ii) *TOTAL AMOUNT FOR ALL GRANTS,*
 2 *COOPERATIVE AGREEMENTS, AND CON-*
 3 *TRACTS.—The total amount of all grants,*
 4 *cooperative agreements, and contracts*
 5 *awarded under this section for a fiscal year*
 6 *may not exceed \$23,000,000.*

7 “(4) *ALLOCATION OF COSTS.—The costs of car-*
 8 *rying out this section shall be paid from amounts*
 9 *made available for the administration of title II and*
 10 *amounts made available for the administration of*
 11 *title XVI, and shall be allocated among those amounts*
 12 *as appropriate.*

13 “(c) *DEFINITIONS.—In this section:*

14 “(1) *COMMISSIONER.—The term ‘Commissioner’*
 15 *means the Commissioner of Social Security.*

16 “(2) *DISABLED BENEFICIARY.—The term ‘dis-*
 17 *abled beneficiary’ has the meaning given that term in*
 18 *section 1148(k)(2).”.*

19 **SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSIST-**
 20 **ANCE TO DISABLED BENEFICIARIES.**

21 *Part A of title XI of the Social Security Act (42 U.S.C.*
 22 *1301 et seq.), as amended by section 221, is amended by*
 23 *adding after section 1149 the following:*

1 *under this section, a protection and advocacy system*
2 *shall not be paid an amount that is less than—*

3 *“(A) in the case of a protection and advoca-*
4 *cacy system located in a State (including the*
5 *District of Columbia and Puerto Rico) other*
6 *than Guam, American Samoa, the United States*
7 *Virgin Islands, and the Commonwealth of the*
8 *Northern Mariana Islands, the greater of—*

9 *“(i) \$100,000; or*

10 *“(ii) $\frac{1}{3}$ of 1 percent of the amount*
11 *available for payments under this section;*
12 *and*

13 *“(B) in the case of a protection and advoca-*
14 *cacy system located in Guam, American Samoa,*
15 *the United States Virgin Islands, and the Com-*
16 *monwealth of the Northern Mariana Islands,*
17 *\$50,000.*

18 *“(2) INFLATION ADJUSTMENT.—For each fiscal*
19 *year in which the total amount appropriated to carry*
20 *out this section exceeds the total amount appropriated*
21 *to carry out this section in the preceding fiscal year,*
22 *the Commissioner shall increase each minimum pay-*
23 *ment under subparagraphs (A) and (B) of paragraph*
24 *(1) by a percentage equal to the percentage increase*
25 *in the total amount appropriated to carry out this*

1 *section between the preceding fiscal year and the fis-*
2 *cal year involved.*

3 “(e) *ANNUAL REPORT.*—*Each protection and advocacy*
4 *system that receives a payment under this section shall sub-*
5 *mit an annual report to the Commissioner and the Work*
6 *Incentives Advisory Panel established under section 201(f)*
7 *of the Work Incentives Improvement Act of 1999 on the serv-*
8 *ices provided to individuals by the system.*

9 “(f) *FUNDING.*—

10 “(1) *ALLOCATION OF PAYMENTS.*—

11 “(A) *IN GENERAL.*—*Subject to subpara-*
12 *graph (B), payments under this section shall be*
13 *made from amounts made available for the ad-*
14 *ministration of title II and amounts made avail-*
15 *able for the administration of title XVI, and*
16 *shall be allocated among those amounts as ap-*
17 *propriate.*

18 “(B) *LIMITATION.*—*Payments under this*
19 *section shall not exceed \$7,000,000 for fiscal year*
20 *2000, and such sums as may be necessary for*
21 *any fiscal year thereafter.*

22 “(2) *CARRYOVER.*—*Any amounts allotted for*
23 *payment to a protection and advocacy system under*
24 *this section for a fiscal year shall remain available*
25 *for payment to or on behalf of the protection and ad-*

1 *vocacy system until the end of the succeeding fiscal*
 2 *year.*

3 “(g) *DEFINITIONS.—In this section:*

4 “(1) *COMMISSIONER.—The term ‘Commissioner’*
 5 *means the Commissioner of Social Security.*

6 “(2) *DISABLED BENEFICIARY.—The term ‘dis-*
 7 *abled beneficiary’ has the meaning given that term in*
 8 *section 1148(k)(2).*

9 “(3) *PROTECTION AND ADVOCACY SYSTEM.—The*
 10 *term ‘protection and advocacy system’ means a pro-*
 11 *tection and advocacy system established pursuant to*
 12 *part C of title I of the Developmental Disabilities As-*
 13 *sistance and Bill of Rights Act (42 U.S.C. 6041 et*
 14 *seq.).”.*

15 **TITLE III—DEMONSTRATION**
 16 **PROJECTS AND STUDIES**

17 **SEC. 301. PERMANENT EXTENSION OF DISABILITY INSUR-**
 18 **ANCE PROGRAM DEMONSTRATION PROJECT**
 19 **AUTHORITY.**

20 “(a) *PERMANENT EXTENSION OF AUTHORITY.—Title II*
 21 *of the Social Security Act (42 U.S.C. 401 et seq.) is amend-*
 22 *ed by adding at the end the following:*

23 “*DEMONSTRATION PROJECT AUTHORITY*

24 “*SEC. 234. (a) AUTHORITY.—*

25 “(1) *IN GENERAL.—The Commissioner of Social*
 26 *Security (in this section referred to as the ‘Commis-*

1 sioner’) shall develop and carry out experiments and
2 demonstration projects designed to determine the rel-
3 ative advantages and disadvantages of—

4 “(A) various alternative methods of treating
5 the work activity of individuals entitled to dis-
6 ability insurance benefits under section 223 or to
7 monthly insurance benefits under section 202
8 based on such individual’s disability (as defined
9 in section 223(d)), including such methods as a
10 reduction in benefits based on earnings, designed
11 to encourage the return to work of such individ-
12 uals;

13 “(B) altering other limitations and condi-
14 tions applicable to such individuals (including
15 lengthening the trial work period (as defined in
16 section 222(c)), altering the 24-month waiting
17 period for hospital insurance benefits under sec-
18 tion 226, altering the manner in which the pro-
19 gram under this title is administered, earlier re-
20 ferral of such individuals for rehabilitation, and
21 greater use of employers and others to develop,
22 perform, and otherwise stimulate new forms of
23 rehabilitation); and

24 “(C) implementing sliding scale benefit off-
25 sets using variations in—

1 “(i) the amount of the offset as a pro-
2 portion of earned income;

3 “(ii) the duration of the offset period;
4 and

5 “(iii) the method of determining the
6 amount of income earned by such individ-
7 uals,

8 to the end that savings will accrue to the Trust
9 Funds, or to otherwise promote the objectives or facili-
10 tate the administration of this title.

11 “(2) *AUTHORITY FOR EXPANSION OF SCOPE.*—

12 *The Commissioner may expand the scope of any such*
13 *experiment or demonstration project to include any*
14 *group of applicants for benefits under the program es-*
15 *tablished under this title with impairments that rea-*
16 *sonably may be presumed to be disabling for purposes*
17 *of such demonstration project, and may limit any*
18 *such demonstration project to any such group of ap-*
19 *plicants, subject to the terms of such demonstration*
20 *project which shall define the extent of any such pre-*
21 *sumption.*

22 “(b) *REQUIREMENTS.*—*The experiments and dem-*
23 *onstration projects developed under subsection (a) shall be*
24 *of sufficient scope and shall be carried out on a wide enough*
25 *scale to permit a thorough evaluation of the alternative*

1 *methods under consideration while giving assurance that*
2 *the results derived from the experiments and projects will*
3 *obtain generally in the operation of the disability insurance*
4 *program under this title without committing such program*
5 *to the adoption of any particular system either locally or*
6 *nationally.*

7 “(c) *AUTHORITY TO WAIVE COMPLIANCE WITH BENE-*
8 *FITS REQUIREMENTS.*—*In the case of any experiment or*
9 *demonstration project conducted under subsection (a), the*
10 *Commissioner may waive compliance with the benefit re-*
11 *quirements of this title, and the Secretary may (upon the*
12 *request of the Commissioner) waive compliance with the*
13 *benefits requirements of title XVIII, insofar as is necessary*
14 *for a thorough evaluation of the alternative methods under*
15 *consideration. No such experiment or project shall be actu-*
16 *ally placed in operation unless at least 90 days prior there-*
17 *to a written report, prepared for purposes of notification*
18 *and information only and containing a full and complete*
19 *description thereof, has been transmitted by the Commis-*
20 *sioner to the Committee on Ways and Means of the House*
21 *of Representatives and to the Committee on Finance of the*
22 *Senate. Periodic reports on the progress of such experiments*
23 *and demonstration projects shall be submitted by the Com-*
24 *missioner to such committees. When appropriate, such re-*
25 *ports shall include detailed recommendations for changes in*

1 *administration or law, or both, to carry out the objectives*
 2 *stated in subsection (a).*

3 “(d) *REPORTS.*—

4 “(1) *INTERIM REPORTS.*—*On or before June 9 of*
 5 *each year, the Commissioner shall submit to the Com-*
 6 *mittee on Ways and Means of the House of Represent-*
 7 *atives and to the Committee on Finance of the Senate*
 8 *an interim report on the progress of the experiments*
 9 *and demonstration projects carried out under this*
 10 *subsection together with any related data and mate-*
 11 *rials that the Commissioner may consider appro-*
 12 *priate.*

13 “(2) *FINAL REPORTS.*—*Not later than 90 days*
 14 *after the termination of any experiment or dem-*
 15 *onstration project carried out under this section, the*
 16 *Commissioner shall submit to the Committee on Ways*
 17 *and Means of the House of Representatives and to the*
 18 *Committee on Finance of the Senate a final report*
 19 *with respect to that experiment and demonstration*
 20 *project.”.*

21 (b) *CONFORMING AMENDMENTS; TRANSFER OF PRIOR*
 22 *AUTHORITY.*—

23 (1) *CONFORMING AMENDMENTS.*—

24 (A) *REPEAL OF PRIOR AUTHORITY.*—*Para-*
 25 *graphs (1) through (4) of subsection (a) and sub-*

1 *section (c) of section 505 of the Social Security*
2 *Disability Amendments of 1980 (42 U.S.C. 1310*
3 *note) are repealed.*

4 (B) *CONFORMING AMENDMENT REGARDING*
5 *FUNDING.—Section 201(k) of the Social Security*
6 *Act (42 U.S.C. 401(k)) is amended by striking*
7 *“section 505(a) of the Social Security Disability*
8 *Amendments of 1980” and inserting “section*
9 *234”.*

10 (2) *TRANSFER OF PRIOR AUTHORITY.—With re-*
11 *spect to any experiment or demonstration project*
12 *being conducted under section 505(a) of the Social Se-*
13 *curity Disability Amendments of 1980 (42 U.S.C.*
14 *1310 note) as of the date of enactment of this Act, the*
15 *authority to conduct such experiment or demonstra-*
16 *tion project (including the terms and conditions ap-*
17 *plicable to the experiment or demonstration project)*
18 *shall be treated as if that authority (and such terms*
19 *and conditions) had been established under section*
20 *234 of the Social Security Act, as added by subsection*
21 *(a).*

1 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
2 **DUCTIONS IN DISABILITY INSURANCE BENE-**
3 **FITS BASED ON EARNINGS.**

4 (a) *AUTHORITY.*—*The Commissioner of Social Secu-*
5 *rity shall conduct demonstration projects for the purpose*
6 *of evaluating, through the collection of data, a program for*
7 *title II disability beneficiaries (as defined in section*
8 *1148(k)(3) of the Social Security Act) under which each*
9 *\$1 of benefits payable under section 223, or under section*
10 *202 based on the beneficiary's disability, is reduced for each*
11 *\$2 of such beneficiary's earnings that is above a level to*
12 *be determined by the Commissioner. Such projects shall be*
13 *conducted at a number of localities which the Commissioner*
14 *shall determine is sufficient to adequately evaluate the ap-*
15 *propriateness of national implementation of such a pro-*
16 *gram. Such projects shall identify reductions in Federal ex-*
17 *penditures that may result from the permanent implemen-*
18 *tation of such a program.*

19 (b) *SCOPE AND SCALE AND MATTERS TO BE DETER-*
20 *MINED.*—

21 (1) *IN GENERAL.*—*The demonstration projects*
22 *developed under subsection (a) shall be of sufficient*
23 *duration, shall be of sufficient scope, and shall be car-*
24 *ried out on a wide enough scale to permit a thorough*
25 *evaluation of the project to determine—*

1 (A) the effects, if any, of induced entry into
2 the project and reduced exit from the project;

3 (B) the extent, if any, to which the project
4 being tested is affected by whether it is in oper-
5 ation in a locality within an area under the ad-
6 ministration of the Ticket to Work and Self-Suf-
7 ficiency Program established under section 1148
8 of the Social Security Act; and

9 (C) the savings that accrue to the Federal
10 Old-Age and Survivors Insurance Trust Fund,
11 the Federal Disability Insurance Trust Fund,
12 and other Federal programs under the project
13 being tested.

14 The Commissioner shall take into account advice pro-
15 vided by the Work Incentives Advisory Panel pursu-
16 ant to section 201(f)(2)(B)(ii).

17 (2) *ADDITIONAL MATTERS.*—The Commissioner
18 shall also determine with respect to each project—

19 (A) the annual cost (including net cost) of
20 the project and the annual cost (including net
21 cost) that would have been incurred in the ab-
22 sence of the project;

23 (B) the determinants of return to work, in-
24 cluding the characteristics of the beneficiaries
25 who participate in the project; and

1 (C) *the employment outcomes, including*
2 *wages, occupations, benefits, and hours worked,*
3 *of beneficiaries who return to work as a result of*
4 *participation in the project.*

5 *The Commissioner may include within the matters*
6 *evaluated under the project the merits of trial work*
7 *periods and periods of extended eligibility.*

8 (c) *WAIVERS.—The Commissioner may waive compli-*
9 *ance with the benefit provisions of title II of the Social Se-*
10 *curity Act, and the Secretary of Health and Human Serv-*
11 *ices may waive compliance with the benefit requirements*
12 *of title XVIII of that Act, insofar as is necessary for a thor-*
13 *ough evaluation of the alternative methods under consider-*
14 *ation. No such project shall be actually placed in operation*
15 *unless at least 90 days prior thereto a written report, pre-*
16 *pared for purposes of notification and information only*
17 *and containing a full and complete description thereof, has*
18 *been transmitted by the Commissioner to the Committee on*
19 *Ways and Means of the House of Representatives and to*
20 *the Committee on Finance of the Senate. Periodic reports*
21 *on the progress of such projects shall be submitted by the*
22 *Commissioner to such committees. When appropriate, such*
23 *reports shall include detailed recommendations for changes*
24 *in administration or law, or both, to carry out the objectives*
25 *stated in subsection (a).*

1 (d) *INTERIM REPORTS.*—Not later than 2 years after
2 the date of enactment of this Act, and annually thereafter,
3 the Commissioner of Social Security shall submit to Con-
4 gress an interim report on the progress of the demonstration
5 projects carried out under this subsection together with any
6 related data and materials that the Commissioner of Social
7 Security may consider appropriate.

8 (e) *FINAL REPORT.*—The Commissioner of Social Se-
9 curity shall submit to Congress a final report with respect
10 to all demonstration projects carried out under this section
11 not later than 1 year after their completion.

12 (f) *EXPENDITURES.*—Expenditures made for dem-
13 onstration projects under this section shall be made from
14 the Federal Disability Insurance Trust Fund and the Fed-
15 eral Old-Age and Survivors Insurance Trust Fund, as de-
16 termined appropriate by the Commissioner of Social Secu-
17 rity, and from the Federal Hospital Insurance Trust Fund
18 and the Federal Supplementary Medical Insurance Trust
19 Fund, as determined appropriate by the Secretary of
20 Health and Human Services, to the extent provided in ad-
21 vance in appropriation Acts.

22 **SEC. 303. STUDIES AND REPORTS.**

23 (a) *STUDY BY GENERAL ACCOUNTING OFFICE OF EX-*
24 *ISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.*—

1 (1) *STUDY.*—As soon as practicable after the
2 date of enactment of this Act, the Comptroller General
3 of the United States shall undertake a study to assess
4 existing tax credits and other disability-related em-
5 ployment incentives under the Americans with Dis-
6 abilities Act of 1990 and other Federal laws. In such
7 study, the Comptroller General shall specifically ad-
8 dress the extent to which such credits and other incen-
9 tives would encourage employers to hire and retain
10 individuals with disabilities.

11 (2) *REPORT.*—Not later than 3 years after the
12 date of enactment of this Act, the Comptroller General
13 shall transmit to the Committee on Ways and Means
14 of the House of Representatives and the Committee on
15 Finance of the Senate a written report presenting the
16 results of the Comptroller General’s study conducted
17 pursuant to this subsection, together with such rec-
18 ommendations for legislative or administrative
19 changes as the Comptroller General determines are
20 appropriate.

21 (b) *STUDY BY GENERAL ACCOUNTING OFFICE OF EX-*
22 *ISTING COORDINATION OF THE DI AND SSI PROGRAMS AS*
23 *THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING*
24 *CONCURRENT ENTITLEMENT.*—

1 (1) *STUDY.*—As soon as practicable after the
2 date of enactment of this Act, the Comptroller General
3 of the United States shall undertake a study to evalu-
4 ate the coordination under current law of the dis-
5 ability insurance program under title II of the Social
6 Security Act and the supplemental security income
7 program under title XVI of that Act, as such pro-
8 grams relate to individuals entering or leaving con-
9 current entitlement under such programs. In such
10 study, the Comptroller General shall specifically ad-
11 dress the effectiveness of work incentives under such
12 programs with respect to such individuals and the ef-
13 fectiveness of coverage of such individuals under titles
14 XVIII and XIX of the Social Security Act.

15 (2) *REPORT.*—Not later than 3 years after the
16 date of enactment of this Act, the Comptroller General
17 shall transmit to the Committee on Ways and Means
18 of the House of Representatives and the Committee on
19 Finance of the Senate a written report presenting the
20 results of the Comptroller General’s study conducted
21 pursuant to this subsection, together with such rec-
22 ommendations for legislative or administrative
23 changes as the Comptroller General determines are
24 appropriate.

1 (c) *STUDY BY GENERAL ACCOUNTING OFFICE OF THE*
2 *IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON*
3 *RETURN TO WORK.—*

4 (1) *STUDY.—As soon as practicable after the*
5 *date of enactment of this Act, the Comptroller General*
6 *of the United States shall undertake a study of the*
7 *substantial gainful activity level applicable as of that*
8 *date to recipients of benefits under section 223 of the*
9 *Social Security Act (42 U.S.C. 423) and under sec-*
10 *tion 202 of that Act (42 U.S.C. 402) on the basis of*
11 *a recipient having a disability, and the effect of such*
12 *level as a disincentive for those recipients to return*
13 *to work. In the study, the Comptroller General also*
14 *shall address the merits of increasing the substantial*
15 *gainful activity level applicable to such recipients of*
16 *benefits and the rationale for not yearly indexing that*
17 *level to inflation.*

18 (2) *REPORT.—Not later than 2 years after the*
19 *date of enactment of this Act, the Comptroller General*
20 *shall transmit to the Committee on Ways and Means*
21 *of the House of Representatives and the Committee on*
22 *Finance of the Senate a written report presenting the*
23 *results of the Comptroller General's study conducted*
24 *pursuant to this subsection, together with such rec-*
25 *ommendations for legislative or administrative*

1 *changes as the Comptroller General determines are*
2 *appropriate.*

3 *(d) REPORT ON DISREGARDS UNDER THE DI AND SSI*
4 *PROGRAMS.—Not later than 90 days after the date of enact-*
5 *ment of this Act, the Commissioner of Social Security shall*
6 *submit to the Committee on Ways and Means of the House*
7 *of Representatives and the Committee on Finance of the*
8 *Senate a report that—*

9 *(1) identifies all income, assets, and resource dis-*
10 *regards (imposed under statutory or regulatory au-*
11 *thority) that are applicable to individuals receiving*
12 *benefits under title II or XVI of the Social Security*
13 *Act (42 U.S.C. 401 et seq., 1381 et seq.);*

14 *(2) with respect to each such disregard—*

15 *(A) specifies the most recent statutory or*
16 *regulatory modification of the disregard; and*

17 *(B) recommends whether further statutory*
18 *or regulatory modification of the disregard*
19 *would be appropriate; and*

20 *(3) with respect to the disregard described in sec-*
21 *tion 1612(b)(7) of the Social Security Act (42 U.S.C.*
22 *1382a(b)(7)) (relating to grants, scholarships, or fel-*
23 *lowships received for use in paying the cost of tuition*
24 *and fees at any educational (including technical or*
25 *vocational education) institution)—*

1 (A) identifies the number of individuals re-
 2 ceiving benefits under title XVI of such Act (42
 3 U.S.C. 1381 et seq.) who have attained age 22
 4 and have not had any portion of any grant,
 5 scholarship, or fellowship received for use in pay-
 6 ing the cost of tuition and fees at any edu-
 7 cational (including technical or vocational edu-
 8 cation) institution excluded from their income in
 9 accordance with that section;

10 (B) recommends whether the age at which
 11 such grants, scholarships, or fellowships are ex-
 12 cluded from income for purposes of determining
 13 eligibility under title XVI of the Social Security
 14 Act should be increased to age 25; and

15 (C) recommends whether such disregard
 16 should be expanded to include any such grant,
 17 scholarship, or fellowship received for use in pay-
 18 ing the cost of room and board at any such insti-
 19 tution.

20 **TITLE IV—MISCELLANEOUS AND**
 21 **TECHNICAL AMENDMENTS**

22 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
 23 **ADDICTS AND ALCOHOLICS.**

24 (a) *CLARIFICATION RELATING TO THE EFFECTIVE*
 25 *DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY*

1 *BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.*—Section
2 *105(a)(5) of the Contract with America Advancement Act*
3 *of 1996 (Public Law 104–121; 110 Stat. 853) is amended—*

4 (1) *in subparagraph (A), by striking “by the*
5 *Commissioner of Social Security” and “by the Com-*
6 *missioner”;* and

7 (2) *by adding at the end the following:*

8 “(D) *For purposes of this paragraph, an in-*
9 *dividual’s claim, with respect to benefits under*
10 *title II of the Social Security Act based on dis-*
11 *ability, which has been denied in whole before*
12 *the date of enactment of this Act, may not be*
13 *considered to be finally adjudicated before such*
14 *date if, on or after such date—*

15 “(i) *there is pending a request for ei-*
16 *ther administrative or judicial review with*
17 *respect to such claim, or*

18 “(ii) *there is pending, with respect to*
19 *such claim, a readjudication by the Com-*
20 *missioner of Social Security pursuant to re-*
21 *lief in a class action or implementation by*
22 *the Commissioner of a court remand order.*

23 “(E) *Notwithstanding the provisions of this*
24 *paragraph, with respect to any individual for*
25 *whom the Commissioner of Social Security does*

1 *not perform the entitlement redetermination be-*
 2 *fore the date prescribed in subparagraph (C), the*
 3 *Commissioner shall perform such entitlement re-*
 4 *determination in lieu of a continuing disability*
 5 *review whenever the Commissioner determines*
 6 *that the individual's entitlement is subject to re-*
 7 *determination based on the preceding provisions*
 8 *of this paragraph, and the provisions of section*
 9 *223(f) of the Social Security Act shall not apply*
 10 *to such redetermination.”.*

11 ***(b) CORRECTION TO EFFECTIVE DATE OF PROVISIONS***
 12 ***CONCERNING REPRESENTATIVE PAYEES AND TREATMENT***
 13 ***REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO***
 14 ***ARE DRUG ADDICTS AND ALCOHOLICS.—Section***
 15 ***105(a)(5)(B) of the Contract with America Advancement***
 16 ***Act of 1996 (42 U.S.C. 405 note) is amended to read as***
 17 ***follows:***

18 ***“(B) The amendments made by paragraphs***
 19 ***(2) and (3) shall take effect on July 1, 1996,***
 20 ***with respect to any individual—***

21 ***“(i) whose claim for benefits is finally***
 22 ***adjudicated on or after the date of enact-***
 23 ***ment of this Act; or***

1 “(ii) whose entitlement to benefits is
2 based on an entitlement redetermination
3 made pursuant to subparagraph (C).”.

4 (c) *EFFECTIVE DATES.*—The amendments made by
5 this section shall take effect as if included in the enactment
6 of section 105 of the Contract with America Advancement
7 Act of 1996 (Public Law 104–121; 110 Stat. 852 et seq.).

8 **SEC. 402. TREATMENT OF PRISONERS.**

9 (a) *IMPLEMENTATION OF PROHIBITION AGAINST PAY-*
10 *MENT OF TITLE II BENEFITS TO PRISONERS.*—

11 (1) *IN GENERAL.*—Section 202(x)(3) of the So-
12 cial Security Act (42 U.S.C. 402(x)(3)) is amended—

13 (A) by inserting “(A)” after “(3)”; and

14 (B) by adding at the end the following:

15 “(B)(i) The Commissioner shall enter into an agree-
16 ment under this subparagraph with any interested State
17 or local institution comprising a jail, prison, penal institu-
18 tion, or correctional facility, or comprising any other insti-
19 tution a purpose of which is to confine individuals as de-
20 scribed in paragraph (1)(A)(ii). Under such agreement—

21 “(I) the institution shall provide to the Commis-
22 sioner, on a monthly basis and in a manner specified
23 by the Commissioner, the names, Social Security ac-
24 count numbers, dates of birth, confinement commence-
25 ment dates, and, to the extent available to the institu-

1 *tion, such other identifying information concerning*
2 *the individuals confined in the institution as the*
3 *Commissioner may require for the purpose of car-*
4 *rying out paragraph (1); and*

5 *“(II) the Commissioner shall pay to the institu-*
6 *tion, with respect to information described in sub-*
7 *clause (I) concerning each individual who is confined*
8 *therein as described in paragraph (1)(A), who receives*
9 *a benefit under this title for the month preceding the*
10 *first month of such confinement, and whose benefit*
11 *under this title is determined by the Commissioner to*
12 *be not payable by reason of confinement based on the*
13 *information provided by the institution, \$400 (subject*
14 *to reduction under clause (ii)) if the institution fur-*
15 *nishes the information to the Commissioner within 30*
16 *days after the date such individual’s confinement in*
17 *such institution begins, or \$200 (subject to reduction*
18 *under clause (ii)) if the institution furnishes the in-*
19 *formation after 30 days after such date but within 90*
20 *days after such date.*

21 *“(ii) The dollar amounts specified in clause (i)(II)*
22 *shall be reduced by 50 percent if the Commissioner is also*
23 *required to make a payment to the institution with respect*
24 *to the same individual under an agreement entered into*
25 *under section 1611(e)(1)(I).*

1 “(iii) *There is authorized to be transferred from the*
 2 *Federal Old-Age and Survivors Insurance Trust Fund and*
 3 *the Federal Disability Insurance Trust Fund, as appro-*
 4 *prate, such sums as may be necessary to enable the Com-*
 5 *missioner to make payments to institutions required by*
 6 *clause (i)(II).*

7 “(iv) *The Commissioner is authorized to provide, on*
 8 *a reimbursable basis, information obtained pursuant to*
 9 *agreements entered into under clause (i) to any agency ad-*
 10 *ministering a Federal or federally assisted cash, food, or*
 11 *medical assistance program for eligibility purposes.”.*

12 (2) *CONFORMING AMENDMENT TO THE PRIVACY*
 13 *ACT.—Section 552a(a)(8)(B) of title 5, United States*
 14 *Code, is amended—*

15 (A) *in clause (vi), by striking “or” at the*
 16 *end;*

17 (B) *in clause (vii), by adding “or” at the*
 18 *end; and*

19 (C) *by adding at the end the following:*

20 “(viii) *matches performed pursuant to*
 21 *section 202(x)(3)(B) or 1611(e)(1)(I) of the*
 22 *Social Security Act (42 U.S.C.*
 23 *402(x)(3)(B), 1382(e)(1)(I));”.*

24 (3) *EFFECTIVE DATE.—The amendments made*
 25 *by this subsection shall apply to individuals whose*

1 *period of confinement in an institution commences on*
 2 *or after the first day of the fourth month beginning*
 3 *after the month in which this Act is enacted.*

4 *(b) ELIMINATION OF TITLE II REQUIREMENT THAT*
 5 *CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-*
 6 *PRISONMENT FOR MORE THAN 1 YEAR.—*

7 *(1) IN GENERAL.—Section 202(x)(1)(A) of the*
 8 *Social Security Act (42 U.S.C. 402(x)(1)(A)) is*
 9 *amended—*

10 *(A) in the matter preceding clause (i), by*
 11 *striking “during” and inserting “throughout”;*

12 *(B) in clause (i), by striking “an offense*
 13 *punishable by imprisonment for more than 1*
 14 *year (regardless of the actual sentence imposed)”*
 15 *and inserting “a criminal offense”; and*

16 *(C) in clause (ii)(I), by striking “an offense*
 17 *punishable by imprisonment for more than 1*
 18 *year” and inserting “a criminal offense”.*

19 *(2) EFFECTIVE DATE.—The amendments made*
 20 *by this subsection shall apply to individuals whose*
 21 *period of confinement in an institution commences on*
 22 *or after the first day of the fourth month beginning*
 23 *after the month in which this Act is enacted.*

24 *(c) CONFORMING TITLE XVI AMENDMENTS.—*

1 (1) *FIFTY PERCENT REDUCTION IN TITLE XVI*
 2 *PAYMENT IN CASE INVOLVING COMPARABLE TITLE II*
 3 *PAYMENT.*—Section 1611(e)(1)(I) of the Social Secu-
 4 *rity Act (42 U.S.C. 1382(e)(1)(I)) is amended—*

5 (A) *in clause (i)(II), by inserting “(subject*
 6 *to reduction under clause (ii))” after “\$400” and*
 7 *after “\$200”;*

8 (B) *by redesignating clauses (ii) and (iii)*
 9 *as clauses (iii) and (iv), respectively; and*

10 (C) *by inserting after clause (i) the fol-*
 11 *lowing:*

12 “*(ii) The dollar amounts specified in clause (i)(II)*
 13 *shall be reduced by 50 percent if the Commissioner is also*
 14 *required to make a payment to the institution with respect*
 15 *to the same individual under an agreement entered into*
 16 *under section 202(x)(3)(B).”*

17 (2) *EXPANSION OF CATEGORIES OF INSTITU-*
 18 *TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH*
 19 *THE COMMISSIONER.*—Section 1611(e)(1)(I)(i) of the
 20 *Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)) is*
 21 *amended in the matter preceding subclause (I) by*
 22 *striking “institution” and all that follows through*
 23 *“section 202(x)(1)(A),” and inserting “institution*
 24 *comprising a jail, prison, penal institution, or correc-*
 25 *tional facility, or with any other interested State or*

1 *local institution a purpose of which is to confine in-*
 2 *dividuals as described in section 202(x)(1)(A)(ii),”.*

3 (3) *ELIMINATION OF OVERLY BROAD EXEMP-*
 4 *TION.—Section 1611(e)(1)(I)(iii) of such Act (42*
 5 *U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by para-*
 6 *graph (1)(B), is amended by striking “(I) The provi-*
 7 *sions” and all that follows through “(II)”.*

8 (4) *EFFECTIVE DATE.—The amendments made*
 9 *by this subsection shall take effect as if included in*
 10 *the enactment of section 203(a) of the Personal Re-*
 11 *sponsibility and Work Opportunity Reconciliation*
 12 *Act of 1996 (Public Law 104–193; 110 Stat. 2186).*
 13 *The reference to section 202(x)(1)(A)(ii) of the Social*
 14 *Security Act in section 1611(e)(1)(I)(i) of the Social*
 15 *Security Act as amended by paragraph (2) shall be*
 16 *deemed a reference to such section 202(x)(1)(A)(ii) as*
 17 *amended by subsection (b)(1)(C).*

18 (d) *CONTINUED DENIAL OF BENEFITS TO SEX OF-*
 19 *FENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS*
 20 *UPON COMPLETION OF PRISON TERM.—*

21 (1) *IN GENERAL.—Section 202(x)(1)(A) of the*
 22 *Social Security Act (42 U.S.C. 402(x)(1)(A)) is*
 23 *amended—*

24 (A) *in clause (i), by striking “or” at the*
 25 *end;*

1 (B) in clause (ii)(IV), by striking the period
2 and inserting “, or”; and

3 (C) by adding at the end the following:

4 “(iii) immediately upon completion of confine-
5 ment as described in clause (i) pursuant to conviction
6 of a criminal offense an element of which is sexual ac-
7 tivity, is confined by court order in an institution at
8 public expense pursuant to a finding that the indi-
9 vidual is a sexually dangerous person or a sexual
10 predator or a similar finding.”.

11 (2) CONFORMING AMENDMENT.—Section
12 202(x)(1)(B)(ii) of the Social Security Act (42 U.S.C.
13 402(x)(1)(B)(ii)) is amended by striking “clause (ii)”
14 and inserting “clauses (ii) and (iii)”.

15 (3) EFFECTIVE DATE.—The amendments made
16 by this subsection shall apply with respect to benefits
17 for months ending after the date of enactment of this
18 Act.

19 **SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
20 **EXEMPTION FROM SOCIAL SECURITY COV-**
21 **ERAGE.**

22 (a) IN GENERAL.—Notwithstanding section 1402(e)(4)
23 of the Internal Revenue Code of 1986, any exemption which
24 has been received under section 1402(e)(1) of such Code by
25 a duly ordained, commissioned, or licensed minister of a

1 church, a member of a religious order, or a Christian
2 Science practitioner, and which is effective for the taxable
3 year in which this Act is enacted, may be revoked by filing
4 an application therefore (in such form and manner, and
5 with such official, as may be prescribed by the Commis-
6 sioner of the Internal Revenue Service), if such application
7 is filed no later than the due date of the Federal income
8 tax return (including any extension thereof) for the appli-
9 cant's second taxable year beginning after December 31,
10 1999. Any such revocation shall be effective (for purposes
11 of chapter 2 of the Internal Revenue Code of 1986 and title
12 II of the Social Security Act), as specified in the applica-
13 tion, either with respect to the applicant's first taxable year
14 beginning after December 31, 1999, or with respect to the
15 applicant's second taxable year beginning after such date,
16 and for all succeeding taxable years; and the applicant for
17 any such revocation may not thereafter again file applica-
18 tion for an exemption under such section 1402(e)(1). If the
19 application is filed after the due date of the applicant's Fed-
20 eral income tax return for a taxable year and is effective
21 with respect to that taxable year, it shall include or be ac-
22 companied by payment in full of an amount equal to the
23 total of the taxes that would have been imposed by section
24 1401 of the Internal Revenue Code of 1986 with respect to
25 all of the applicant's income derived in that taxable year

1 *which would have constituted net earnings from self-em-*
 2 *ployment for purposes of chapter 2 of such Code (notwith-*
 3 *standing paragraph (4) or (5) of section 1402(c) of such*
 4 *Code) except for the exemption under section 1402(e)(1) of*
 5 *such Code.*

6 (b) *EFFECTIVE DATE.*—*Subsection (a) shall apply*
 7 *with respect to service performed (to the extent specified in*
 8 *such subsection) in taxable years beginning after December*
 9 *31, 1999, and with respect to monthly insurance benefits*
 10 *payable under title II of the Social Security Act on the basis*
 11 *of the wages and self-employment income of any individual*
 12 *for months in or after the calendar year in which such indi-*
 13 *vidual’s application for revocation (as described in such*
 14 *subsection) is effective (and lump-sum death payments pay-*
 15 *able under such title on the basis of such wages and self-*
 16 *employment income in the case of deaths occurring in or*
 17 *after such calendar year).*

18 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
 19 **TO COOPERATIVE RESEARCH OR DEM-**
 20 **ONSTRATION PROJECTS UNDER TITLES II**
 21 **AND XVI.**

22 (a) *IN GENERAL.*—*Section 1110(a)(3) of the Social Se-*
 23 *curity Act (42 U.S.C. 1310(a)(3)) is amended by striking*
 24 *“title XVI” and inserting “title II or XVI”.*

1 (b) *EFFECTIVE DATE.*—The amendment made by sub-
 2 section (a) shall take effect as if included in the enactment
 3 of the Social Security Independence and Program Improve-
 4 ments Act of 1994 (Public Law 103–296; 108 Stat. 1464).

5 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
 6 **WAGE REPORTS.**

7 (a) *IN GENERAL.*—Section 1137(a)(3) of the Social Se-
 8 curity Act (42 U.S.C. 1320b–7(a)(3)) is amended by insert-
 9 ing before the semicolon the following: “, and except that
 10 in the case of wage reports with respect to domestic service
 11 employment, a State may permit employers (as so defined)
 12 that make returns with respect to such employment on a
 13 calendar year basis pursuant to section 3510 of the Internal
 14 Revenue Code of 1986 to make such reports on an annual
 15 basis”.

16 (b) *TECHNICAL AMENDMENTS.*—Section 1137(a)(3) of
 17 the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
 18 amended—

19 (1) by striking “(as defined in section
 20 453A(a)(2)(B)(iii))”; and

21 (2) by inserting “(as defined in section
 22 453A(a)(2)(B))” after “employers” .

23 (c) *EFFECTIVE DATE.*—The amendments made by this
 24 section shall apply to wage reports required to be submitted
 25 on and after the date of enactment of this Act.

TITLE V—REVENUE**SEC. 501. MODIFICATION TO FOREIGN TAX CREDIT
CARRYBACK AND CARRYOVER PERIODS.**

(a) *IN GENERAL.*—Section 904(c) of the Internal Revenue Code of 1986 (relating to limitation on credit) is amended—

(1) by striking “in the second preceding taxable year,” and

(2) by striking “or fifth” and inserting “fifth, sixth, or seventh”.

(b) *EFFECTIVE DATE.*—The amendments made by subsection (a) shall apply to credits arising in taxable years beginning after December 31, 2001.

SEC. 502. LIMITATION ON USE OF NON-ACCRUAL EXPERIENCE METHOD OF ACCOUNTING.

(a) *IN GENERAL.*—Section 448(d)(5) of the Internal Revenue Code of 1986 (relating to special rule for services) is amended—

(1) by inserting “in fields described in paragraph (2)(A)” after “services by such person”, and

(2) by inserting “CERTAIN PERSONAL” before “SERVICES”.

(b) *EFFECTIVE DATE.*—

1 (1) *IN GENERAL.*—*The amendments made by*
2 *this section shall apply to taxable years ending after*
3 *the date of the enactment of this Act.*

4 (2) *CHANGE IN METHOD OF ACCOUNTING.*—*In*
5 *the case of any taxpayer required by the amendments*
6 *made by this section to change its method of account-*
7 *ing for its first taxable year ending after the date of*
8 *the enactment of this Act—*

9 (A) *such change shall be treated as initiated*
10 *by the taxpayer,*

11 (B) *such change shall be treated as made*
12 *with the consent of the Secretary of the Treasury,*
13 *and*

14 (C) *the net amount of the adjustments re-*
15 *quired to be taken into account by the taxpayer*
16 *under section 481 of the Internal Revenue Code*
17 *of 1986 shall be taken into account over a period*
18 *(not greater than 4 taxable years) beginning*
19 *with such first taxable year.*

20 **SEC. 503. EXTENSION OF INTERNAL REVENUE SERVICE**
21 **USER FEES.**

22 (a) *IN GENERAL.*—*Chapter 77 of the Internal Revenue*
23 *Code of 1986 (relating to miscellaneous provisions) is*
24 *amended by adding at the end the following new section:*

1 **“SEC. 7527. INTERNAL REVENUE SERVICE USER FEES.**

2 “(a) *GENERAL RULE.*—*The Secretary shall establish*
3 *a program requiring the payment of user fees for—*

4 “(1) *requests to the Internal Revenue Service for*
5 *ruling letters, opinion letters, and determination let-*
6 *ters, and*

7 “(2) *other similar requests.*

8 “(b) *PROGRAM CRITERIA.*—

9 “(1) *IN GENERAL.*—*The fees charged under the*
10 *program required by subsection (a)—*

11 “(A) *shall vary according to categories (or*
12 *subcategories) established by the Secretary,*

13 “(B) *shall be determined after taking into*
14 *account the average time for (and difficulty of)*
15 *complying with requests in each category (and*
16 *subcategory), and*

17 “(C) *shall be payable in advance.*

18 “(2) *EXEMPTIONS, ETC.*—*The Secretary shall*
19 *provide for such exemptions (and reduced fees) under*
20 *such program as the Secretary determines to be ap-*
21 *propriate.*

22 “(3) *AVERAGE FEE REQUIREMENT.*—*The average*
23 *fee charged under the program required by subsection*
24 *(a) shall not be less than the amount determined*
25 *under the following table:*

| “Category | Average Fee |
|--|--------------------|
| <i>Employee plan ruling and opinion</i> | \$250 |
| <i>Exempt organization ruling</i> | \$350 |
| <i>Employee plan determination</i> | \$300 |
| <i>Exempt organization determination</i> | \$275 |
| <i>Chief counsel ruling</i> | \$200. |

1 “(c) *TERMINATION.*—*No fee shall be imposed under*
2 *this section with respect to requests made after September*
3 *30, 2006.*”

4 (b) *CONFORMING AMENDMENTS.*—

5 (1) *The table of sections for chapter 77 of the In-*
6 *ternal Revenue Code of 1986 is amended by adding*
7 *at the end the following new item:*

 “*Sec. 7527. Internal Revenue Service user fees.*”

8 (2) *Section 10511 of the Revenue Act of 1987 is*
9 *repealed.*

10 (c) *EFFECTIVE DATE.*—*The amendments made by this*
11 *section shall apply to requests made after the date of the*
12 *enactment of this Act.*

a concurrent resolution expressing the sense of Congress regarding the guaranteed coverage of chiropractic services under the Medicare+Choice program.

SENATE RESOLUTION 59

At the request of Mr. LAUTENBERG, the name of the Senator from Mississippi (Mr. COCHRAN) was added as a cosponsor of Senate Resolution 59, a resolution designating both July 2, 1999, and July 2, 2000, as "National Literacy Day."

SENATE RESOLUTION 87

At the request of Mr. DURBIN, the name of the Senator from Georgia (Mr. CLELAND) was added as a cosponsor of Senate Resolution 87, a resolution commemorating the 60th Anniversary of the International Visitors Program

AMENDMENT NO. 648

At the request of Mr. BRYAN, his name was added as a cosponsor of amendment No. 648 proposed to S. 1186, an original bill making appropriations for energy and water development for the fiscal year ending September 30, 2000.

At the request of Mr. JEFFORDS, the names of the Senator from Iowa (Mr. GRASSLEY), the Senator from Maine (Ms. COLLINS), the Senator from California (Mrs. BOXER), the Senator from Georgia (Mr. CLELAND), the Senator from New Mexico (Mr. BINGAMAN), the Senator from Michigan (Mr. LEVIN), the Senator from Maine (Ms. SNOWE), the Senator from Nebraska (Mr. HAGEL), the Senator from Washington (Mrs. MURRAY), the Senator from Rhode Island (Mr. CHAFEE), and the Senator from Minnesota (Mr. WELLSTONE) were added as cosponsors of amendment No. 648 proposed to S. 1186, supra.

AMENDMENTS SUBMITTED

WORK INCENTIVES IMPROVEMENT ACT OF 1999

ROTH AND BINGAMAN AMENDMENT NO. 671

Mr. ROTH (for himself and Mr. BINGAMAN) proposed an amendment to the bill (S. 331) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes; as follows:

In lieu of the matter proposed to be inserted, insert the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the "Work Incentives Improvement Act of 1999".

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

- Sec. 1. Short title; table of contents.
- Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

- Sec. 101. Expanding State options under the medicaid program for workers with disabilities.
- Sec. 102. Continuation of medicare coverage for working individuals with disabilities.
- Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.
- Sec. 104. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.
- Sec. 105. Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

- Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

- Sec. 211. Work activity standard as a basis for review of an individual's disabled status.
- Sec. 212. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

- Sec. 221. Work incentives outreach program.
- Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

- Sec. 301. Permanent extension of disability insurance program demonstration project authority.
- Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.
- Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

- Sec. 401. Technical amendments relating to drug addicts and alcoholics.
- Sec. 402. Treatment of prisoners.
- Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage.
- Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
- Sec. 405. Authorization for State to permit annual wage reports.

SEC. 2. FINDINGS AND PURPOSES.

(a) FINDINGS.—Congress makes the following findings:

- (1) Health care is important to all Americans.
- (2) Health care is particularly important to individuals with disabilities and special health care needs who often cannot afford the insurance available to them through the private market, are uninsurable by the plans available in the private sector, and are at great risk of incurring very high and economically devastating health care costs.
- (3) Americans with significant disabilities often are unable to obtain health care insurance that provides coverage of the services and supports that enable them to live independently and enter or rejoin the workforce. Personal assistance services (such as attend-

ant services, personal assistance with transportation to and from work, reader services, job coaches, and related assistance) remove many of the barriers between significant disability and work. Coverage for such services, as well as for prescription drugs, durable medical equipment, and basic health care are powerful and proven tools for individuals with significant disabilities to obtain and retain employment.

(4) For individuals with disabilities, the fear of losing health care and related services is one of the greatest barriers keeping the individuals from maximizing their employment, earning potential, and independence.

(5) Individuals with disabilities who are beneficiaries under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing medicare or medicaid coverage that is linked to their cash benefits, a risk that is an equal, or greater, work disincentive than the loss of cash benefits associated with working.

(6) Currently, less than 1/2 of 1 percent of social security disability insurance and supplemental security income beneficiaries cease to receive benefits as a result of employment.

(7) Beneficiaries have cited the lack of adequate employment training and placement services as an additional barrier to employment.

(8) If an additional 1/2 of 1 percent of the current social security disability insurance (DI) and supplemental security income (SSI) recipients were to cease receiving benefits as a result of employment, the savings to the Social Security Trust Funds in cash assistance would total \$3,500,000,000 over the worklife of the individuals.

(b) PURPOSES.—The purposes of this Act are as follows:

(1) To provide health care and employment preparation and placement services to individuals with disabilities that will enable those individuals to reduce their dependency on cash benefit programs.

(2) To encourage States to adopt the option of allowing individuals with disabilities to purchase medicaid coverage that is necessary to enable such individuals to maintain employment.

(3) To provide individuals with disabilities the option of maintaining medicare coverage while working.

(4) To establish a return to work ticket program that will allow individuals with disabilities to seek the services necessary to obtain and retain employment and reduce their dependency on cash benefit programs.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

SEC. 101. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES.

(a) IN GENERAL.—

(1) STATE OPTION TO ELIMINATE INCOME, ASSETS, AND RESOURCE LIMITATIONS FOR WORKERS WITH DISABILITIES BUYING INTO MEDICAID.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

(A) in subclause (XIII), by striking "or" at the end;

(B) in subclause (XIV), by adding "or" at the end; and

(C) by adding at the end the following:

"(XV) who, but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income, who is at least 16, but less than 65, years of age, and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish;"

(2) STATE OPTION TO PROVIDE OPPORTUNITY FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY TO BUY INTO MEDICAID.—

(A) ELIGIBILITY.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as amended by paragraph (1), is amended—

(i) in subclause (XIV), by striking “or” at the end;

(ii) in subclause (XV), by adding “or” at the end; and

(iii) by adding at the end the following:

“(XVI) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XV);”.

(B) DEFINITION OF EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY.—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following:

“(v)(1) The term ‘employed individual with a medically improved disability’ means an individual who—

“(A) is at least 16, but less than 65, years of age;

“(B) is employed (as defined in paragraph (2));

“(C) ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XV) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and

“(D) continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.

“(2) For purposes of paragraph (1), an individual is considered to be ‘employed’ if the individual—

“(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

“(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.”.

(C) CONFORMING AMENDMENT.—Section 1905(a) of such Act (42 U.S.C. 1396d(a)) is amended in the matter preceding paragraph (1)—

(i) in clause (x), by striking “or” at the end;

(ii) in clause (xi), by adding “or” at the end; and

(iii) by inserting after clause (xi), the following:

“(xi) employed individuals with a medically improved disability (as defined in subsection (v)).”.

(3) STATE AUTHORITY TO IMPOSE INCOME-RELATED PREMIUMS AND COST-SHARING.—Section 1916 of such Act (42 U.S.C. 1396o) is amended—

(A) in subsection (a), by striking “The State plan” and inserting “Subject to subsection (g), the State plan”; and

(B) by adding at the end the following:

“(g) With respect to individuals provided medical assistance only under subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii)—

“(1) a State may (in a uniform manner for individuals described in either such subclause)—

“(A) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and

“(B) require payment of 100 percent of such premiums for such year in the case of such an individual who has income for a year that

exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved, except that in the case of such an individual who has income for a year that does not exceed 450 percent of such poverty line, such requirement may only apply to the extent such premiums do not exceed 7.5 percent of such income; and

“(2) such State shall require payment of 100 percent of such premiums for a year by such an individual whose adjusted gross income (as defined in section 62 of the Internal Revenue Code of 1986) for such year exceeds \$75,000, except that a State may choose to subsidize such premiums by using State funds which may not be federally matched under this title.

In the case of any calendar year beginning after 2000, the dollar amount specified in paragraph (2) shall be increased in accordance with the provisions of section 215(i)(2)(A)(ii).”.

(4) PROHIBITION AGAINST SUPPLANTATION OF STATE FUNDS AND STATE FAILURE TO MAINTAIN EFFORT.—Section 1903(i) of such Act (42 U.S.C. 1396b(i)) is amended—

(A) by striking the period at the end of paragraph (18) and inserting “; or”; and

(B) by inserting after such paragraph the following:

“(19) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended for such programs during the most recent State fiscal year ending before the date of enactment of this paragraph.”.

(b) CONFORMING AMENDMENTS.—

(1) Section 1903(f)(4) of the Social Security Act (42 U.S.C. 1396b(f)(4)) is amended in the matter preceding subparagraph (A) by inserting

“1902(a)(10)(A)(ii)(XV),” after

“1902(a)(10)(A)(ii)(X),”.

(2) Section 1903(f)(4) of such Act, as amended by paragraph (1), is amended by inserting

“1902(a)(10)(A)(ii)(XIII),” before

“1902(a)(10)(A)(ii)(XV).”.

(c) GAO REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to Congress regarding the amendments made by this section that examines—

(1) the extent to which higher health care costs for individuals with disabilities at higher income levels deter employment or progress in employment;

(2) whether such individuals have health insurance coverage or could benefit from the State option established under such amendments to provide a medicaid buy-in; and

(3) how the States are exercising such option, including—

(A) how such States are exercising the flexibility afforded them with regard to income disregards;

(B) what income and premium levels have been set;

(C) the degree to which States are subsidizing premiums above the dollar amount specified in section 1916(g)(2) of the Social Security Act (42 U.S.C. 1396o(g)(2)); and

(D) the extent to which there exists any crowd-out effect.

(d) EFFECTIVE DATE.—

(1) IN GENERAL.—Except as provided in paragraph (2), the amendments made by this section apply to medical assistance for items and services furnished on or after October 1, 1999.

(2) RETROACTIVITY OF CONFORMING AMENDMENT.—The amendment made by subsection (b)(2) takes effect as if included in the enactment of the Balanced Budget Act of 1997.

SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR WORKING INDIVIDUALS WITH DISABILITIES.

(a) CONTINUATION OF COVERAGE.—

(1) IN GENERAL.—Section 226 of the Social Security Act (42 U.S.C. 426) is amended—

(A) in the third sentence of subsection (b), by inserting “, except as provided in subsection (j)” after “but not in excess of 24 such months”; and

(B) by adding at the end the following:

“(j) The 24-month limitation on deemed entitlement under the third sentence of subsection (b) shall not apply—

“(1) for months occurring during the 6-year period beginning with the first month that begins after the date of enactment of this subsection; and

“(2) for subsequent months, in the case of an individual who was entitled to benefits under subsection (b) as of the last month of such 6-year period and would continue (but for such 24-month limitation) to be so entitled.”.

(2) CONFORMING AMENDMENT.—Section 1818A(a)(2)(C) of the Social Security Act (42 U.S.C. 1395i-2a(a)(2)(C)) is amended—

(A) by striking “solely”; and

(B) by inserting “or the expiration of the last month of the 6-year period described in section 226(j)” before the semicolon.

(b) GAO REPORT.—Not later than 4 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to Congress that—

(1) examines the effectiveness and cost of subsection (j) of section 226 of the Social Security Act (42 U.S.C. 426);

(2) examines the necessity and effectiveness of providing the continuation of medicare coverage under that subsection to individuals whose annual income exceeds the contribution and benefit base (as determined under section 230 of the Social Security Act);

(3) examines the viability of providing the continuation of medicare coverage under that subsection based on a sliding scale premium for individuals whose annual income exceeds such contribution and benefit base;

(4) examines the interrelation between the use of the continuation of medicare coverage under that subsection and the use of private health insurance coverage by individuals during the 6-year period; and

(5) recommends whether that subsection should continue to be applied beyond the 6-year period described in the subsection.

(c) EFFECTIVE DATE.—The amendments made by subsection (a) apply to months beginning with the first month that begins after the date of the enactment of this Act.

(d) TREATMENT OF CERTAIN INDIVIDUALS.—An individual enrolled under section 1818A of the Social Security Act (42 U.S.C. 1395i-2a) shall be treated with respect to premium payment obligations under such section as though the individual had continued to be entitled to benefits under section 226(b) of such Act for—

(1) months described in section 226(j)(1) of such Act (42 U.S.C. 426(j)(1)) (as added by subsection (a)); and

(2) subsequent months, in the case of an individual who was so enrolled as of the last month described in section 226(j)(2) of such Act (42 U.S.C. 426(j)(2)) (as so added).

SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES.

(a) ESTABLISHMENT.—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall award grants described in subsection (b) to States to support

the design, establishment, and operation of State infrastructures that provide items and services to support working individuals with disabilities.

(2) APPLICATION.—In order to be eligible for an award of a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary shall require.

(3) DEFINITION OF STATE.—In this section, the term "State" means each of the 50 States, the District of Columbia, Puerto Rico, Guam, the United States Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) GRANTS FOR INFRASTRUCTURE AND OUTREACH.—

(1) IN GENERAL.—Out of the funds appropriated under subsection (e), the Secretary shall award grants to States to—

(A) support the establishment, implementation, and operation of the State infrastructures described in subsection (a); and

(B) conduct outreach campaigns regarding the existence of such infrastructures.

(2) ELIGIBILITY FOR GRANTS.—

(A) IN GENERAL.—No State may receive a grant under this subsection unless the State—

(i) has an approved amendment to the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) that provides medical assistance under such plan to individuals described in section 1902(a)(10)(A)(ii)(XV) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)); and

(ii) demonstrates to the satisfaction of the Secretary that the State makes personal assistance services available under the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to the extent necessary to enable individuals described in clause (i) to remain employed (as determined under section 1905(v)(2) of the Social Security Act (42 U.S.C. 1396d(v)(2))).

(B) DEFINITION OF PERSONAL ASSISTANCE SERVICES.—In this paragraph, the term "personal assistance services" means a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability. Such services shall be designed to increase the individual's control in life and ability to perform everyday activities on or off the job.

(3) DETERMINATION OF AWARDS.—

(A) IN GENERAL.—Subject to subparagraph (B), the Secretary shall determine a formula for awarding grants to States under this section that provides special consideration to States that provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XVI)).

(B) AWARD LIMITS.—

(i) MINIMUM AWARDS.—

(I) IN GENERAL.—Subject to subclause (II), no State with an approved application under this section shall receive a grant for a fiscal year that is less than \$500,000.

(II) PRO RATA REDUCTIONS.—If the funds appropriated under subsection (e) for a fiscal year are not sufficient to pay each State with an application approved under this section the minimum amount described in subclause (I), the Secretary shall pay each State an amount equal to the pro rata share of the amount made available.

(ii) MAXIMUM AWARDS.—No State with an application that has been approved under this section shall receive a grant for a fiscal year that exceeds 15 percent of the total expenditures by the State (including the reimbursed Federal share of such expenditures)

for medical assistance for individuals eligible under subclause (XV) and (XVI) of section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as estimated by the State and approved by the Secretary.

(c) AVAILABILITY OF FUNDS.—

(1) FUNDS AWARDED TO STATES.—Funds awarded to a State under a grant made under this section for a fiscal year shall remain available until expended.

(2) FUNDS NOT AWARDED TO STATES.—Funds not awarded to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for awarding by the Secretary.

(d) ANNUAL REPORT.—A State that is awarded a grant under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include the percentage increase in the number of title II disability beneficiaries, as defined in section 1148(k)(3) of the Social Security Act (as amended by section 201) in the State, and title XVI disability beneficiaries, as defined in section 1148(k)(4) of the Social Security Act (as so amended) in the State who return to work.

(e) APPROPRIATION.—

(1) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to make grants under this section—

(A) for fiscal year 2000, \$20,000,000;

(B) for fiscal year 2001, \$25,000,000;

(C) for fiscal year 2002, \$30,000,000;

(D) for fiscal year 2003, \$35,000,000;

(E) for fiscal year 2004, \$40,000,000; and

(F) for each of fiscal years 2005 through 2010, the amount appropriated for the preceding fiscal year increased by the percentage increase (if any) in the Consumer Price Index for All Urban Consumers (United States city average) for the preceding fiscal year.

(2) BUDGET AUTHORITY.—This subsection constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under paragraph (1).

(f) RECOMMENDATION.—Not later than October 1, 2009, the Secretary, in consultation with the Work Incentives Advisory Panel established under section 201(f), shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the grant program established under this section should be continued after fiscal year 2010.

SEC. 104. DEMONSTRATION OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES.

(a) STATE APPLICATION.—A State may apply to the Secretary of Health and Human Services (in this section referred to as the "Secretary") for approval of a demonstration project (in this section referred to as a "demonstration project") under which up to a specified maximum number of individuals who are workers with a potentially severe disability (as defined in subsection (b)(1)) are provided medical assistance equal to that provided under section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)) to individuals described in section 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

(b) WORKER WITH A POTENTIALLY SEVERE DISABILITY DEFINED.—For purposes of this section—

(1) IN GENERAL.—The term "worker with a potentially severe disability" means, with respect to a demonstration project, an individual who—

(A) is at least 16, but less than 65, years of age;

(B) has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected, but for the receipt of items and services described in section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)), to become blind or disabled (as defined under section 1614(a) of the Social Security Act (42 U.S.C. 1382c(a))); and

(C) is employed (as defined in paragraph (2)).

(2) DEFINITION OF EMPLOYED.—An individual is considered to be "employed" if the individual—

(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined under the demonstration project and approved by the Secretary.

(c) APPROVAL OF DEMONSTRATION PROJECTS.—

(1) IN GENERAL.—Subject to paragraph (3), the Secretary shall approve applications under subsection (a) that meet the requirements of paragraph (2) and such additional terms and conditions as the Secretary may require. The Secretary may waive the requirement of section 1902(a)(1) of the Social Security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-State demonstrations.

(2) TERMS AND CONDITIONS OF DEMONSTRATION PROJECTS.—The Secretary may not approve a demonstration project under this section unless the State provides assurances satisfactory to the Secretary that the following conditions are or will be met:

(A) ELECTION OF OPTIONAL CATEGORY.—The State has elected to provide coverage under its plan under title XIX of the Social Security Act of individuals described in section 1902(a)(10)(A)(ii)(XV) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

(B) MAINTENANCE OF STATE EFFORT.—Federal funds paid to a State pursuant to this section must be used to supplement, but not supplant, the level of State funds expended for workers with potentially severe disabilities under programs in effect for such individuals at the time the demonstration project is approved under this section.

(C) INDEPENDENT EVALUATION.—The State provides for an independent evaluation of the project.

(3) LIMITATIONS ON FEDERAL FUNDING.—

(A) APPROPRIATION.—

(i) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to carry out this section—

(I) for fiscal year 2000, \$72,000,000;

(II) for fiscal year 2001, \$74,000,000;

(III) for fiscal year 2002, \$78,000,000; and

(IV) for fiscal year 2003, \$81,000,000.

(ii) BUDGET AUTHORITY.—Clause (i) constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under clause (i).

(B) LIMITATION ON PAYMENTS.—In no case may—

(i) except as provided in clause (ii), the aggregate amount of payments made by the Secretary to States under this section exceed \$300,000,000;

(ii) the aggregate amount of payments made by the Secretary to States for administrative expenses relating to annual reports required under subsection (d) exceed \$5,000,000; or

(iii) payments be provided by the Secretary for a fiscal year after fiscal year 2005.

(C) FUNDS ALLOCATED TO STATES.—The Secretary shall allocate funds to States based on their applications and the availability of

funds. Funds allocated to a State under a grant made under this section for a fiscal year shall remain available until expended.

(D) FUNDS NOT ALLOCATED TO STATES.—Funds not allocated to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for allocation by the Secretary using the allocation formula established under this section.

(E) PAYMENTS TO STATES.—The Secretary shall pay to each State with a demonstration project approved under this section, from its allocation under subparagraph (C), an amount for each quarter equal to the Federal medical assistance percentage (as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1395d(b)) of expenditures in the quarter for medical assistance provided to workers with a potentially severe disability.

(d) ANNUAL REPORT.—A State with a demonstration project approved under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include enrollment and financial statistics on—

(1) the total population of workers with potentially severe disabilities served by the demonstration project; and

(2) each population of such workers with a specific physical or mental impairment described in subsection (b)(1)(B) served by such project.

(e) RECOMMENDATION.—Not later than October 1, 2002, the Secretary shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the demonstration project established under this section should be continued after fiscal year 2003.

(f) STATE DEFINED.—In this section, the term "State" has the meaning given such term for purposes of title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

SEC. 105. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) IN GENERAL.—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting "or paragraph (6)" after "this paragraph"; and

(2) by adding at the end the following new paragraph:

"(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss."

(b) EFFECTIVE DATE.—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS
Subtitle A—Ticket to Work and Self-Sufficiency

SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) IN GENERAL.—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding after section 1147 (as added by section 8 of the Noncitizen Benefit

Clarification and Other Technical Amendments Act of 1998 (Public Law 105-306; 112 Stat. 2928)) the following:

"TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

"SEC. 1148. (a) IN GENERAL.—The Commissioner shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary's choice and which is willing to provide such services to the beneficiary.

"(b) TICKET SYSTEM.—

"(1) DISTRIBUTION OF TICKETS.—The Commissioner may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

"(2) ASSIGNMENT OF TICKETS.—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary's choice which is serving under the Program and is willing to accept the assignment.

"(3) TICKET TERMS.—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner's agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the employment network may provide to the beneficiary.

"(4) PAYMENTS TO EMPLOYMENT NETWORKS.—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

"(c) STATE PARTICIPATION.—

"(1) IN GENERAL.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 may elect to participate in the Program as an employment network with respect to a disabled beneficiary. If the State agency does elect to participate in the Program, the State agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system in accordance with subsection (h)(1). With respect to a disabled beneficiary that the State agency does not elect to have participate in the Program, the State agency shall be paid for services provided to that beneficiary under the system for payment applicable under section 222(d) and subsections (d) and (e) of section 1615. The Commissioner shall provide for periodic opportunities for exercising such elections (and revocations).

"(2) EFFECT OF PARTICIPATION BY STATE AGENCY.—

"(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under that paragraph to participate in the Program, the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973.

"(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PRO-

GRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

"(3) SPECIAL REQUIREMENTS APPLICABLE TO CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

"(A) IN GENERAL.—In any case in which an employment network has been assigned a ticket to work and self-sufficiency by a disabled beneficiary, no State agency shall be deemed required, under this section, title I of the Workforce Investment Act of 1998, title I of the Rehabilitation Act of 1973, or a State plan approved under such title, to accept any referral of such disabled beneficiary from such employment network unless such employment network and such State agency have entered into a written agreement that meets the requirements of subparagraph (B). Any beneficiary who has assigned a ticket to work and self-sufficiency to an employment network that has not entered into such a written agreement with such a State agency may not access vocational rehabilitation services under title I of the Rehabilitation Act of 1973 until such time as the beneficiary is reassigned to a State vocational rehabilitation agency by the Program Manager.

"(B) TERMS OF AGREEMENT.—An agreement required by subparagraph (A) shall specify, in accordance with regulations prescribed pursuant to subparagraph (C)—

"(i) the extent (if any) to which the employment network holding the ticket will provide to the State agency—

"(I) reimbursement for costs incurred in providing services described in subparagraph (A) to the disabled beneficiary; and

"(II) other amounts from payments made by the Commissioner to the employment network pursuant to subsection (h); and

"(ii) any other conditions that may be required by such regulations.

"(C) REGULATIONS.—The Commissioner and the Secretary of Education shall jointly prescribe regulations specifying the terms of agreements required by subparagraph (A) and otherwise necessary to carry out the provisions of this paragraph.

"(D) PENALTY.—No payment may be made to an employment network pursuant to subsection (h) in connection with services provided to any disabled beneficiary if such employment network makes referrals described in subparagraph (A) in violation of the terms of the agreement required under subparagraph (A) or without having entered into such an agreement.

"(d) RESPONSIBILITIES OF THE COMMISSIONER.—

"(1) SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.—The Commissioner shall enter into agreements with 1 or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation and employment services.

"(2) TENURE, RENEWAL, AND EARLY TERMINATION.—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include—

"(A) measures for ease of access by beneficiaries to services; and

"(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement; and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) SELECTION OF EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(B) ALTERNATE PARTICIPANTS.—In any State where the Program is being implemented, the Commissioner shall enter into an agreement with any alternate participant that is operating under the authority of section 222(d)(2) in the State as of the date of enactment of this section and chooses to serve as an employment network under the Program.

“(5) TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) QUALITY ASSURANCE.—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall solicit and consider the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure that the periodic surveys of beneficiaries receiving services under the Program are designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incor-

porating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks for good cause, as determined by the Commissioner, without being deemed to have rejected services under the Program. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible formats.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager’s agreement, including rural areas.

“(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Services provided under the Program may include case management, work incentives planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, followup services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are available in each service area.

“(f) EMPLOYMENT NETWORKS.—

“(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity that assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b).

“(B) ONE-STOP DELIVERY SYSTEMS.—An employment network serving under the Program may consist of a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998.

“(C) COMPLIANCE WITH SELECTION CRITERIA.—No employment network may serve under the Program unless it meets and maintains compliance with both general selection criteria (such as professional and educational qualifications (where applicable)) and specific selection criteria (such as substantial expertise and experience in providing relevant employment services and supports).

“(D) SINGLE OR ASSOCIATED PROVIDERS ALLOWED.—An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into

a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

“(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

“(A) serve prescribed service areas; and

“(B) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans meeting the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) REQUIREMENTS.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subparagraph (C);

“(B) develop and implement each such individual work plan in partnership with each beneficiary receiving such services in a manner that affords the beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal;

“(C) ensure that each individual work plan includes at least—

“(i) a statement of the vocational goal developed with the beneficiary;

“(ii) a statement of the services and supports that have been deemed necessary for the beneficiary to accomplish that goal;

“(iii) a statement of any terms and conditions related to the provision of such services and supports; and

“(iv) a statement of understanding regarding the beneficiary’s rights under the Program (such as the right to retrieve the ticket to work and self-sufficiency if the beneficiary is dissatisfied with the services being provided by the employment network) and remedies available to the individual, including information on the availability of advocacy services and assistance in resolving disputes through the State grant program authorized under section 1150;

“(D) provide a beneficiary the opportunity to amend the individual work plan if a change in circumstances necessitates a change in the plan; and

“(E) make each beneficiary’s individual work plan available to the beneficiary in, as appropriate, an accessible format chosen by the beneficiary.

“(2) EFFECTIVE UPON WRITTEN APPROVAL.—A beneficiary’s individual work plan shall take effect upon written approval by the beneficiary or a representative of the beneficiary and a representative of the employment network that, in providing such written approval, acknowledges assignment of the beneficiary’s ticket to work and self-sufficiency.

“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

“(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

“(B) NO CHANGE IN METHOD OF PAYMENT FOR BENEFICIARIES WITH TICKETS ALREADY ASSIGNED TO THE EMPLOYMENT NETWORKS.—Any election of a payment system by an employment network that would result in a change in the method of payment to the employment network for services provided to a beneficiary who is receiving services from the employment network at the time of the election shall not be effective with respect to payment for services provided to that beneficiary and the method of payment previously selected shall continue to apply with respect to such services.

“(2) OUTCOME PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network in connection with each individual who is a beneficiary for each month during the individual’s outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual because of work or earnings.

“(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

“(i) the payment for each of the 60 months during the outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs; and

“(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

“(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.—The outcome-milestone payment system shall provide for 1 or more milestones with respect to beneficiaries receiving services from an employment network under the Program that are directed toward the

goal of permanent employment. Such milestones shall form a part of a payment structure that provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

“(C) LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome-milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

“(4) DEFINITIONS.—In this subsection:

“(A) PAYMENT CALCULATION BASE.—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year; and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained age 18 but have not attained age 65.

“(B) OUTCOME PAYMENT PERIOD.—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity; and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNTS OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking

into account information provided to the Commissioner by program managers, the Work Incentives Advisory Panel established under section 201(f) of the Work Incentives Improvement Act of 1999, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Work Incentives Advisory Panel established under section 201(f) of the Work Incentives Improvement Act of 1999, or other reliable sources.

“(i) SUSPENSION OF DISABILITY REVIEWS.—During any period for which an individual is using, as defined by the Commissioner, a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) ALLOCATION OF COSTS.—

“(1) PAYMENTS TO EMPLOYMENT NETWORKS.—Payments to employment networks (including State agencies that elect to participate in the Program as an employment network) shall be made from the Federal Old-Age and Survivors Insurance Trust Fund or the Federal Disability Insurance Trust Fund, as appropriate, in the case of ticketed title II disability beneficiaries who return to work, or from the appropriation made available for making supplemental security income payments under title XVI, in the case of title XVI disability beneficiaries who return to work. With respect to ticketed beneficiaries who concurrently are entitled to benefits under title II and eligible for payments under title XVI who return to work, the Commissioner shall allocate the cost of payments to employment networks to which the tickets of such beneficiaries have been assigned among such Trust Funds and appropriation, as appropriate.

“(2) ADMINISTRATIVE EXPENSES.—The costs of administering this section (other than payments to employment networks) shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(k) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(3) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(4) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

"(5) SUPPLEMENTAL SECURITY INCOME BENEFIT UNDER TITLE XVI.—The term 'supplemental security income benefit under title XVI' means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

"(I) REGULATIONS.—Not later than 1 year after the date of enactment of this section, the Commissioner shall prescribe such regulations as are necessary to carry out the provisions of this section."

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(i) of the Social Security Act (42 U.S.C. 421(i)) is amended by adding at the end the following:

"(5) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i)."

(B) Section 222(a) of the Social Security Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of the Social Security Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of the Social Security Act (42 U.S.C. 425(b)(1)) is amended by striking "a program of vocational rehabilitation services" and inserting "a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services".

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of the Social Security Act (42 U.S.C. 1382d(a)) is amended to read as follows:

"SEC. 1615. (a) In the case of any blind or disabled individual who—

"(1) has not attained age 16, and

"(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V."

(B) Section 1615(c) of the Social Security Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of the Social Security Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking "a program of vocational rehabilitation services" and inserting "a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services".

(D) Section 1633(c) of the Social Security Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting "(1)" after "(c)"; and

(ii) by adding at the end the following:

"(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i)."

(c) EFFECTIVE DATE.—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following 1 year after the date of enactment of this Act.

(d) GRADUATED IMPLEMENTATION OF PROGRAM.—

(1) IN GENERAL.—Not later than 1 year after the date of enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment

systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) REQUIREMENTS.—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) FULL IMPLEMENTATION.—The Commissioner shall ensure that the ability to provide tickets and services to individuals under the Program exists in every State as soon as practicable on or after the effective date specified in subsection (c) but not later than 3 years after such date.

(4) ONGOING EVALUATION OF PROGRAM.—

(A) IN GENERAL.—The Commissioner shall design and conduct a series of evaluations to assess the cost-effectiveness of activities carried out under this section and the amendments made thereby, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) CONSULTATION.—The Commissioner shall design and carry out the series of evaluations after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program and consulting with the Work Incentives Advisory Panel established under section 201(f), the Comptroller General of the United States, other agencies of the Federal Government, and private organizations with appropriate expertise.

(C) METHODOLOGY.—

(i) IMPLEMENTATION.—The Commissioner, in consultation with the Work Incentives Advisory Panel established under section 201(f), shall ensure that plans for evaluations and data collection methods under the Program are appropriately designed to obtain detailed employment information.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to)—

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of providers whose services are provided within an employment network under the Program;

(VII) the extent (if any) to which employment networks display a greater willingness

to provide services to beneficiaries with a range of disabilities;

(VIII) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome payment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(IX) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(X) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(D) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) of the Social Security Act for prompt referrals to a State agency, and

(ii) the authority of the Commissioner under section 222(d)(2) of the Social Security Act to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals, shall apply in such State.

(B) EXISTING AGREEMENTS.—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act before the date of enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to services (if any) to be provided after 3 years after the effective date provided in subsection (c).

(e) SPECIFIC REGULATIONS REQUIRED.—

(1) IN GENERAL.—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.—The matters which shall be addressed in such regulations shall include—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1148(b)(1) of the Social Security Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program (and revoke such an election) pursuant to

section 1148(c)(1) of the Social Security Act and provision for periodic opportunities for exercising such elections (and revocations);

(D) the status of State agencies under section 1148(c)(1) at the time that State agencies exercise elections (and revocations) under that section;

(E) the terms of agreements to be entered into with program managers pursuant to section 1148(d) of the Social Security Act, including—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1148(d)(3) of the Social Security Act;

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1148(d) and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1148(e); and

(iii) the format under which dispute resolution will operate under section 1148(d)(7);

(F) the terms of agreements to be entered into with employment networks pursuant to section 1148(d)(4) of the Social Security Act, including—

(i) the manner in which service areas are specified pursuant to section 1148(f)(2)(A) of the Social Security Act;

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1148(f)(1)(C) of the Social Security Act in selecting service providers;

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1148(f)(3) of the Social Security Act; and

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1148(f)(4) of the Social Security Act;

(G) standards which must be met by individual work plans pursuant to section 1148(g) of the Social Security Act;

(H) standards which must be met by payment systems required under section 1148(h) of the Social Security Act, including—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1148(h)(1)(A);

(ii) the terms which must be met by an outcome payment system under section 1148(h)(2);

(iii) the terms which must be met by an outcome-milestone payment system under section 1148(h)(3);

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1148(h) of the Social Security Act or the period of time specified in paragraph (4)(B) of such section 1148(h); and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

(f) WORK INCENTIVES ADVISORY PANEL.—

(1) ESTABLISHMENT.—There is established within the Social Security Administration a panel to be known as the "Work Incentives Advisory Panel" (in this subsection referred to as the "Panel").

(2) DUTIES OF PANEL.—It shall be the duty of the Panel to—

(A) advise the President, Congress, and the Commissioner of Social Security on issues related to work incentives programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq., 1395 et seq., 1396 et seq.); and

(B) with respect to the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act—

(i) advise the Commissioner of Social Security with respect to establishing phase-in sites for such Program and fully implementing the Program thereafter, the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems, and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program;

(ii) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to section 302;

(iii) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1148(d)(6) of the Social Security Act; and

(iv) furnish progress reports on the Program to the Commissioner and each House of Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 12 members appointed as follows:

(i) 4 members appointed by the President.

(ii) 2 members appointed by the Speaker of the House of Representatives, in consultation with the chairman of the Committee on Ways and Means of the House of Representatives.

(iii) 2 members appointed by the Minority Leader of the House of Representatives, in consultation with the ranking member of the Committee on Ways and Means of the House of Representatives.

(iv) 2 members appointed by the Majority Leader of the Senate, in consultation with the chairman of the Committee on Finance of the Senate.

(v) 2 members appointed by the Minority Leader of the Senate, in consultation with the ranking member of the Committee on Finance of the Senate.

(B) REPRESENTATION.—All members appointed to the Panel shall have experience or expert knowledge in the fields of, or related to, work incentive programs, employment services, vocational rehabilitation services, health care services, and other support services for individuals with disabilities. At least one-half of the members described in each clause of subparagraph (A) shall be individuals with disabilities, or representatives of individuals with disabilities, with consideration to current or former title II disability beneficiaries or title XVI disability beneficiaries (as such terms are defined in section 1148(k) of the Social Security Act (as added by subsection (a)).

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—As designated by the Commissioner at the time of appointment, of the members first appointed—

(I) one-half of the members appointed under each clause of subparagraph (A) shall be appointed for a term of 2 years; and

(II) the remaining members appointed under each such clause shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Panel shall be filled

in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—Eight members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Commissioner and paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(B) STAFF.—Subject to rules prescribed by the Commissioner, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Commissioner, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this subsection.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places, and take such testimony and evidence as the Panel considers appropriate.

(B) POWERS OF MEMBERS AND AGENTS.—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this subsection.

(C) MAILS.—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(6) REPORTS.—

(A) INTERIM REPORTS.—The Panel shall submit directly to the President and Congress interim reports at least annually.

(B) FINAL REPORT.—The Panel shall transmit a final report directly to the President and Congress not later than 8 years after the date of enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislative and administrative actions which the Panel considers appropriate.

(7) TERMINATION.—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) ALLOCATION OF COSTS.—The costs of carrying out this subsection shall be paid from amounts made available for the administration of title II of the Social Security Act (42 U.S.C. 401 et seq.) and amounts made available for the administration of title XVI of that Act (42 U.S.C. 1381 et seq.), and shall be allocated among those amounts as appropriate.

**Subtitle B—Elimination of Work
Disincentives**

**SEC. 211. WORK ACTIVITY STANDARD AS A BASIS
FOR REVIEW OF AN INDIVIDUAL'S
DISABLED STATUS.**

Section 221 of the Social Security Act (42 U.S.C. 421) is amended by adding at the end the following:

“(m)(1) In any case where an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual's disability (as defined in section 223(d)) has received such benefits for at least 24 months—

“(A) no continuing disability review conducted by the Commissioner may be scheduled for the individual solely as a result of the individual's work activity;

“(B) no work activity engaged in by the individual may be used as evidence that the individual is no longer disabled; and

“(C) no cessation of work activity by the individual may give rise to a presumption that the individual is unable to engage in work.

“(2) An individual to which paragraph (1) applies shall continue to be subject to—

“(A) continuing disability reviews on a regularly scheduled basis that is not triggered by work; and

“(B) termination of benefits under this title in the event that the individual has earnings that exceed the level of earnings established by the Commissioner to represent substantial gainful activity.”.

SEC. 212. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS.

(a) OASDI BENEFITS.—Section 223 of the Social Security Act (42 U.S.C. 423) is amended—

(1) by redesignating subsection (i) as subsection (j); and

(2) by inserting after subsection (h) the following:

“Reinstatement of Entitlement

“(i)(1)(A) Entitlement to benefits described in subparagraph (B)(i)(I) shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of such entitlement shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was entitled to benefits under this section or section 202 on the basis of disability pursuant to an application filed therefore; and

“(II) such entitlement terminated due to the performance of substantial gainful activity;

“(ii) the individual is under a disability and the physical or mental impairment that is the basis for the finding of disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of disability that gave rise to the entitlement described in clause (i); and

“(iii) the individual's disability renders the individual unable to perform substantial gainful activity.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was entitled to a benefit described in subparagraph (B)(i)(I) prior to the entitlement termination described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the pe-

riod prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) and (iii) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not entitled to reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of subsection (f) shall apply.

“(4)(A)(i) Subject to clause (ii), entitlement to benefits reinstated under this subsection shall commence with the benefit payable for the month in which a request for reinstatement is filed.

“(ii) An individual whose entitlement to a benefit for any month would have been reinstated under this subsection had the individual filed a request for reinstatement before the end of such month shall be entitled to such benefit for such month if such request for reinstatement is filed before the end of the twelfth month immediately succeeding such month.

“(B)(i) Subject to clauses (ii) and (iii), the amount of the benefit payable for any month pursuant to the reinstatement of entitlement under this subsection shall be determined in accordance with the provisions of this title.

“(ii) For purposes of computing the primary insurance amount of an individual whose entitlement to benefits under this section is reinstated under this subsection, the date of onset of the individual's disability shall be the date of onset used in determining the individual's most recent period of disability arising in connection with such benefits payable on the basis of an application.

“(iii) Benefits under this section or section 202 payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) No benefit shall be payable pursuant to an entitlement reinstated under this subsection to an individual for any month in which the individual engages in substantial gainful activity.

“(D) The entitlement of any individual that is reinstated under this subsection shall end with the benefits payable for the month preceding whichever of the following months is the earliest:

“(i) The month in which the individual dies.

“(ii) The month in which the individual attains retirement age.

“(iii) The third month following the month in which the individual's disability ceases.

“(5) Whenever an individual's entitlement to benefits under this section is reinstated under this subsection, entitlement to benefits payable on the basis of such individual's wages and self-employment income may be reinstated with respect to any person previously entitled to such benefits on the basis of an application if the Commissioner determines that such person satisfies all the requirements for entitlement to such benefits except requirements related to the filing of an application. The provisions of paragraph

(4) shall apply to the reinstated entitlement of any such person to the same extent that they apply to the reinstated entitlement of such individual.

“(6) An individual to whom benefits are payable under this section or section 202 pursuant to a reinstatement of entitlement under this subsection for 24 months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) and the determination, if appropriate, of the termination month in accordance with subsection (a)(1) of this section, or subsection (d)(1), (e)(1), or (f)(1) of section 202, to be entitled to such benefits on the basis of an application filed therefore.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be entitled to provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under subsection (b) or (g) of section 205.

“(B) The amount of a provisional benefit for a month shall equal the amount of the last monthly benefit payable to the individual under this title on the basis of an application increased by an amount equal to the amount, if any, by which such last monthly benefit would have been increased as a result of the operation of section 215(i).

“(C)(i) Provisional benefits shall begin with the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual's entitlement to reinstated benefits;

“(II) the fifth month following the month described in clause (i);

“(III) the month in which the individual performs substantial gainful activity; or

“(IV) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual's declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not entitled to reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).”.

(b) SSI BENEFITS.—

(1) IN GENERAL.—Section 1631 of the Social Security Act (42 U.S.C. 1383) is amended by adding at the end the following:

**“Reinstatement of Eligibility on the Basis of
Blindness or Disability**

“(p)(1)(A) Eligibility for benefits under this title shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of eligibility shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was eligible for benefits under this title on the basis of blindness or

disability pursuant to an application filed therefore; and

“(II) the individual thereafter was ineligible for such benefits due to earned income (or earned and unearned income) for a period of 12 or more consecutive months;

“(iii) the individual is blind or disabled and the physical or mental impairment that is the basis for the finding of blindness or disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of blindness or disability that gave rise to the eligibility described in clause (i);

“(iii) the individual’s blindness or disability renders the individual unable to perform substantial gainful activity; and

“(iv) the individual satisfies the nonmedical requirements for eligibility for benefits under this title.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was eligible for a benefit under this title (including section 1619) prior to the period of ineligibility described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) through (iv) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not eligible for reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of section 1614(a)(4) shall apply.

“(4)(A) Eligibility for benefits reinstated under this subsection shall commence with the benefit payable for the month following the month in which a request for reinstatement is filed.

“(B)(i) Subject to clause (ii), the amount of the benefit payable for any month pursuant to the reinstatement of eligibility under this subsection shall be determined in accordance with the provisions of this title.

“(ii) The benefit under this title payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) Except as otherwise provided in this subsection, eligibility for benefits under this title reinstated pursuant to a request filed under paragraph (2) shall be subject to the same terms and conditions as eligibility established pursuant to an application filed therefore.

“(5) Whenever an individual’s eligibility for benefits under this title is reinstated under this subsection, eligibility for such benefits shall be reinstated with respect to the individual’s spouse if such spouse was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements for eligibility for such benefits except requirements related to the filing of an application. The provisions of paragraph

(4) shall apply to the reinstated eligibility of the spouse to the same extent that they apply to the reinstated eligibility of such individual.

“(6) An individual to whom benefits are payable under this title pursuant to a reinstatement of eligibility under this subsection for twenty-four months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) to be eligible for such benefits on the basis of an application filed therefore.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be eligible for provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under paragraph (1) or (3) of subsection (c).

“(B)(i) Except as otherwise provided in clause (ii), the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual under this title with the same kind and amount of income.

“(ii) If the individual has a spouse who was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements of section 1614(b) except requirements related to the filing of an application, the amount of a provisional benefit for a month shall equal the amount of the month benefit that would be payable to an eligible individual and eligible spouse under this title with the same kind and amount of income.

“(C)(i) Provisional benefits shall begin with the month following the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s eligibility for reinstated benefits;

“(II) the fifth month following the month for which provisional benefits are first payable under clause (i); or

“(III) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration is false in accordance with paragraph (2)(A)(ii).

“(D) In any case in which the Commissioner determines that an individual is not eligible for reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).

“(8) For purposes of this subsection other than paragraph (7), the term ‘benefits under this title’ includes State supplementary payments made pursuant to an agreement under section 1616(a) or section 212(b) of Public Law 93-66.”

(2) CONFORMING AMENDMENTS.—

(A) Section 1631(j)(1) of such Act (42 U.S.C. 1383(j)(1)) is amended by striking the period and inserting “, or has filed a request for reinstatement of eligibility under subsection (p)(2) and been determined to be eligible for reinstatement.”

(B) Section 1631(j)(2)(A)(i)(I) of such Act (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by inserting “(other than pursuant to a request

for reinstatement under subsection (p))” after “eligible”.

(c) EFFECTIVE DATE.—

(1) IN GENERAL.—The amendments made by this section shall take effect on the first day of the thirteenth month beginning after the date of enactment of this Act.

(2) LIMITATION.—No benefit shall be payable under title II or XVI of the Social Security Act on the basis of a request for reinstatement filed under section 223(i) or 1631(p) of such Act before the effective date described in paragraph (1).

Subtitle C—Work Incentives Planning, Assistance, and Outreach

SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 201, is amended by adding after section 1148 the following:

“WORK INCENTIVES OUTREACH PROGRAM

“SEC. 1149. (a) ESTABLISHMENT.—

“(1) IN GENERAL.—The Commissioner, in consultation with the Work Incentives Advisory Panel established under section 201(f) of the Work Incentives Improvement Act of 1999, shall establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

“(2) GRANTS, COOPERATIVE AGREEMENTS, CONTRACTS, AND OUTREACH.—Under the program established under this section, the Commissioner shall—

“(A) establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including individuals participating in the Ticket to Work and Self-Sufficiency Program established under section 1148, the program established under section 1619, and other programs that are designed to encourage disabled beneficiaries to work;

“(B) conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and to the families of such beneficiaries) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work, including—

“(i) preparing and disseminating information explaining such programs; and

“(ii) working in cooperation with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling;

“(C) establish a corps of trained, accessible, and responsive work incentives specialists within the Social Security Administration who will specialize in disability work incentives under titles II and XVI for the purpose of disseminating accurate information with respect to inquiries and issues relating to work incentives to—

“(i) disabled beneficiaries;

“(ii) benefit applicants under titles II and XVI; and

“(iii) individuals or entities awarded grants under subparagraphs (A) or (B); and

“(D) provide—

“(i) training for work incentives specialists and individuals providing planning assistance described in subparagraph (C); and

“(ii) technical assistance to organizations and entities that are designed to encourage disabled beneficiaries to return to work.

“(3) COORDINATION WITH OTHER PROGRAMS.—The responsibilities of the Commissioner established under this section shall be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries including the program under section 1619, the plans for achieving self-support program (PASS), and any other Federal or State work incentives programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, transition services (as defined in, and provided in accordance with, the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)), a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998, and other services.

“(b) CONDITIONS.—

“(1) SELECTION OF ENTITIES.—

“(A) APPLICATION.—An entity shall submit an application for a grant, cooperative agreement, or contract to provide benefits planning and assistance to the Commissioner at such time, in such manner, and containing such information as the Commissioner may determine is necessary to meet the requirements of this section.

“(B) STATEWIDENESS.—The Commissioner shall ensure that the planning, assistance, and information described in paragraph (2) shall be available on a statewide basis.

“(C) ELIGIBILITY OF STATES AND PRIVATE ORGANIZATIONS.—

“(i) IN GENERAL.—The Commissioner may award a grant, cooperative agreement, or contract under this section to a State or a private agency or organization (other than Social Security Administration Field Offices and the State agency administering the State medicaid program under title XIX, including any agency or entity described in clause (ii), that the Commissioner determines is qualified to provide the planning, assistance, and information described in paragraph (2)).

“(ii) AGENCIES AND ENTITIES DESCRIBED.—The agencies and entities described in this clause are the following:

“(I) Any public or private agency or organization (including Centers for Independent Living established under title VII of the Rehabilitation Act of 1973, protection and advocacy organizations, client assistance programs established in accordance with section 112 of the Rehabilitation Act of 1973, and State Developmental Disabilities Councils established in accordance with section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6024)) that the Commissioner determines satisfies the requirements of this section.

“(II) The State agency administering the State program funded under part A of title IV.

“(D) EXCLUSION FOR CONFLICT OF INTEREST.—The Commissioner may not award a grant, cooperative agreement, or contract under this section to any entity that the Commissioner determines would have a conflict of interest if the entity were to receive a grant, cooperative agreement, or contract under this section.

“(2) SERVICES PROVIDED.—A recipient of a grant, cooperative agreement, or contract to provide benefits planning and assistance shall select individuals who will act as planners and provide information, guidance, and planning to disabled beneficiaries on the—

“(A) availability and interrelation of any Federal or State work incentives programs designed to assist disabled beneficiaries that the individual may be eligible to participate in;

“(B) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual; and

“(C) availability of protection and advocacy services for disabled beneficiaries and how to access such services.

“(3) AMOUNT OF GRANTS, COOPERATIVE AGREEMENTS, OR CONTRACTS.—

“(A) BASED ON POPULATION OF DISABLED BENEFICIARIES.—Subject to subparagraph (B), the Commissioner shall award a grant, cooperative agreement, or contract under this section to an entity based on the percentage of the population of the State where the entity is located who are disabled beneficiaries.

“(B) LIMITATION PER GRANT.—No entity shall receive a grant, cooperative agreement, or contract under this section for a fiscal year that is less than \$50,000 or more than \$300,000.

“(ii) TOTAL AMOUNT FOR ALL GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS.—The total amount of all grants, cooperative agreements, and contracts awarded under this section for a fiscal year may not exceed \$23,000,000.

“(4) ALLOCATION OF COSTS.—The costs of carrying out this section shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(c) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$23,000,000 for each of fiscal years 2000 through 2004.”

SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 221, is amended by adding after section 1149 the following:

“STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

“SEC. 1150. (a) IN GENERAL.—Subject to subsection (c), the Commissioner may make payments in each State to the protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.) for the purpose of providing services to disabled beneficiaries.

“(b) SERVICES PROVIDED.—Services provided to disabled beneficiaries pursuant to a payment made under this section may include—

“(1) information and advice about obtaining vocational rehabilitation and employment services; and

“(2) advocacy or other services that a disabled beneficiary may need to secure or regain gainful employment.

“(c) APPLICATION.—In order to receive payments under this section, a protection and advocacy system shall submit an application to the Commissioner, at such time, in such form and manner, and accompanied by such information and assurances as the Commissioner may require.

“(d) AMOUNT OF PAYMENTS.—

“(1) IN GENERAL.—Subject to the amount appropriated for a fiscal year for making payments under this section, a protection and advocacy system shall not be paid an amount that is less than—

“(A) in the case of a protection and advocacy system located in a State (including the

District of Columbia and Puerto Rico) other than Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, the greater of—

“(i) \$100,000; or

“(ii) ½ of 1 percent of the amount available for payments under this section; and

“(B) in the case of a protection and advocacy system located in Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, \$50,000.

“(2) INFLATION ADJUSTMENT.—For each fiscal year in which the total amount appropriated to carry out this section exceeds the total amount appropriated to carry out this section in the preceding fiscal year, the Commissioner shall increase each minimum payment under subparagraphs (A) and (B) of paragraph (1) by a percentage equal to the percentage increase in the total amount appropriated to carry out this section between the preceding fiscal year and the fiscal year involved.

“(e) ANNUAL REPORT.—Each protection and advocacy system that receives a payment under this section shall submit an annual report to the Commissioner and the Work Incentives Advisory Panel established under section 201(f) of the Work Incentives Improvement Act of 1999 on the services provided to individuals by the system.

“(f) FUNDING.—

“(1) ALLOCATION OF PAYMENTS.—Payments under this section shall be made from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(2) CARRYOVER.—Any amounts allotted for payment to a protection and advocacy system under this section for a fiscal year shall remain available for payment to or on behalf of the protection and advocacy system until the end of the succeeding fiscal year.

“(g) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(3) PROTECTION AND ADVOCACY SYSTEM.—The term ‘protection and advocacy system’ means a protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.).

“(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$7,000,000 for each of fiscal years 2000 through 2004.”

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

SEC. 301. PERMANENT EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) PERMANENT EXTENSION OF AUTHORITY.—Title II of the Social Security Act (42 U.S.C. 401 et seq.) is amended by adding at the end the following:

“DEMONSTRATION PROJECT AUTHORITY

“SEC. 234. (a) AUTHORITY.—

“(1) IN GENERAL.—The Commissioner of Social Security (in this section referred to as the ‘Commissioner’) shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of—

“(A) various alternative methods of treating the work activity of individuals entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s

disability (as defined in section 223(d)), including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of such individuals;

“(B) altering other limitations and conditions applicable to such individuals (including lengthening the trial work period (as defined in section 222(c)), altering the 24-month waiting period for hospital insurance benefits under section 226, altering the manner in which the program under this title is administered, earlier referral of such individuals for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation); and

“(C) implementing sliding scale benefit offsets using variations in—

“(i) the amount of the offset as a proportion of earned income;

“(ii) the duration of the offset period; and

“(iii) the method of determining the amount of income earned by such individuals,

to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of this title.

“(2) AUTHORITY FOR EXPANSION OF SCOPE.—The Commissioner may expand the scope of any such experiment or demonstration project to include any group of applicants for benefits under the program established under this title with impairments that reasonably may be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.

“(b) REQUIREMENTS.—The experiments and demonstration projects developed under subsection (a) shall be of sufficient scope and shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration while giving assurance that the results derived from the experiments and projects will obtain generally in the operation of the disability insurance program under this title without committing such program to the adoption of any particular system either locally or nationally.

“(c) AUTHORITY TO WAIVE COMPLIANCE WITH BENEFITS REQUIREMENTS.—In the case of any experiment or demonstration project conducted under subsection (a), the Commissioner may waive compliance with the benefit requirements of this title, and the Secretary may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

“(d) REPORTS.—

“(1) INTERIM REPORTS.—On or before June 9 of each year, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate an interim

report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials that the Commissioner may consider appropriate.

“(2) FINAL REPORTS.—Not later than 90 days after the termination of any experiment or demonstration project carried out under this section, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate a final report with respect to that experiment and demonstration project.”

(b) CONFORMING AMENDMENTS; TRANSFER OF PRIOR AUTHORITY.—

(1) CONFORMING AMENDMENTS.—

(A) REPEAL OF PRIOR AUTHORITY.—Paragraphs (1) through (4) of subsection (a) and subsection (c) of section 505 of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) are repealed.

(B) CONFORMING AMENDMENT REGARDING FUNDING.—Section 201(k) of the Social Security Act (42 U.S.C. 401(k)) is amended by striking “section 505(a) of the Social Security Disability Amendments of 1980” and inserting “section 234”.

(2) TRANSFER OF PRIOR AUTHORITY.—With respect to any experiment or demonstration project being conducted under section 505(a) of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) as of the date of enactment of this Act, the authority to conduct such experiment or demonstration project (including the terms and conditions applicable to the experiment or demonstration project) shall be treated as if that authority (and such terms and conditions) had been established under section 234 of the Social Security Act, as added by subsection (a).

SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.

(a) AUTHORITY.—The Commissioner of Social Security shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1148(k)(3) of the Social Security Act) under which each \$1 of benefits payable under section 223, or under section 202 based on the beneficiary's disability, is reduced for each \$2 of such beneficiary's earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(b) SCOPE AND SCALE AND MATTERS TO BE DETERMINED.—

(1) IN GENERAL.—The demonstration projects developed under subsection (a) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(A) the effects, if any, of induced entry into the project and reduced exit from the project;

(B) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act; and

(C) the savings that accrue to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Work Incentives Advisory Panel pursuant to section 201(f)(2)(B)(ii).

(2) ADDITIONAL MATTERS.—The Commissioner shall also determine with respect to each project—

(A) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project;

(B) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project; and

(C) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project. The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(c) WAIVERS.—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act, and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of that Act, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

(d) INTERIM REPORTS.—Not later than 2 years after the date of enactment of this Act, and annually thereafter, the Commissioner of Social Security shall submit to Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials that the Commissioner of Social Security may consider appropriate.

(e) FINAL REPORT.—The Commissioner of Social Security shall submit to Congress a final report with respect to all demonstration projects carried out under this section not later than 1 year after their completion.

(f) EXPENDITURES.—Expenditures made for demonstration projects under this section shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

SEC. 303. STUDIES AND REPORTS.

(a) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 and other Federal laws. In such study, the Comptroller General shall specifically address the extent to which such

credits and other incentives would encourage employers to hire and retain individuals with disabilities.

(2) REPORT.—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(b) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act and the supplemental security income program under title XVI of that Act, as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of the Social Security Act.

(2) REPORT.—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(c) STUDY BY GENERAL ACCOUNTING OFFICE OF THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON RETURN TO WORK.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study of the substantial gainful activity level applicable as of that date to recipients of benefits under section 223 of the Social Security Act (42 U.S.C. 423) and under section 202 of that Act (42 U.S.C. 402) on the basis of a recipient having a disability, and the effect of such level as a disincentive for those recipients to return to work. In the study, the Comptroller General also shall address the merits of increasing the substantial gainful activity level applicable to such recipients of benefits and the rationale for not yearly indexing that level to inflation.

(2) REPORT.—Not later than 2 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(d) REPORT ON DISREGARDS UNDER THE DI AND SSI PROGRAMS.—Not later than 90 days after the date of enactment of this Act, the Commissioner of Social Security shall submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report that—

(1) identifies all income, assets, and resource disregards (imposed under statutory or regulatory authority) that are applicable to individuals receiving benefits under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.);

(2) with respect to each such disregard—

(A) specifies the most recent statutory or regulatory modification of the disregard; and

(B) recommends whether further statutory or regulatory modification of the disregard would be appropriate; and

(3) with respect to the disregard described in section 1612(b)(7) of the Social Security Act (42 U.S.C. 1382a(b)(7)) (relating to grants, scholarships, or fellowships received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution)—

(A) identifies the number of individuals receiving benefits under title XVI of such Act (42 U.S.C. 1381 et seq.) who have attained age 22 and have not had any portion of any grant, scholarship, or fellowship received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution excluded from their income in accordance with that section;

(B) recommends whether the age at which such grants, scholarships, or fellowships are excluded from income for purposes of determining eligibility under title XVI of the Social Security Act should be increased to age 25; and

(C) recommends whether such disregard should be expanded to include any such grant, scholarship, or fellowship received for use in paying the cost of room and board at any such institution.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (Public Law 104-121; 110 Stat. 853) is amended—

(1) in subparagraph (A), by striking “by the Commissioner of Social Security” and “by the Commissioner”; and

(2) by adding at the end the following:

“(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II of the Social Security Act based on disability, which has been denied in whole before the date of enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

“(i) there is pending a request for either administrative or judicial review with respect to such claim, or

“(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

“(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) of the Social Security Act shall not apply to such redetermination.”.

(b) CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES

AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5)(B) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended to read as follows:

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of enactment of this Act; or

“(ii) whose entitlement to benefits is based on an entitlement redetermination made pursuant to subparagraph (C).”.

(c) EFFECTIVE DATES.—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104-121; 110 Stat. 852 et seq.).

SEC. 402. TREATMENT OF PRISONERS.

(a) IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

(1) IN GENERAL.—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”; and

(B) by adding at the end the following:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, Social Security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1); and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual's confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) There is authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II).

“(iv) The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to agreements entered into under clause (i) to any agency administering a Federal or federally assisted cash, food, or medical assistance program for eligibility purposes.”.

(2) CONFORMING AMENDMENT TO THE PRIVACY ACT.—Section 552a(a)(8)(B) of title 5, United States Code, is amended—

(A) in clause (vi), by striking “or” at the end;

(B) in clause (vii), by adding “or” at the end; and

(C) by adding at the end the following:

“(viii) matches performed pursuant to section 202(x)(3)(B) or 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 402(x)(3)(B), 1382(e)(1)(I));”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during” and inserting “throughout”;

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) FIFTY PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv), respectively; and

(C) by inserting after clause (i) the following:

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”.

(2) EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii),”.

(3) ELIMINATION OF OVERLY BROAD EXEMPTION.—Section 1611(e)(1)(I)(iii) of such Act (42 U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by paragraph (1)(B)), is amended by striking “(I) The provisions” and all that follows through “(II)”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) of the Social Security Act in section 1611(e)(1)(I)(i) of the Social Se-

curity Act as amended by paragraph (2) shall be deemed a reference to such section 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

(d) CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”.

(2) CONFORMING AMENDMENT.—Section 202(x)(1)(B)(ii) of the Social Security Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii)”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of enactment of this Act.

SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) IN GENERAL.—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefore (in such form and manner, and with such official, as may be prescribed by the Commissioner of the Internal Revenue Service), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant’s second taxable year beginning after December 31, 1999. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act), as specified in the application, either with respect to the applicant’s first taxable year beginning after December 31, 1999, or with respect to the applicant’s second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant’s Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant’s income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding paragraph (4) or (5) of section 1402(c) of such Code) except for the exemption under section 1402(e)(1) of such Code.

(b) EFFECTIVE DATE.—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under title II of the Social Security Act on the basis of the wages and self-employment income of any individual

for months in or after the calendar year in which such individual’s application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) IN GENERAL.—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking “title XVI” and inserting “title II or XVI”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103-296; 108 Stat. 1464).

SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL WAGE REPORTS.

(a) IN GENERAL.—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended by inserting before the semicolon the following: “, and except that in the case of wage reports with respect to domestic service employment, a State may permit employers (as so defined) that make returns with respect to such employment on a calendar year basis pursuant to section 3510 of the Internal Revenue Code of 1986 to make such reports on an annual basis”.

(b) TECHNICAL AMENDMENTS.—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended—

(1) by striking “(as defined in section 453A(a)(2)(B)(iii))”; and

(2) by inserting “(as defined in section 453A(a)(2)(B))” after “employers”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to wage reports required to be submitted on and after the date of enactment of this Act.

REID AMENDMENT NO. 672

Mr. REID proposed an amendment to amendment No. 629 proposed by Mr. BOND to the bill, S. 1186, supra; as follows:

On line 2, strike “, of which \$8,100,000” and insert: “, of which \$3,000,000 shall be used for Boston College research in high temperature superconductivity and of which \$5,000,000”.

REID AMENDMENT NO. 673

Mr. REID proposed an amendment to amendment No. 631 proposed by Mr. TORRICELLI to the bill, S. 1186, supra; as follows:

On line 4, strike “\$4,000,000” and insert: “\$1,500,000”.

DOMENICI AMENDMENT NO. 674

Mr. DOMENICI proposed an amendment to amendment No. 634 proposed by Mr. ABRAHAM to the bill, S. 1186, supra; as follows:

Strike: “Metro Beach, Michigan, \$422,500 for aquatic ecosystem restoration.”

And insert: “Lake St. Clair, Metro Beach, Michigan, section 206 project, \$100,000”.

REID AMENDMENT NO. 675

Mr. REID proposed an amendment to amendment No. 642 proposed by Mrs. BOXER to the bill, S. 1186, supra; as follows:

Strike "line 16, strike all that follows "expended:" to the end of line 24.", and insert the following: "line 23, strike all that follows "tious" through "Act" on line 24."

DOMENICI AMENDMENT NO. 676

Mr. DOMENICI proposed an amendment to amendment No. 642 proposed by Mr. DORGAN to the bill, S. 1186, supra; as follows:

On line 4 strike: "may use funding previously appropriated" and insert: "may use Construction, General funding as directed in Public Law 105-62 and Public Law 105-245".

GORTON AMENDMENT NO. 677

Mr. DOMENICI (for Mr. GORTON) proposed an amendment to the bill, S. 1186, supra; as follows:

Strike line 2 and all thereafter, and insert the following:

SEC. 3 . LIMITING THE INCLUSION OF COSTS OF PROTECTION OF, MITIGATION OF DAMAGE TO, AND ENHANCEMENT OF FISH, WITHIN RATES CHARGED BY THE BONNEVILLE POWER ADMINISTRATION, TO THE RATE PERIOD IN WHICH THE COSTS ARE INCURRED.

Section 7 of the Pacific Northwest Electric Power Planning and Conservation Act (16 U.S.C. 839e) is amended by adding at the end the following:

"(n) LIMITING THE INCLUSION OF COSTS OF PROTECTION OF, MITIGATION OF DAMAGE TO, AND ENHANCEMENT OF FISH, WITHIN RATES CHARGED BY THE BONNEVILLE POWER ADMINISTRATION, TO THE RATE PERIOD IN WHICH THE COSTS ARE INCURRED.—Notwithstanding any other provision of this section, rates established by the Administrator, in accordance with established fish funding principles, under this section shall recover costs for protection, mitigation and enhancement of fish, whether under the Pacific Northwest Electric Power Planning and Conservation Act or any other act, not to exceed such amounts the Administrator forecasts will be expended during the period for which such rates are established."

DASCHLE AMENDMENTS NOS. 678-679

Mr. REID (for Mr. DASCHLE) proposed two amendments to the bill, S. 1186, supra; as follows:

AMENDMENT NO. 678

On page 13, between lines 15 and 16, insert the following:

SEC. 1 . CHEYENNE RIVER SIOUX TRIBE, LOWER BRULE SIOUX TRIBE, AND STATE OF SOUTH DAKOTA TERRESTRIAL WILDLIFE HABITAT RESTORATION.

(a) IN GENERAL.—The Secretary of the Army shall continue to fund wildlife habitat mitigation work for the Cheyenne River Sioux Tribe, Lower Brule Sioux Tribe, and State of South Dakota at levels previously funded through the Pick-Sloan operations and maintenance account.

(b) CONTRACTS.—With \$3,000,000 made available under the heading "CONSTRUCTION, GENERAL", the Secretary of the Army shall fund activities authorized under title VI of division C of Public Law 105-277 (112 Stat. 2681-660) through contracts with the Cheyenne River Sioux Tribe, Lower Brule Sioux Tribe, and State of South Dakota.

AMENDMENT NO. 679

On page 15, line 1, after "expended," insert "of which \$150,000 shall be available for the Lake Andes-Wagner/Marty II demonstration program authorized by the Lake Andes-Wagner/Marty II Act of 1992 (106 Stat. 4677)".

REID AMENDMENT NO. 680

Mr. REID proposed an amendment to the bill, S. 1186, supra; as follows:

On page 2, between line 20 and 21 insert the following after the colon: "Yellowstone River at Glendive, Montana Study, \$150,000; and".

DOMENICI AMENDMENT NO. 681

Mr. DOMENICI proposed an amendment to the bill, S. 1186, supra; as follows:

On page 3, line 14, strike "\$1,113,227,000" and insert "\$1,086,586,000".

JEFFORDS AMENDMENT NO. 682

Mr. JEFFORDS proposed an amendment to the motion to recommit proposed by him to the bill, S. 1186, supra; as follows:

On page 20, strike lines 21 through 24 and insert "\$791,233,000, of which \$821,000 shall be derived by transfer from the Geothermal Resources Development Fund and \$5,000,000 shall be derived by transfer from the United States Enrichment Corporation Fund, and of which \$75,000,000 shall be derived from accounts for which this Act makes funds available Department of Energy contractor travel expenses (of which not less than \$4,450,000 shall be available for solar building technology research, not less than \$82,135,000 shall be available for photovoltaic energy systems, not less than \$17,600,000 shall be available for concentrating solar systems, not less than \$37,700,000 shall be available for power systems in biomass/biofuels energy systems, not less than \$48,000,000 shall be available for transportation in biomass/biofuels energy systems (of which not less than \$1,500,000 shall be available for the Consortium for Plant Biotechnology Research), not less than \$42,265,000 shall be available for wind energy systems, not less than \$4,000,000 shall be available for the renewable energy production incentive program, not less than \$7,600,000 shall be available for support of solar programs, not less than \$5,100,000 shall be available for the international solar energy program, not less than \$5,000,000 shall be available for the National Renewable Energy Laboratory, not less than \$27,850,000 shall be available for geothermal technology development, not less than \$27,700,000 shall be available for hydrogen research, not less than \$6,400,000 shall be available for hydro-power research, not less than \$32,000,000 shall be available for high temperature superconducting research and development, not less than \$3,000,000 shall be available for energy storage systems, and not less than \$18,500,000 shall be available for direction of programs)."

LEGISLATIVE BRANCH APPROPRIATIONS

DODD AMENDMENT NO. 683

Mr. BENNETT (for Mr. DODD) proposed an amendment to the bill (S. 1206) making appropriations for the legislative branch excluding House items for fiscal year ending September 30, 2000, and for other purposes; as follows:

On page 38, insert between lines 21 and 22 the following:

SEC. 313. CREDITABLE SERVICE WITH CONGRESSIONAL CAMPAIGN COMMITTEES.

Section 8332(m)(1)(A) of title 5, United States Code, is amended to read as follows:

"(A) such employee has at least 4 years and 6 months of service on such committees as of December 12, 1980; and".

FEINGOLD AMENDMENT NO. 684

Mr. BENNETT (for Mr. FEINGOLD) proposed an amendment to the bill S. 1206, supra; as follows:

At the appropriate place in the bill, insert the following:

SEC. ____ Section 207(e) of title 18, United States Code, is amended—

(1) by striking paragraphs (1), (2), (3), and (4) and inserting the following:

"(1) MEMBERS OF CONGRESS AND ELECTED OFFICERS.—Any person who is a Member of Congress or an elected officer of either House of Congress and who, within 2 years after that person leaves office, knowingly makes, with the intent to influence, any communication to or appearance before any Member, officer, or employee of either House of Congress, or any employee of any other legislative office of Congress, on behalf of any other person (except the United States) in connection with any matter on which such former Member of Congress or elected officer seeks action by a Member, officer, or employee of either House of Congress, in his or her official capacity, shall be punished as provided in section 216 of this title.

"(2) CONGRESSIONAL EMPLOYEES.—(A) Any person who is an employee of the Senate or an employee of the House of Representatives who, within 2 years after termination of such employment, knowingly makes, with the intent to influence, any communication to or appearance before any person described under subparagraph (B), on behalf of any other person (except the United States) in connection with any matter on which such former employee seeks action by a Member, officer, or employee of either House of Congress, in his or her official capacity, shall be punished as provided in section 216 of this title.

"(B) The persons referred to under subparagraph (A) with respect to appearances or communications by a former employee are any Member, officer, or employee of the House of Congress in which such former employee served."

(2) in paragraph (6)—

(A) in subparagraph (A), by striking "paragraphs (2), (3), and (4)" and inserting "paragraph (2)"; and

(B) in subparagraph (B), by striking "paragraph (5)" and inserting "paragraph (3)";

(3) in paragraph (7)(G), by striking ", (2), (3), or (4)" and inserting "or (2)"; and

(4) by redesignating paragraphs (5), (6), and (7) as paragraphs (3), (4), and (5), respectively.

NOTICE OF HEARING

COMMITTEE ON ENERGY AND NATURAL RESOURCES

Mr. CRAIG. Mr. President, I would like to announce for the public that a hearing has been scheduled before the Subcommittee on Forests and Public Land Management of the Senate Committee on Energy and Natural Resources.

The hearing will take place Wednesday, June 23, 1999 at 2:15 p.m. in room SD-366 of the Dirksen Senate Office Building in Washington, DC.

The purpose of this hearing is to receive testimony on S. 503, the Spanish Peaks Wilderness Act of 1999; S. 953, the Terry Peaks Land Conveyance Act

106TH CONGRESS
1ST SESSION

S. RES. 127

To direct the Secretary of the Senate to request the return of certain papers.

IN THE SENATE OF THE UNITED STATES

JUNE 23, 1999

Mr. LOTT submitted the following resolution; which was considered and agreed
to

RESOLUTION

To direct the Secretary of the Senate to request the return
of certain papers.

1 *Resolved*, That the Secretary of the Senate is directed
2 to request the House of Representatives to return the offi-
3 cial papers on S. 331.

○

Mr. SANTORUM. Mr. President, I ask for the yeas and nays on the amendment.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

Mr. SANTORUM. Mr. President, I move to table amendment No. 2321 and ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

The PRESIDING OFFICER. The question is on agreeing to the motion to table the amendment No. 2321. The yeas and nays have been ordered.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. NICKLES. I announce that the Senator from Arizona (Mr. MCCAIN) is necessarily absent.

The result was announced—yeas 48, nays 51, as follows:

[Rollcall Vote No. 336 Leg.]

YEAS—48

| | | |
|-----------|------------|------------|
| Abraham | Fitzgerald | Mack |
| Allard | Frist | McConnell |
| Ashcroft | Gorton | Murkowski |
| Bennett | Gramm | Nickles |
| Bond | Grams | Reid |
| Breaux | Grassley | Roberts |
| Brownback | Gregg | Roth |
| Bunning | Hagel | Santorum |
| Burns | Hatch | Sessions |
| Cochran | Helms | Shelby |
| Coverdell | Hutchinson | Smith (NH) |
| Craig | Hutchison | Smith (OR) |
| Crapo | Inhofe | Thomas |
| DeWine | Kyl | Thompson |
| Domenici | Lott | Thurmond |
| Enzi | Lugar | Voinovich |

NAYS—51

| | | |
|----------|------------|-------------|
| Akaka | Edwards | Lieberman |
| Baucus | Feingold | Lincoln |
| Bayh | Feinstein | Mikulski |
| Biden | Graham | Moynihan |
| Bingaman | Harkin | Murray |
| Boxer | Hollings | Reed |
| Bryan | Inouye | Robb |
| Byrd | Jeffords | Rockefeller |
| Campbell | Johnson | Sarbanes |
| Chafee | Kennedy | Schumer |
| Cleland | Kerrey | Snowe |
| Collins | Kerry | Specter |
| Conrad | Kohl | Stevens |
| Daschle | Landrieu | Torricelli |
| Dodd | Lautenberg | Warner |
| Dorgan | Leahy | Wellstone |
| Durbin | Levin | Wyden |

NOT VOTING—1

McCain

The motion was rejected.

Mr. BYRD. Mr. President, earlier today I voted against tabling a sense of the Congress amendment proposed by Senator HARKIN regarding the Supreme Court's 1973 decision in the case of *Roe v. Wade*. Because that vote was, to the best of my recollection, the first time the Senate has directly and specifically addressed the issue of the Court's ruling, I wish to take a few moments to explain my position for the benefit of my constituents in West Virginia.

First, despite the fact that I supported the Harkin amendment, I reiterate that I am, as I always have been, personally opposed to abortion, with few exceptions—such as when the life of the woman would be endangered, or in cases of incest or rape, when promptly reported.

However, the reality of the situation is that the decision of the Supreme Court in *Roe v. Wade* is the law of the land. No matter what I think personally of the procedure in question, I accept the fact that the Court, in a 7-to-2 ruling, has definitively spoken on this matter. Accordingly, I felt it was appropriate to support the language of the Harkin amendment.

The PRESIDING OFFICER. The question is on agreeing to the amendment. The yeas and nays have been ordered.

The Senator from Pennsylvania.

Mr. SANTORUM. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mrs. HUTCHISON. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Pennsylvania.

Mr. SANTORUM. Mr. President, I ask unanimous consent there be a vote on the Harkin amendment at 2 o'clock.

The PRESIDING OFFICER. Is there objection? Without objection, it is so ordered.

WORK INCENTIVES IMPROVEMENT ACT OF 1999

Mr. SANTORUM. Mr. President, I ask unanimous consent the Senate now proceed to the consideration of H.R. 1180, the work incentives bill. I further ask consent that all after the enacting clause be stricken and the text of S. 331, as passed by the Senate, be inserted in lieu thereof. I further ask the bill be read a third time and passed, the motion to reconsider be laid upon the table, the Senate then insist upon its amendment, and request a conference with the House.

I further ask consent that nothing in this agreement shall alter the provisions of the consent agreement on June 14, 1999, relating to S. 331.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (H.R. 1180), as amended, was read the third time and passed.

(The text of S. 331 is printed in the CONGRESSIONAL RECORD of June 16, 1999.)

Mr. SANTORUM. Mr. President, I ask unanimous consent the Chair be authorized to appoint conferees on the part of the Senate.

The PRESIDING OFFICER. Is there objection?

Mr. KENNEDY. Reserving the right to object. I reserve the right to object, Mr. President.

The PRESIDING OFFICER. The Senator reserves the right to object.

Mr. KENNEDY. If the Senator from Pennsylvania is the acting leader, could he give us some indication of when we will go to conference on that legislation? It is the most important piece of legislation affecting the dis-

abled in this country. We have passed the legislation 99-0. It has been in the House of Representatives for several months. I hope at the time we are announcing we are going to appoint conferees, we would have at least some indication from the leadership as to when we are going to get to conference. I know millions of disabled Americans across this country will want to know what the intention of the leadership is on this legislation.

Can the Senator give us some idea?

Mr. SANTORUM. I say to the Senator from Massachusetts, first, I think this bill we are considering right now has a far greater impact on people with disabilities to come than this piece of legislation. But that being said, I am just doing this on behalf of the leader. I have not conferred with the leader as to what his plans are, so I am unable to answer the Senator's question.

Mr. KENNEDY. Further reserving the right to object, and I will not at this time, I think this legislation is of enormous importance. We are very hopeful we will get an early conference on it and we will get a favorable resolution. This has passed 99-0 in our body. It is a good bill that came out of the House. It is legislation we ought to complete before we adjourn.

I have no objection.

There being no objection, the Presiding Officer (Mr. HAGEL) appointed Mr. ROTH, Mr. LOTT, and Mr. MOYNIHAN conferees on the part of the Senate.

PARTIAL-BIRTH ABORTION BAN ACT OF 1999—Continued

Mr. BROWNBACK. Mr. President, I submit for the RECORD a speech given by Mother Teresa. I think it is quite germane to this debate we are having on partial-birth abortion. It is piercing in its view of the truth. It is piercing in its view of the issue of abortion. It is quite clear. I think it is full of great wisdom.

I ask unanimous consent it be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

THIS GIFT OF PEACE—SMILE AT EACH OTHER

(By Mother Teresa)

As we have gathered here together to thank God for the Nobel Peace Prize, I think it will be beautiful that we pray the prayer of St. Francis of Assisi which always surprises me very much—we pray this prayer every day after Holy Communion, because it is very fitting for each one of us, and I always wonder that 4-500 years ago as St. Francis of Assisi composed this prayer that they had the same difficulties that we have today, as we compose this prayer that fits very nicely for us also. I think some of you already have got it—so we will pray together.

Let us thank God for the opportunity that we all have together today, for this gift of peace that reminds us that we have been created to live that peace, and Jesus became man to bring that good news to the poor. He being God became man in all things like us except sin, and he proclaimed very clearly that he had come to give the good news. The

106TH CONGRESS
1ST SESSION

S. 331

AN ACT

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Work Incentives Improvement Act of 1999”.

1 (b) TABLE OF CONTENTS.—The table of contents of
 2 this Act is as follows:

- Sec. 1. Short title; table of contents.
 Sec. 2. Findings and purposes.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

- Sec. 101. Expanding State options under the medicaid program for workers with disabilities.
 Sec. 102. Continuation of medicare coverage for working individuals with disabilities.
 Sec. 103. Grants to develop and establish State infrastructures to support working individuals with disabilities.
 Sec. 104. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.
 Sec. 105. Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

- Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

- Sec. 211. Work activity standard as a basis for review of an individual's disabled status.
 Sec. 212. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

- Sec. 221. Work incentives outreach program.
 Sec. 222. State grants for work incentives assistance to disabled beneficiaries.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

- Sec. 301. Permanent extension of disability insurance program demonstration project authority.
 Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.
 Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

- Sec. 401. Technical amendments relating to drug addicts and alcoholics.
 Sec. 402. Treatment of prisoners.
 Sec. 403. Revocation by members of the clergy of exemption from Social Security coverage.
 Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
 Sec. 405. Authorization for State to permit annual wage reports.

1 **SEC. 2. FINDINGS AND PURPOSES.**

2 (a) FINDINGS.—Congress makes the following find-
3 ings:

4 (1) Health care is important to all Americans.

5 (2) Health care is particularly important to in-
6 dividuals with disabilities and special health care
7 needs who often cannot afford the insurance avail-
8 able to them through the private market, are unin-
9 surable by the plans available in the private sector,
10 and are at great risk of incurring very high and eco-
11 nomically devastating health care costs.

12 (3) Americans with significant disabilities often
13 are unable to obtain health care insurance that pro-
14 vides coverage of the services and supports that en-
15 able them to live independently and enter or rejoin
16 the workforce. Personal assistance services (such as
17 attendant services, personal assistance with trans-
18 portation to and from work, reader services, job
19 coaches, and related assistance) remove many of the
20 barriers between significant disability and work.
21 Coverage for such services, as well as for prescrip-
22 tion drugs, durable medical equipment, and basic
23 health care are powerful and proven tools for indi-
24 viduals with significant disabilities to obtain and re-
25 tain employment.

1 (4) For individuals with disabilities, the fear of
2 losing health care and related services is one of the
3 greatest barriers keeping the individuals from maxi-
4 mizing their employment, earning potential, and
5 independence.

6 (5) Individuals with disabilities who are bene-
7 ficiaries under title II or XVI of the Social Security
8 Act (42 U.S.C. 401 et seq., 1381 et seq.) risk losing
9 medicare or medicaid coverage that is linked to their
10 cash benefits, a risk that is an equal, or greater,
11 work disincentive than the loss of cash benefits asso-
12 ciated with working.

13 (6) Currently, less than ½ of 1 percent of so-
14 cial security disability insurance and supplemental
15 security income beneficiaries cease to receive benefits
16 as a result of employment.

17 (7) Beneficiaries have cited the lack of adequate
18 employment training and placement services as an
19 additional barrier to employment.

20 (8) If an additional ½ of 1 percent of the cur-
21 rent social security disability insurance (DI) and
22 supplemental security income (SSI) recipients were
23 to cease receiving benefits as a result of employ-
24 ment, the savings to the Social Security Trust

1 Funds in cash assistance would total
2 \$3,500,000,000 over the worklife of the individuals.

3 (b) PURPOSES.—The purposes of this Act are as fol-
4 lows:

5 (1) To provide health care and employment
6 preparation and placement services to individuals
7 with disabilities that will enable those individuals to
8 reduce their dependency on cash benefit programs.

9 (2) To encourage States to adopt the option of
10 allowing individuals with disabilities to purchase
11 medicaid coverage that is necessary to enable such
12 individuals to maintain employment.

13 (3) To provide individuals with disabilities the
14 option of maintaining medicare coverage while work-
15 ing.

16 (4) To establish a return to work ticket pro-
17 gram that will allow individuals with disabilities to
18 seek the services necessary to obtain and retain em-
19 ployment and reduce their dependency on cash ben-
20 efit programs.

1 **TITLE I—EXPANDED AVAIL-**
 2 **ABILITY OF HEALTH CARE**
 3 **SERVICES**

4 **SEC. 101. EXPANDING STATE OPTIONS UNDER THE MED-**
 5 **ICAID PROGRAM FOR WORKERS WITH DIS-**
 6 **ABILITIES.**

7 (a) IN GENERAL.—

8 (1) STATE OPTION TO ELIMINATE INCOME, AS-
 9 SETS, AND RESOURCE LIMITATIONS FOR WORKERS
 10 WITH DISABILITIES BUYING INTO MEDICAID.—Sec-
 11 tion 1902(a)(10)(A)(ii) of the Social Security Act
 12 (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

13 (A) in subclause (XIII), by striking “or”
 14 at the end;

15 (B) in subclause (XIV), by adding “or” at
 16 the end; and

17 (C) by adding at the end the following:

18 “(XV) who, but for earnings in
 19 excess of the limit established under
 20 section 1905(q)(2)(B), would be con-
 21 sidered to be receiving supplemental
 22 security income, who is at least 16,
 23 but less than 65, years of age, and
 24 whose assets, resources, and earned or
 25 unearned income (or both) do not ex-

1 ceed such limitations (if any) as the
2 State may establish;”.

3 (2) STATE OPTION TO PROVIDE OPPORTUNITY
4 FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY
5 IMPROVED DISABILITY TO BUY INTO MEDICAID.—

6 (A) ELIGIBILITY.—Section 1902(a)(10)
7 (A)(ii) of the Social Security Act (42 U.S.C.
8 1396a(a)(10)(A)(ii)), as amended by paragraph
9 (1), is amended—

10 (i) in subclause (XIV), by striking
11 “or” at the end;

12 (ii) in subclause (XV), by adding “or”
13 at the end; and

14 (iii) by adding at the end the fol-
15 lowing:

16 “(XVI) who are employed indi-
17 viduals with a medically improved dis-
18 ability described in section 1905(v)(1)
19 and whose assets, resources, and
20 earned or unearned income (or both)
21 do not exceed such limitations (if any)
22 as the State may establish, but only if
23 the State provides medical assistance
24 to individuals described in subclause
25 (XV);”.

1 (B) DEFINITION OF EMPLOYED INDIVID-
2 UALS WITH A MEDICALLY IMPROVED DIS-
3 ABILITY.—Section 1905 of the Social Security
4 Act (42 U.S.C. 1396d) is amended by adding at
5 the end the following:

6 “(v)(1) The term ‘employed individual with a medi-
7 cally improved disability’ means an individual who—

8 “(A) is at least 16, but less than 65, years of
9 age;

10 “(B) is employed (as defined in paragraph (2));

11 “(C) ceases to be eligible for medical assistance
12 under section 1902(a)(10)(A)(ii)(XV) because the
13 individual, by reason of medical improvement, is de-
14 termined at the time of a regularly scheduled con-
15 tinuing disability review to no longer be eligible for
16 benefits under section 223(d) or 1614(a)(3); and

17 “(D) continues to have a severe medically deter-
18 minable impairment, as determined under regula-
19 tions of the Secretary.

20 “(2) For purposes of paragraph (1), an individual is
21 considered to be ‘employed’ if the individual—

22 “(A) is earning at least the applicable minimum
23 wage requirement under section 6 of the Fair Labor
24 Standards Act (29 U.S.C. 206) and working at least
25 40 hours per month; or

1 “(B) is engaged in a work effort that meets
2 substantial and reasonable threshold criteria for
3 hours of work, wages, or other measures, as defined
4 by the State and approved by the Secretary.”.

5 (C) CONFORMING AMENDMENT.—Section
6 1905(a) of such Act (42 U.S.C. 1396d(a)) is
7 amended in the matter preceding paragraph
8 (1)—

9 (i) in clause (x), by striking “or” at
10 the end;

11 (ii) in clause (xi), by adding “or” at
12 the end; and

13 (iii) by inserting after clause (xi), the
14 following:

15 “(xii) employed individuals with a medically im-
16 proved disability (as defined in subsection (v)),”.

17 (3) STATE AUTHORITY TO IMPOSE INCOME-RE-
18 LATED PREMIUMS AND COST-SHARING.—Section
19 1916 of such Act (42 U.S.C. 1396o) is amended—

20 (A) in subsection (a), by striking “The
21 State plan” and inserting “Subject to sub-
22 section (g), the State plan”; and

23 (B) by adding at the end the following:

1 “(g) With respect to individuals provided medical as-
2 sistance only under subclause (XV) or (XVI) of section
3 1902(a)(10)(A)(ii)—

4 “(1) a State may (in a uniform manner for in-
5 dividuals described in either such subclause)—

6 “(A) require such individuals to pay pre-
7 miums or other cost-sharing charges set on a
8 sliding scale based on income that the State
9 may determine; and

10 “(B) require payment of 100 percent of
11 such premiums for such year in the case of
12 such an individual who has income for a year
13 that exceeds 250 percent of the income official
14 poverty line (referred to in subsection (c)(1))
15 applicable to a family of the size involved, ex-
16 cept that in the case of such an individual who
17 has income for a year that does not exceed 450
18 percent of such poverty line, such requirement
19 may only apply to the extent such premiums do
20 not exceed 7.5 percent of such income; and

21 “(2) such State shall require payment of 100
22 percent of such premiums for a year by such an in-
23 dividual whose adjusted gross income (as defined in
24 section 62 of the Internal Revenue Code of 1986)
25 for such year exceeds \$75,000, except that a State

1 may choose to subsidize such premiums by using
2 State funds which may not be federally matched
3 under this title.

4 In the case of any calendar year beginning after 2000,
5 the dollar amount specified in paragraph (2) shall be in-
6 creased in accordance with the provisions of section
7 215(i)(2)(A)(ii).”.

8 (4) PROHIBITION AGAINST SUPPLANTATION OF
9 STATE FUNDS AND STATE FAILURE TO MAINTAIN
10 EFFORT.—Section 1903(i) of such Act (42 U.S.C.
11 1396b(i)) is amended—

12 (A) by striking the period at the end of
13 paragraph (18) and inserting “; or”; and

14 (B) by inserting after such paragraph the
15 following:

16 “(19) with respect to amounts expended for
17 medical assistance provided to an individual de-
18 scribed in subclause (XV) or (XVI) of section
19 1902(a)(10)(A)(ii) for a fiscal year unless the State
20 demonstrates to the satisfaction of the Secretary
21 that the level of State funds expended for such fiscal
22 year for programs to enable working individuals with
23 disabilities to work (other than for such medical as-
24 sistance) is not less than the level expended for such
25 programs during the most recent State fiscal year

1 ending before the date of enactment of this para-
2 graph.”.

3 (b) CONFORMING AMENDMENTS.—

4 (1) Section 1903(f)(4) of the Social Security
5 Act (42 U.S.C. 1396b(f)(4) is amended in the mat-
6 ter preceding subparagraph (A) by inserting
7 “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI)”
8 after “1902(a)(10)(A)(ii)(X),”.

9 (2) Section 1903(f)(4) of such Act, as amended
10 by paragraph (1), is amended by inserting
11 “1902(a)(10)(A)(ii)(XIII),” before
12 “1902(a)(10)(A)(ii)(XV)”.

13 (c) GAO REPORT.—Not later than 3 years after the
14 date of the enactment of this Act, the Comptroller General
15 of the United States shall submit a report to Congress
16 regarding the amendments made by this section that
17 examines—

18 (1) the extent to which higher health care costs
19 for individuals with disabilities at higher income lev-
20 els deter employment or progress in employment;

21 (2) whether such individuals have health insur-
22 ance coverage or could benefit from the State option
23 established under such amendments to provide a
24 medicaid buy-in; and

1 (3) how the States are exercising such option,
2 including—

3 (A) how such States are exercising the
4 flexibility afforded them with regard to income
5 disregards;

6 (B) what income and premium levels have
7 been set;

8 (C) the degree to which States are sub-
9 subsidizing premiums above the dollar amount
10 specified in section 1916(g)(2) of the Social Se-
11 curity Act (42 U.S.C. 1396o(g)(2)); and

12 (D) the extent to which there exists any
13 crowd-out effect.

14 (d) EFFECTIVE DATE.—

15 (1) IN GENERAL.—Except as provided in para-
16 graph (2), the amendments made by this section
17 apply to medical assistance for items and services
18 furnished on or after October 1, 1999.

19 (2) RETROACTIVITY OF CONFORMING AMEND-
20 MENT.—The amendment made by subsection (b)(2)
21 takes effect as if included in the enactment of the
22 Balanced Budget Act of 1997.

23 **SEC. 102. CONTINUATION OF MEDICARE COVERAGE FOR**
24 **WORKING INDIVIDUALS WITH DISABILITIES.**

25 (a) CONTINUATION OF COVERAGE.—

1 (1) IN GENERAL.—Section 226 of the Social
2 Security Act (42 U.S.C. 426) is amended—

3 (A) in the third sentence of subsection (b),
4 by inserting “, except as provided in subsection
5 (j)” after “but not in excess of 24 such
6 months”; and

7 (B) by adding at the end the following:

8 “(j) The 24-month limitation on deemed entitlement
9 under the third sentence of subsection (b) shall not
10 apply—

11 “(1) for months occurring during the 6-year pe-
12 riod beginning with the first month that begins after
13 the date of enactment of this subsection; and

14 “(2) for subsequent months, in the case of an
15 individual who was entitled to benefits under sub-
16 section (b) as of the last month of such 6-year pe-
17 riod and would continue (but for such 24-month lim-
18 itation) to be so entitled.”.

19 (2) CONFORMING AMENDMENT.—Section
20 1818A(a)(2)(C) of the Social Security Act (42
21 U.S.C. 1395i-2a(a)(2)(C)) is amended—

22 (A) by striking “solely”; and

23 (B) by inserting “or the expiration of the
24 last month of the 6-year period described in
25 section 226(j)” before the semicolon.

1 (b) GAO REPORT.—Not later than 4 years after the
2 date of the enactment of this Act, the Comptroller General
3 of the United States shall submit a report to Congress
4 that—

5 (1) examines the effectiveness and cost of sub-
6 section (j) of section 226 of the Social Security Act
7 (42 U.S.C. 426);

8 (2) examines the necessity and effectiveness of
9 providing the continuation of medicare coverage
10 under that subsection to individuals whose annual
11 income exceeds the contribution and benefit base (as
12 determined under section 230 of the Social Security
13 Act);

14 (3) examines the viability of providing the con-
15 tinuation of medicare coverage under that subsection
16 based on a sliding scale premium for individuals
17 whose annual income exceeds such contribution and
18 benefit base;

19 (4) examines the interrelation between the use
20 of the continuation of medicare coverage under that
21 subsection and the use of private health insurance
22 coverage by individuals during the 6-year period;
23 and

1 (5) recommends whether that subsection should
2 continue to be applied beyond the 6-year period de-
3 scribed in the subsection.

4 (c) EFFECTIVE DATE.—The amendments made by
5 subsection (a) apply to months beginning with the first
6 month that begins after the date of the enactment of this
7 Act.

8 (d) TREATMENT OF CERTAIN INDIVIDUALS.—An in-
9 dividual enrolled under section 1818A of the Social Secu-
10 rity Act (42 U.S.C. 1395i–2a) shall be treated with re-
11 spect to premium payment obligations under such section
12 as though the individual had continued to be entitled to
13 benefits under section 226(b) of such Act for—

14 (1) months described in section 226(j)(1) of
15 such Act (42 U.S.C. 426(j)(1)) (as added by sub-
16 section (a)); and

17 (2) subsequent months, in the case of an indi-
18 vidual who was so enrolled as of the last month de-
19 scribed in section 226(j)(2) of such Act (42 U.S.C.
20 426(j)(2)) (as so added).

21 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
22 **FRASTRUCTURES TO SUPPORT WORKING IN-**
23 **DIVIDUALS WITH DISABILITIES.**

24 (a) ESTABLISHMENT.—

1 (1) IN GENERAL.—The Secretary of Health and
2 Human Services (in this section referred to as the
3 “Secretary”) shall award grants described in sub-
4 section (b) to States to support the design, establish-
5 ment, and operation of State infrastructures that
6 provide items and services to support working indi-
7 viduals with disabilities.

8 (2) APPLICATION.—In order to be eligible for
9 an award of a grant under this section, a State shall
10 submit an application to the Secretary at such time,
11 in such manner, and containing such information as
12 the Secretary shall require.

13 (3) DEFINITION OF STATE.—In this section,
14 the term “State” means each of the 50 States, the
15 District of Columbia, Puerto Rico, Guam, the
16 United States Virgin Islands, American Samoa, and
17 the Commonwealth of the Northern Mariana Is-
18 lands.

19 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
20 REACH.—

21 (1) IN GENERAL.—Out of the funds appro-
22 priated under subsection (e), the Secretary shall
23 award grants to States to—

1 (A) support the establishment, implemen-
2 tation, and operation of the State infrastruc-
3 tures described in subsection (a); and

4 (B) conduct outreach campaigns regarding
5 the existence of such infrastructures.

6 (2) ELIGIBILITY FOR GRANTS.—

7 (A) IN GENERAL.—No State may receive a
8 grant under this subsection unless the State—

9 (i) has an approved amendment to the
10 State plan under title XIX of the Social
11 Security Act (42 U.S.C. 1396 et seq.) that
12 provides medical assistance under such
13 plan to individuals described in section
14 1902(a)(10)(A)(ii)(XV) of the Social Secu-
15 rity Act (42 U.S.C.
16 1396a(a)(10)(A)(ii)(XV)); and

17 (ii) demonstrates to the satisfaction of
18 the Secretary that the State makes per-
19 sonal assistance services available under
20 the State plan under title XIX of the So-
21 cial Security Act (42 U.S.C. 1396 et seq.)
22 to the extent necessary to enable individ-
23 uals described in clause (i) to remain em-
24 ployed (as determined under section

1 1905(v)(2) of the Social Security Act (42
2 U.S.C. 1396d(v)(2))).

3 (B) DEFINITION OF PERSONAL ASSIST-
4 ANCE SERVICES.—In this paragraph, the term
5 “personal assistance services” means a range of
6 services, provided by 1 or more persons, de-
7 signed to assist an individual with a disability
8 to perform daily activities on and off the job
9 that the individual would typically perform if
10 the individual did not have a disability. Such
11 services shall be designed to increase the indi-
12 vidual’s control in life and ability to perform ev-
13 eryday activities on or off the job.

14 (3) DETERMINATION OF AWARDS.—

15 (A) IN GENERAL.—Subject to subpara-
16 graph (B), the Secretary shall determine a for-
17 mula for awarding grants to States under this
18 section that provides special consideration to
19 States that provide medical assistance under
20 title XIX of the Social Security Act to individ-
21 uals described in section
22 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
23 1396a(a)(10)(A)(ii)(XVI)).

24 (B) AWARD LIMITS.—

25 (i) MINIMUM AWARDS.—

1 (I) IN GENERAL.—Subject to
2 subclause (II), no State with an ap-
3 proved application under this section
4 shall receive a grant for a fiscal year
5 that is less than \$500,000.

6 (II) PRO RATA REDUCTIONS.—If
7 the funds appropriated under sub-
8 section (e) for a fiscal year are not
9 sufficient to pay each State with an
10 application approved under this sec-
11 tion the minimum amount described
12 in subclause (I), the Secretary shall
13 pay each such State an amount equal
14 to the pro rata share of the amount
15 made available.

16 (ii) MAXIMUM AWARDS.—No State
17 with an application that has been approved
18 under this section shall receive a grant for
19 a fiscal year that exceeds 15 percent of the
20 total expenditures by the State (including
21 the reimbursed Federal share of such ex-
22 penditures) for medical assistance for indi-
23 viduals eligible under subclause (XV) and
24 (XVI) of section 1902(a)(10)(A)(ii) of the
25 Social Security Act (42 U.S.C.

1 1396a(a)(10)(A)(ii)), as estimated by the
2 State and approved by the Secretary.

3 (c) AVAILABILITY OF FUNDS.—

4 (1) FUNDS AWARDED TO STATES.—Funds
5 awarded to a State under a grant made under this
6 section for a fiscal year shall remain available until
7 expended.

8 (2) FUNDS NOT AWARDED TO STATES.—Funds
9 not awarded to States in the fiscal year for which
10 they are appropriated shall remain available in suc-
11 ceeding fiscal years for awarding by the Secretary.

12 (d) ANNUAL REPORT.—A State that is awarded a
13 grant under this section shall submit an annual report to
14 the Secretary on the use of funds provided under the
15 grant. Each report shall include the percentage increase
16 in the number of title II disability beneficiaries, as defined
17 in section 1148(k)(3) of the Social Security Act (as
18 amended by section 201) in the State, and title XVI dis-
19 ability beneficiaries, as defined in section 1148(k)(4) of
20 the Social Security Act (as so amended) in the State who
21 return to work.

22 (e) APPROPRIATION.—

23 (1) IN GENERAL.—Out of any funds in the
24 Treasury not otherwise appropriated, there is appro-
25 priated to make grants under this section—

1 (A) for fiscal year 2000, \$20,000,000;
2 (B) for fiscal year 2001, \$25,000,000;
3 (C) for fiscal year 2002, \$30,000,000;
4 (D) for fiscal year 2003, \$35,000,000;
5 (E) for fiscal year 2004, \$40,000,000; and
6 (F) for each of fiscal years 2005 through
7 2010, the amount appropriated for the pre-
8 ceeding fiscal year increased by the percentage
9 increase (if any) in the Consumer Price Index
10 for All Urban Consumers (United States city
11 average) for the preceding fiscal year.

12 (2) BUDGET AUTHORITY.—This subsection con-
13 stitutes budget authority in advance of appropria-
14 tions Acts and represents the obligation of the Fed-
15 eral Government to provide for the payment of the
16 amounts appropriated under paragraph (1).

17 (f) RECOMMENDATION.—Not later than October 1,
18 2009, the Secretary, in consultation with the Work Incen-
19 tives Advisory Panel established under section 201(f),
20 shall submit a recommendation to the Committee on Com-
21 merce of the House of Representatives and the Committee
22 on Finance of the Senate regarding whether the grant pro-
23 gram established under this section should be continued
24 after fiscal year 2010.

1 **SEC. 104. DEMONSTRATION OF COVERAGE UNDER THE**
 2 **MEDICAID PROGRAM OF WORKERS WITH PO-**
 3 **TENTIALLY SEVERE DISABILITIES.**

4 (a) STATE APPLICATION.—A State may apply to the
 5 Secretary of Health and Human Services (in this section
 6 referred to as the “Secretary”) for approval of a dem-
 7 onstration project (in this section referred to as a “dem-
 8 onstration project”) under which up to a specified max-
 9 imum number of individuals who are workers with a po-
 10 tentially severe disability (as defined in subsection (b)(1))
 11 are provided medical assistance equal to that provided
 12 under section 1905(a) of the Social Security Act (42
 13 U.S.C. 1396d(a)) to individuals described in section
 14 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
 15 1396a(a)(10)(A)(ii)(XV)).

16 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
 17 ABILITY DEFINED.—For purposes of this section—

18 (1) IN GENERAL.—The term “worker with a
 19 potentially severe disability” means, with respect to
 20 a demonstration project, an individual who—

21 (A) is at least 16, but less than 65, years
 22 of age;

23 (B) has a specific physical or mental im-
 24 pairment that, as defined by the State under
 25 the demonstration project, is reasonably ex-
 26 pected, but for the receipt of items and services

1 described in section 1905(a) of the Social Secu-
2 rity Act (42 U.S.C. 1396d(a)), to become blind
3 or disabled (as defined under section 1614(a) of
4 the Social Security Act (42 U.S.C. 1382c(a)));
5 and

6 (C) is employed (as defined in paragraph
7 (2)).

8 (2) DEFINITION OF EMPLOYED.—An individual
9 is considered to be “employed” if the individual—

10 (A) is earning at least the applicable min-
11 imum wage requirement under section 6 of the
12 Fair Labor Standards Act (29 U.S.C. 206) and
13 working at least 40 hours per month; or

14 (B) is engaged in a work effort that meets
15 substantial and reasonable threshold criteria for
16 hours of work, wages, or other measures, as de-
17 fined under the demonstration project and ap-
18 proved by the Secretary.

19 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

20 (1) IN GENERAL.—Subject to paragraph (3),
21 the Secretary shall approve applications under sub-
22 section (a) that meet the requirements of paragraph
23 (2) and such additional terms and conditions as the
24 Secretary may require. The Secretary may waive the
25 requirement of section 1902(a)(1) of the Social Se-

1 security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
2 State demonstrations.

3 (2) TERMS AND CONDITIONS OF DEMONSTRA-
4 TION PROJECTS.—The Secretary may not approve a
5 demonstration project under this section unless the
6 State provides assurances satisfactory to the Sec-
7 retary that the following conditions are or will be
8 met:

9 (A) ELECTION OF OPTIONAL CATEGORY.—

10 The State has elected to provide coverage under
11 its plan under title XIX of the Social Security
12 Act of individuals described in section
13 1902(a)(10)(A)(ii)(XV) of the Social Security
14 Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

15 (B) MAINTENANCE OF STATE EFFORT.—

16 Federal funds paid to a State pursuant to this
17 section must be used to supplement, but not
18 supplant, the level of State funds expended for
19 workers with potentially severe disabilities
20 under programs in effect for such individuals at
21 the time the demonstration project is approved
22 under this section.

23 (C) INDEPENDENT EVALUATION.—The

24 State provides for an independent evaluation of
25 the project.

1 (3) LIMITATIONS ON FEDERAL FUNDING.—

2 (A) APPROPRIATION.—

3 (i) IN GENERAL.—Out of any funds in
4 the Treasury not otherwise appropriated,
5 there is appropriated to carry out this
6 section—

7 (I) for fiscal year 2000,
8 \$72,000,000;

9 (II) for fiscal year 2001,
10 \$74,000,000;

11 (III) for fiscal year 2002,
12 \$78,000,000; and

13 (IV) for fiscal year 2003,
14 \$81,000,000.

15 (ii) BUDGET AUTHORITY.—Clause (i)
16 constitutes budget authority in advance of
17 appropriations Acts and represents the ob-
18 ligation of the Federal Government to pro-
19 vide for the payment of the amounts ap-
20 propriated under clause (i).

21 (B) LIMITATION ON PAYMENTS.—In no
22 case may—

23 (i) except as provided in clause (ii),
24 the aggregate amount of payments made

1 by the Secretary to States under this sec-
2 tion exceed \$300,000,000;

3 (ii) the aggregate amount of payments
4 made by the Secretary to States for ad-
5 ministrative expenses relating to annual re-
6 ports required under subsection (d) exceed
7 \$5,000,000; or

8 (iii) payments be provided by the Sec-
9 retary for a fiscal year after fiscal year
10 2005.

11 (C) FUNDS ALLOCATED TO STATES.—The
12 Secretary shall allocate funds to States based
13 on their applications and the availability of
14 funds. Funds allocated to a State under a grant
15 made under this section for a fiscal year shall
16 remain available until expended.

17 (D) FUNDS NOT ALLOCATED TO STATES.—
18 Funds not allocated to States in the fiscal year
19 for which they are appropriated shall remain
20 available in succeeding fiscal years for alloca-
21 tion by the Secretary using the allocation for-
22 mula established under this section.

23 (E) PAYMENTS TO STATES.—The Sec-
24 retary shall pay to each State with a dem-
25 onstration project approved under this section,

1 from its allocation under subparagraph (C), an
2 amount for each quarter equal to the Federal
3 medical assistance percentage (as defined in
4 section 1905(b) of the Social Security Act (42
5 U.S.C. 1395d(b)) of expenditures in the quarter
6 for medical assistance provided to workers with
7 a potentially severe disability.

8 (d) ANNUAL REPORT.—A State with a demonstration
9 project approved under this section shall submit an annual
10 report to the Secretary on the use of funds provided under
11 the grant. Each report shall include enrollment and finan-
12 cial statistics on—

13 (1) the total population of workers with poten-
14 tially severe disabilities served by the demonstration
15 project; and

16 (2) each population of such workers with a spe-
17 cific physical or mental impairment described in sub-
18 section (b)(1)(B) served by such project.

19 (e) RECOMMENDATION.—Not later than October 1,
20 2002, the Secretary shall submit a recommendation to the
21 Committee on Commerce of the House of Representatives
22 and the Committee on Finance of the Senate regarding
23 whether the demonstration project established under this
24 section should be continued after fiscal year 2003.

1 (f) STATE DEFINED.—In this section, the term
 2 “State” has the meaning given such term for purposes of
 3 title XIX of the Social Security Act (42 U.S.C. 1396 et
 4 seq.).

5 **SEC. 105. ELECTION BY DISABLED BENEFICIARIES TO SUS-**
 6 **PEND MEDIGAP INSURANCE WHEN COVERED**
 7 **UNDER A GROUP HEALTH PLAN.**

8 (a) IN GENERAL.—Section 1882(q) of the Social Se-
 9 curity Act (42 U.S.C. 1395ss(q)) is amended—

10 (1) in paragraph (5)(C), by inserting “or para-
 11 graph (6)” after “this paragraph”; and

12 (2) by adding at the end the following new
 13 paragraph:

14 “(6) Each medicare supplemental policy shall
 15 provide that benefits and premiums under the policy
 16 shall be suspended at the request of the policyholder
 17 if the policyholder is entitled to benefits under sec-
 18 tion 226(b) and is covered under a group health
 19 plan (as defined in section 1862(b)(1)(A)(v)). If
 20 such suspension occurs and if the policyholder or
 21 certificate holder loses coverage under the group
 22 health plan, such policy shall be automatically re-
 23 instituted (effective as of the date of such loss of
 24 coverage) under terms described in subsection
 25 (n)(6)(A)(ii) as of the loss of such coverage if the

1 policyholder provides notice of loss of such coverage
2 within 90 days after the date of such loss.”.

3 (b) EFFECTIVE DATE.—The amendments made by
4 subsection (a) apply with respect to requests made after
5 the date of the enactment of this Act.

6 **TITLE II—TICKET TO WORK AND**
7 **SELF-SUFFICIENCY AND RE-**
8 **LATED PROVISIONS**

9 **Subtitle A—Ticket to Work and**
10 **Self-Sufficiency**

11 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
12 **SELF-SUFFICIENCY PROGRAM.**

13 (a) IN GENERAL.—Part A of title XI of the Social
14 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
15 ing after section 1147 (as added by section 8 of the Non-
16 citizen Benefit Clarification and Other Technical Amend-
17 ments Act of 1998 (Public Law 105–306; 112 Stat.
18 2928)) the following:

19 “TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

20 “SEC. 1148. (a) IN GENERAL.—The Commissioner
21 shall establish a Ticket to Work and Self-Sufficiency Pro-
22 gram, under which a disabled beneficiary may use a ticket
23 to work and self-sufficiency issued by the Commissioner
24 in accordance with this section to obtain employment serv-
25 ices, vocational rehabilitation services, or other support
26 services from an employment network which is of the bene-

1 ficiary's choice and which is willing to provide such serv-
2 ices to the beneficiary.

3 “(b) TICKET SYSTEM.—

4 “(1) DISTRIBUTION OF TICKETS.—The Com-
5 missioner may issue a ticket to work and self-suffi-
6 ciency to disabled beneficiaries for participation in
7 the Program.

8 “(2) ASSIGNMENT OF TICKETS.—A disabled
9 beneficiary holding a ticket to work and self-suffi-
10 ciency may assign the ticket to any employment net-
11 work of the beneficiary's choice which is serving
12 under the Program and is willing to accept the as-
13 signment.

14 “(3) TICKET TERMS.—A ticket issued under
15 paragraph (1) shall consist of a document which evi-
16 dences the Commissioner's agreement to pay (as
17 provided in paragraph (4)) an employment network,
18 which is serving under the Program and to which
19 such ticket is assigned by the beneficiary, for such
20 employment services, vocational rehabilitation serv-
21 ices, and other support services as the employment
22 network may provide to the beneficiary.

23 “(4) PAYMENTS TO EMPLOYMENT NET-
24 WORKS.—The Commissioner shall pay an employ-
25 ment network under the Program in accordance with

1 the outcome payment system under subsection
2 (h)(2) or under the outcome-milestone payment sys-
3 tem under subsection (h)(3) (whichever is elected
4 pursuant to subsection (h)(1)). An employment net-
5 work may not request or receive compensation for
6 such services from the beneficiary.

7 “(c) STATE PARTICIPATION.—

8 “(1) IN GENERAL.—Each State agency admin-
9 istering or supervising the administration of the
10 State plan approved under title I of the Rehabilita-
11 tion Act of 1973 may elect to participate in the Pro-
12 gram as an employment network with respect to a
13 disabled beneficiary. If the State agency does elect
14 to participate in the Program, the State agency also
15 shall elect to be paid under the outcome payment
16 system or the outcome-milestone payment system in
17 accordance with subsection (h)(1). With respect to a
18 disabled beneficiary that the State agency does not
19 elect to have participate in the Program, the State
20 agency shall be paid for services provided to that
21 beneficiary under the system for payment applicable
22 under section 222(d) and subsections (d) and (e) of
23 section 1615. The Commissioner shall provide for
24 periodic opportunities for exercising such elections
25 (and revocations).

1 “(2) EFFECT OF PARTICIPATION BY STATE
2 AGENCY.—

3 “(A) STATE AGENCIES PARTICIPATING.—

4 In any case in which a State agency described
5 in paragraph (1) elects under that paragraph to
6 participate in the Program, the employment
7 services, vocational rehabilitation services, and
8 other support services which, upon assignment
9 of tickets to work and self-sufficiency, are pro-
10 vided to disabled beneficiaries by the State
11 agency acting as an employment network shall
12 be governed by plans for vocational rehabilita-
13 tion services approved under title I of the Reha-
14 bilitation Act of 1973.

15 “(B) STATE AGENCIES ADMINISTERING
16 MATERNAL AND CHILD HEALTH SERVICES PRO-
17 GRAMS.—Subparagraph (A) shall not apply
18 with respect to any State agency administering
19 a program under title V of this Act.

20 “(3) SPECIAL REQUIREMENTS APPLICABLE TO
21 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

22 “(A) IN GENERAL.—In any case in which
23 an employment network has been assigned a
24 ticket to work and self-sufficiency by a disabled
25 beneficiary, no State agency shall be deemed re-

1 required, under this section, title I of the Work-
2 force Investment Act of 1998, title I of the Re-
3 habilitation Act of 1973, or a State plan ap-
4 proved under such title, to accept any referral
5 of such disabled beneficiary from such employ-
6 ment network unless such employment network
7 and such State agency have entered into a writ-
8 ten agreement that meets the requirements of
9 subparagraph (B). Any beneficiary who has as-
10 signed a ticket to work and self-sufficiency to
11 an employment network that has not entered
12 into such a written agreement with such a
13 State agency may not access vocational rehabili-
14 tation services under title I of the Rehabilita-
15 tion Act of 1973 until such time as the bene-
16 ficiary is reassigned to a State vocational reha-
17 bilitation agency by the Program Manager.

18 “(B) TERMS OF AGREEMENT.—An agree-
19 ment required by subparagraph (A) shall speci-
20 fy, in accordance with regulations prescribed
21 pursuant to subparagraph (C)—

22 “(i) the extent (if any) to which the
23 employment network holding the ticket will
24 provide to the State agency—

1 “(I) reimbursement for costs in-
2 curred in providing services described
3 in subparagraph (A) to the disabled
4 beneficiary; and

5 “(II) other amounts from pay-
6 ments made by the Commissioner to
7 the employment network pursuant to
8 subsection (h); and

9 “(ii) any other conditions that may be
10 required by such regulations.

11 “(C) REGULATIONS.—The Commissioner
12 and the Secretary of Education shall jointly
13 prescribe regulations specifying the terms of
14 agreements required by subparagraph (A) and
15 otherwise necessary to carry out the provisions
16 of this paragraph.

17 “(D) PENALTY.—No payment may be
18 made to an employment network pursuant to
19 subsection (h) in connection with services pro-
20 vided to any disabled beneficiary if such em-
21 ployment network makes referrals described in
22 subparagraph (A) in violation of the terms of
23 the agreement required under subparagraph (A)
24 or without having entered into such an agree-
25 ment.

1 “(d) RESPONSIBILITIES OF THE COMMISSIONER.—

2 “(1) SELECTION AND QUALIFICATIONS OF PRO-
3 GRAM MANAGERS.—The Commissioner shall enter
4 into agreements with 1 or more organizations in the
5 private or public sector for service as a program
6 manager to assist the Commissioner in admin-
7 istering the Program. Any such program manager
8 shall be selected by means of a competitive bidding
9 process, from among organizations in the private or
10 public sector with available expertise and experience
11 in the field of vocational rehabilitation and employ-
12 ment services.

13 “(2) TENURE, RENEWAL, AND EARLY TERMI-
14 NATION.—Each agreement entered into under para-
15 graph (1) shall provide for early termination upon
16 failure to meet performance standards which shall be
17 specified in the agreement and which shall be
18 weighted to take into account any performance in
19 prior terms. Such performance standards shall
20 include—

21 “(A) measures for ease of access by bene-
22 ficiaries to services; and

23 “(B) measures for determining the extent
24 to which failures in obtaining services for bene-

1 ficiaries fall within acceptable parameters, as
2 determined by the Commissioner.

3 “(3) PRECLUSION FROM DIRECT PARTICIPA-
4 TION IN DELIVERY OF SERVICES IN OWN SERVICE
5 AREA.—Agreements under paragraph (1) shall
6 preclude—

7 “(A) direct participation by a program
8 manager in the delivery of employment services,
9 vocational rehabilitation services, or other sup-
10 port services to beneficiaries in the service area
11 covered by the program manager’s agreement;
12 and

13 “(B) the holding by a program manager of
14 a financial interest in an employment network
15 or service provider which provides services in a
16 geographic area covered under the program
17 manager’s agreement.

18 “(4) SELECTION OF EMPLOYMENT NET-
19 WORKS.—

20 “(A) IN GENERAL.—The Commissioner
21 shall select and enter into agreements with em-
22 ployment networks for service under the Pro-
23 gram. Such employment networks shall be in
24 addition to State agencies serving as employ-

1 ment networks pursuant to elections under sub-
2 section (c).

3 “(B) ALTERNATE PARTICIPANTS.—In any
4 State where the Program is being implemented,
5 the Commissioner shall enter into an agreement
6 with any alternate participant that is operating
7 under the authority of section 222(d)(2) in the
8 State as of the date of enactment of this section
9 and chooses to serve as an employment network
10 under the Program.

11 “(5) TERMINATION OF AGREEMENTS WITH EM-
12 PLOYMENT NETWORKS.—The Commissioner shall
13 terminate agreements with employment networks for
14 inadequate performance, as determined by the Com-
15 missioner.

16 “(6) QUALITY ASSURANCE.—The Commissioner
17 shall provide for such periodic reviews as are nec-
18 essary to provide for effective quality assurance in
19 the provision of services by employment networks.
20 The Commissioner shall solicit and consider the
21 views of consumers and the program manager under
22 which the employment networks serve and shall con-
23 sult with providers of services to develop perform-
24 ance measurements. The Commissioner shall ensure
25 that the results of the periodic reviews are made

1 available to beneficiaries who are prospective service
2 recipients as they select employment networks. The
3 Commissioner shall ensure that the periodic surveys
4 of beneficiaries receiving services under the Program
5 are designed to measure customer service satisfac-
6 tion.

7 “(7) DISPUTE RESOLUTION.—The Commis-
8 sioner shall provide for a mechanism for resolving
9 disputes between beneficiaries and employment net-
10 works, between program managers and employment
11 networks, and between program managers and pro-
12 viders of services. The Commissioner shall afford a
13 party to such a dispute a reasonable opportunity for
14 a full and fair review of the matter in dispute.

15 “(e) PROGRAM MANAGERS.—

16 “(1) IN GENERAL.—A program manager shall
17 conduct tasks appropriate to assist the Commis-
18 sioner in carrying out the Commissioner’s duties in
19 administering the Program.

20 “(2) RECRUITMENT OF EMPLOYMENT NET-
21 WORKS.—A program manager shall recruit, and rec-
22 ommend for selection by the Commissioner, employ-
23 ment networks for service under the Program. The
24 program manager shall carry out such recruitment
25 and provide such recommendations, and shall mon-

1 itor all employment networks serving in the Program
2 in the geographic area covered under the program
3 manager’s agreement, to the extent necessary and
4 appropriate to ensure that adequate choices of serv-
5 ices are made available to beneficiaries. Employment
6 networks may serve under the Program only pursu-
7 ant to an agreement entered into with the Commis-
8 sioner under the Program incorporating the applica-
9 ble provisions of this section and regulations there-
10 under, and the program manager shall provide and
11 maintain assurances to the Commissioner that pay-
12 ment by the Commissioner to employment networks
13 pursuant to this section is warranted based on com-
14 pliance by such employment networks with the terms
15 of such agreement and this section. The program
16 manager shall not impose numerical limits on the
17 number of employment networks to be recommended
18 pursuant to this paragraph.

19 “(3) FACILITATION OF ACCESS BY BENE-
20 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
21 gram manager shall facilitate access by beneficiaries
22 to employment networks. The program manager
23 shall ensure that each beneficiary is allowed changes
24 in employment networks for good cause, as deter-
25 mined by the Commissioner, without being deemed

1 to have rejected services under the Program. The
2 program manager shall establish and maintain lists
3 of employment networks available to beneficiaries
4 and shall make such lists generally available to the
5 public. The program manager shall ensure that all
6 information provided to disabled beneficiaries pursu-
7 ant to this paragraph is provided in accessible for-
8 mats.

9 “(4) ENSURING AVAILABILITY OF ADEQUATE
10 SERVICES.—The program manager shall ensure that
11 employment services, vocational rehabilitation serv-
12 ices, and other support services are provided to
13 beneficiaries throughout the geographic area covered
14 under the program manager’s agreement, including
15 rural areas.

16 “(5) REASONABLE ACCESS TO SERVICES.—The
17 program manager shall take such measures as are
18 necessary to ensure that sufficient employment net-
19 works are available and that each beneficiary receiv-
20 ing services under the Program has reasonable ac-
21 cess to employment services, vocational rehabilitation
22 services, and other support services. Services pro-
23 vided under the Program may include case manage-
24 ment, work incentives planning, supported employ-
25 ment, career planning, career plan development, vo-

1 cational assessment, job training, placement, fol-
2 lowup services, and such other services as may be
3 specified by the Commissioner under the Program.
4 The program manager shall ensure that such serv-
5 ices are available in each service area.

6 “(f) EMPLOYMENT NETWORKS.—

7 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
8 WORKS.—

9 “(A) IN GENERAL.—Each employment net-
10 work serving under the Program shall consist of
11 an agency or instrumentality of a State (or a
12 political subdivision thereof) or a private entity
13 that assumes responsibility for the coordination
14 and delivery of services under the Program to
15 individuals assigning to the employment net-
16 work tickets to work and self-sufficiency issued
17 under subsection (b).

18 “(B) ONE-STOP DELIVERY SYSTEMS.—An
19 employment network serving under the Pro-
20 gram may consist of a one-stop delivery system
21 established under subtitle B of title I of the
22 Workforce Investment Act of 1998.

23 “(C) COMPLIANCE WITH SELECTION CRI-
24 TERIA.—No employment network may serve
25 under the Program unless it meets and main-

1 tains compliance with both general selection cri-
2 teria (such as professional and educational
3 qualifications (where applicable)) and specific
4 selection criteria (such as substantial expertise
5 and experience in providing relevant employ-
6 ment services and supports).

7 “(D) SINGLE OR ASSOCIATED PROVIDERS
8 ALLOWED.—An employment network shall con-
9 sist of either a single provider of such services
10 or of an association of such providers organized
11 so as to combine their resources into a single
12 entity. An employment network may meet the
13 requirements of subsection (e)(4) by providing
14 services directly, or by entering into agreements
15 with other individuals or entities providing ap-
16 propriate employment services, vocational reha-
17 bilitation services, or other support services.

18 “(2) REQUIREMENTS RELATING TO PROVISION
19 OF SERVICES.—Each employment network serving
20 under the Program shall be required under the
21 terms of its agreement with the Commissioner to—

22 “(A) serve prescribed service areas; and

23 “(B) take such measures as are necessary
24 to ensure that employment services, vocational
25 rehabilitation services, and other support serv-

1 ices provided under the Program by, or under
2 agreements entered into with, the employment
3 network are provided under appropriate indi-
4 vidual work plans meeting the requirements of
5 subsection (g).

6 “(3) ANNUAL FINANCIAL REPORTING.—Each
7 employment network shall meet financial reporting
8 requirements as prescribed by the Commissioner.

9 “(4) PERIODIC OUTCOMES REPORTING.—Each
10 employment network shall prepare periodic reports,
11 on at least an annual basis, itemizing for the covered
12 period specific outcomes achieved with respect to
13 specific services provided by the employment net-
14 work. Such reports shall conform to a national
15 model prescribed under this section. Each employ-
16 ment network shall provide a copy of the latest re-
17 port issued by the employment network pursuant to
18 this paragraph to each beneficiary upon enrollment
19 under the Program for services to be received
20 through such employment network. Upon issuance of
21 each report to each beneficiary, a copy of the report
22 shall be maintained in the files of the employment
23 network. The program manager shall ensure that
24 copies of all such reports issued under this para-

1 graph are made available to the public under reason-
2 able terms.

3 “(g) INDIVIDUAL WORK PLANS.—

4 “(1) REQUIREMENTS.—Each employment net-
5 work shall—

6 “(A) take such measures as are necessary
7 to ensure that employment services, vocational
8 rehabilitation services, and other support serv-
9 ices provided under the Program by, or under
10 agreements entered into with, the employment
11 network are provided under appropriate indi-
12 vidual work plans that meet the requirements of
13 subparagraph (C);

14 “(B) develop and implement each such in-
15 dividual work plan in partnership with each
16 beneficiary receiving such services in a manner
17 that affords the beneficiary the opportunity to
18 exercise informed choice in selecting an employ-
19 ment goal and specific services needed to
20 achieve that employment goal;

21 “(C) ensure that each individual work plan
22 includes at least—

23 “(i) a statement of the vocational goal
24 developed with the beneficiary;

1 “(ii) a statement of the services and
2 supports that have been deemed necessary
3 for the beneficiary to accomplish that goal;

4 “(iii) a statement of any terms and
5 conditions related to the provision of such
6 services and supports; and

7 “(iv) a statement of understanding re-
8 garding the beneficiary’s rights under the
9 Program (such as the right to retrieve the
10 ticket to work and self-sufficiency if the
11 beneficiary is dissatisfied with the services
12 being provided by the employment net-
13 work) and remedies available to the indi-
14 vidual, including information on the avail-
15 ability of advocacy services and assistance
16 in resolving disputes through the State
17 grant program authorized under section
18 1150;

19 “(D) provide a beneficiary the opportunity
20 to amend the individual work plan if a change
21 in circumstances necessitates a change in the
22 plan; and

23 “(E) make each beneficiary’s individual
24 work plan available to the beneficiary in, as ap-

1 appropriate, an accessible format chosen by the
2 beneficiary.

3 “(2) EFFECTIVE UPON WRITTEN APPROVAL.—

4 A beneficiary’s individual work plan shall take effect
5 upon written approval by the beneficiary or a rep-
6 resentative of the beneficiary and a representative of
7 the employment network that, in providing such
8 written approval, acknowledges assignment of the
9 beneficiary’s ticket to work and self-sufficiency.

10 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

11 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
12 PLOYMENT NETWORKS.—

13 “(A) IN GENERAL.—The Program shall
14 provide for payment authorized by the Commis-
15 sioner to employment networks under either an
16 outcome payment system or an outcome-mile-
17 stone payment system. Each employment net-
18 work shall elect which payment system will be
19 utilized by the employment network, and, for
20 such period of time as such election remains in
21 effect, the payment system so elected shall be
22 utilized exclusively in connection with such em-
23 ployment network (except as provided in sub-
24 paragraph (B)).

1 “(B) NO CHANGE IN METHOD OF PAY-
2 MENT FOR BENEFICIARIES WITH TICKETS AL-
3 READY ASSIGNED TO THE EMPLOYMENT NET-
4 WORKS.—Any election of a payment system by
5 an employment network that would result in a
6 change in the method of payment to the em-
7 ployment network for services provided to a
8 beneficiary who is receiving services from the
9 employment network at the time of the election
10 shall not be effective with respect to payment
11 for services provided to that beneficiary and the
12 method of payment previously selected shall
13 continue to apply with respect to such services.

14 “(2) OUTCOME PAYMENT SYSTEM.—

15 “(A) IN GENERAL.—The outcome payment
16 system shall consist of a payment structure gov-
17 erning employment networks electing such sys-
18 tem under paragraph (1)(A) which meets the
19 requirements of this paragraph.

20 “(B) PAYMENTS MADE DURING OUTCOME
21 PAYMENT PERIOD.—The outcome payment sys-
22 tem shall provide for a schedule of payments to
23 an employment network in connection with each
24 individual who is a beneficiary for each month
25 during the individual’s outcome payment period

1 for which benefits (described in paragraphs (3)
2 and (4) of subsection (k)) are not payable to
3 such individual because of work or earnings.

4 “(C) COMPUTATION OF PAYMENTS TO EM-
5 PLOYMENT NETWORK.—The payment schedule
6 of the outcome payment system shall be de-
7 signed so that—

8 “(i) the payment for each of the 60
9 months during the outcome payment pe-
10 riod for which benefits (described in para-
11 graphs (3) and (4) of subsection (k)) are
12 not payable is equal to a fixed percentage
13 of the payment calculation base for the cal-
14 endar year in which such month occurs;
15 and

16 “(ii) such fixed percentage is set at a
17 percentage which does not exceed 40 per-
18 cent.

19 “(3) OUTCOME-MILESTONE PAYMENT SYS-
20 TEM.—

21 “(A) IN GENERAL.—The outcome-mile-
22 stone payment system shall consist of a pay-
23 ment structure governing employment networks
24 electing such system under paragraph (1)(A)

1 which meets the requirements of this para-
2 graph.

3 “(B) EARLY PAYMENTS UPON ATTAIN-
4 MENT OF MILESTONES IN ADVANCE OF OUT-
5 COME PAYMENT PERIODS.—The outcome-mile-
6 stone payment system shall provide for 1 or
7 more milestones with respect to beneficiaries re-
8 ceiving services from an employment network
9 under the Program that are directed toward the
10 goal of permanent employment. Such milestones
11 shall form a part of a payment structure that
12 provides, in addition to payments made during
13 outcome payment periods, payments made prior
14 to outcome payment periods in amounts based
15 on the attainment of such milestones.

16 “(C) LIMITATION ON TOTAL PAYMENTS TO
17 EMPLOYMENT NETWORK.—The payment sched-
18 ule of the outcome-milestone payment system
19 shall be designed so that the total of the pay-
20 ments to the employment network with respect
21 to each beneficiary is less than, on a net
22 present value basis (using an interest rate de-
23 termined by the Commissioner that appro-
24 priately reflects the cost of funds faced by pro-
25 viders), the total amount to which payments to

1 the employment network with respect to the
2 beneficiary would be limited if the employment
3 network were paid under the outcome payment
4 system.

5 “(4) DEFINITIONS.—In this subsection:

6 “(A) PAYMENT CALCULATION BASE.—The
7 term ‘payment calculation base’ means, for any
8 calendar year—

9 “(i) in connection with a title II dis-
10 ability beneficiary, the average disability
11 insurance benefit payable under section
12 223 for all beneficiaries for months during
13 the preceding calendar year; and

14 “(ii) in connection with a title XVI
15 disability beneficiary (who is not concur-
16 rently a title II disability beneficiary), the
17 average payment of supplemental security
18 income benefits based on disability payable
19 under title XVI (excluding State sup-
20 plementation) for months during the pre-
21 ceding calendar year to all beneficiaries
22 who have attained age 18 but have not at-
23 tained age 65.

24 “(B) OUTCOME PAYMENT PERIOD.—The
25 term ‘outcome payment period’ means, in con-

1 nection with any individual who had assigned a
 2 ticket to work and self-sufficiency to an employ-
 3 ment network under the Program, a period—

4 “(i) beginning with the first month,
 5 ending after the date on which such ticket
 6 was assigned to the employment network,
 7 for which benefits (described in paragraphs
 8 (3) and (4) of subsection (k)) are not pay-
 9 able to such individual by reason of en-
 10 gagement in substantial gainful activity or
 11 by reason of earnings from work activity;
 12 and

13 “(ii) ending with the 60th month
 14 (consecutive or otherwise), ending after
 15 such date, for which such benefits are not
 16 payable to such individual by reason of en-
 17 gagement in substantial gainful activity or
 18 by reason of earnings from work activity.

19 “(5) PERIODIC REVIEW AND ALTERATIONS OF
 20 PRESCRIBED SCHEDULES.—

21 “(A) PERCENTAGES AND PERIODS.—The
 22 Commissioner shall periodically review the per-
 23 centage specified in paragraph (2)(C), the total
 24 payments permissible under paragraph (3)(C),
 25 and the period of time specified in paragraph

1 (4)(B) to determine whether such percentages,
2 such permissible payments, and such period
3 provide an adequate incentive for employment
4 networks to assist beneficiaries to enter the
5 workforce, while providing for appropriate
6 economies. The Commissioner may alter such
7 percentage, such total permissible payments, or
8 such period of time to the extent that the Com-
9 missioner determines, on the basis of the Com-
10 missioner's review under this paragraph, that
11 such an alteration would better provide the in-
12 centive and economies described in the pre-
13 ceding sentence.

14 “(B) NUMBER AND AMOUNTS OF MILE-
15 STONE PAYMENTS.—The Commissioner shall
16 periodically review the number and amounts of
17 milestone payments established by the Commis-
18 sioner pursuant to this section to determine
19 whether they provide an adequate incentive for
20 employment networks to assist beneficiaries to
21 enter the workforce, taking into account infor-
22 mation provided to the Commissioner by pro-
23 gram managers, the Work Incentives Advisory
24 Panel established under section 201(f) of the
25 Work Incentives Improvement Act of 1999, and

1 other reliable sources. The Commissioner may
2 from time to time alter the number and
3 amounts of milestone payments initially estab-
4 lished by the Commissioner pursuant to this
5 section to the extent that the Commissioner de-
6 termines that such an alteration would allow an
7 adequate incentive for employment networks to
8 assist beneficiaries to enter the workforce. Such
9 alteration shall be based on information pro-
10 vided to the Commissioner by program man-
11 agers, the Work Incentives Advisory Panel es-
12 tablished under section 201(f) of the Work In-
13 centives Improvement Act of 1999, or other re-
14 liable sources.

15 “(i) **SUSPENSION OF DISABILITY REVIEWS.**—During
16 any period for which an individual is using, as defined by
17 the Commissioner, a ticket to work and self-sufficiency
18 issued under this section, the Commissioner (and any ap-
19 plicable State agency) may not initiate a continuing dis-
20 ability review or other review under section 221 of whether
21 the individual is or is not under a disability or a review
22 under title XVI similar to any such review under section
23 221.

24 “(j) **ALLOCATION OF COSTS.**—

1 “(1) PAYMENTS TO EMPLOYMENT NET-
2 WORKS.—Payments to employment networks (in-
3 cluding State agencies that elect to participate in the
4 Program as an employment network) shall be made
5 from the Federal Old-Age and Survivors Insurance
6 Trust Fund or the Federal Disability Insurance
7 Trust Fund, as appropriate, in the case of ticketed
8 title II disability beneficiaries who return to work, or
9 from the appropriation made available for making
10 supplemental security income payments under title
11 XVI, in the case of title XVI disability beneficiaries
12 who return to work. With respect to ticketed bene-
13 ficiaries who concurrently are entitled to benefits
14 under title II and eligible for payments under title
15 XVI who return to work, the Commissioner shall al-
16 locate the cost of payments to employment networks
17 to which the tickets of such beneficiaries have been
18 assigned among such Trust Funds and appropria-
19 tion, as appropriate.

20 “(2) ADMINISTRATIVE EXPENSES.—The costs
21 of administering this section (other than payments
22 to employment networks) shall be paid from
23 amounts made available for the administration of
24 title II and amounts made available for the adminis-

1 tration of title XVI, and shall be allocated among
2 those amounts as appropriate.

3 “(k) DEFINITIONS.—In this section:

4 “(1) COMMISSIONER.—The term ‘Commis-
5 sioner’ means the Commissioner of Social Security.

6 “(2) DISABLED BENEFICIARY.—The term ‘dis-
7 abled beneficiary’ means a title II disability bene-
8 ficiary or a title XVI disability beneficiary.

9 “(3) TITLE II DISABILITY BENEFICIARY.—The
10 term ‘title II disability beneficiary’ means an indi-
11 vidual entitled to disability insurance benefits under
12 section 223 or to monthly insurance benefits under
13 section 202 based on such individual’s disability (as
14 defined in section 223(d)). An individual is a title II
15 disability beneficiary for each month for which such
16 individual is entitled to such benefits.

17 “(4) TITLE XVI DISABILITY BENEFICIARY.—
18 The term ‘title XVI disability beneficiary’ means an
19 individual eligible for supplemental security income
20 benefits under title XVI on the basis of blindness
21 (within the meaning of section 1614(a)(2)) or dis-
22 ability (within the meaning of section 1614(a)(3)).
23 An individual is a title XVI disability beneficiary for
24 each month for which such individual is eligible for
25 such benefits.

1 “(5) SUPPLEMENTAL SECURITY INCOME BEN-
2 EFIT UNDER TITLE XVI.—The term ‘supplemental
3 security income benefit under title XVI’ means a
4 cash benefit under section 1611 or 1619(a), and
5 does not include a State supplementary payment,
6 administered federally or otherwise.

7 “(1) REGULATIONS.—Not later than 1 year after the
8 date of enactment of this section, the Commissioner shall
9 prescribe such regulations as are necessary to carry out
10 the provisions of this section.”.

11 (b) CONFORMING AMENDMENTS.—

12 (1) AMENDMENTS TO TITLE II.—

13 (A) Section 221(i) of the Social Security
14 Act (42 U.S.C. 421(i)) is amended by adding at
15 the end the following:

16 “(5) For suspension of reviews under this subsection
17 in the case of an individual using a ticket to work and
18 self-sufficiency, see section 1148(i).”.

19 (B) Section 222(a) of the Social Security
20 Act (42 U.S.C. 422(a)) is repealed.

21 (C) Section 222(b) of the Social Security
22 Act (42 U.S.C. 422(b)) is repealed.

23 (D) Section 225(b)(1) of the Social Secu-
24 rity Act (42 U.S.C. 425(b)(1)) is amended by
25 striking “a program of vocational rehabilitation

1 services” and inserting “a program consisting
2 of the Ticket to Work and Self-Sufficiency Pro-
3 gram under section 1148 or another program of
4 vocational rehabilitation services, employment
5 services, or other support services”.

6 (2) AMENDMENTS TO TITLE XVI.—

7 (A) Section 1615(a) of the Social Security
8 Act (42 U.S.C. 1382d(a)) is amended to read
9 as follows:

10 “SEC. 1615. (a) In the case of any blind or disabled
11 individual who—

12 “(1) has not attained age 16, and

13 “(2) with respect to whom benefits are paid
14 under this title,

15 the Commissioner of Social Security shall make provision
16 for referral of such individual to the appropriate State
17 agency administering the State program under title V.”.

18 (B) Section 1615(c) of the Social Security
19 Act (42 U.S.C. 1382d(c)) is repealed.

20 (C) Section 1631(a)(6)(A) of the Social
21 Security Act (42 U.S.C. 1383(a)(6)(A)) is
22 amended by striking “a program of vocational
23 rehabilitation services” and inserting “a pro-
24 gram consisting of the Ticket to Work and Self-
25 Sufficiency Program under section 1148 or an-

1 other program of vocational rehabilitation serv-
2 ices, employment services, or other support
3 services”.

4 (D) Section 1633(c) of the Social Security
5 Act (42 U.S.C. 1383b(c)) is amended—

6 (i) by inserting “(1)” after “(c)”; and

7 (ii) by adding at the end the fol-
8 lowing:

9 “(2) For suspension of continuing disability reviews
10 and other reviews under this title similar to reviews under
11 section 221 in the case of an individual using a ticket to
12 work and self-sufficiency, see section 1148(i).”.

13 (c) EFFECTIVE DATE.—Subject to subsection (d),
14 the amendments made by subsections (a) and (b) shall
15 take effect with the first month following 1 year after the
16 date of enactment of this Act.

17 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

18 (1) IN GENERAL.—Not later than 1 year after
19 the date of enactment of this Act, the Commissioner
20 of Social Security shall commence implementation of
21 the amendments made by this section (other than
22 paragraphs (1)(C) and (2)(B) of subsection (b)) in
23 graduated phases at phase-in sites selected by the
24 Commissioner. Such phase-in sites shall be selected
25 so as to ensure, prior to full implementation of the

1 Ticket to Work and Self-Sufficiency Program, the
2 development and refinement of referral processes,
3 payment systems, computer linkages, management
4 information systems, and administrative processes
5 necessary to provide for full implementation of such
6 amendments. Subsection (c) shall apply with respect
7 to paragraphs (1)(C) and (2)(B) of subsection (b)
8 without regard to this subsection.

9 (2) REQUIREMENTS.—Implementation of the
10 Program at each phase-in site shall be carried out
11 on a wide enough scale to permit a thorough evalua-
12 tion of the alternative methods under consideration,
13 so as to ensure that the most efficacious methods
14 are determined and in place for full implementation
15 of the Program on a timely basis.

16 (3) FULL IMPLEMENTATION.—The Commis-
17 sioner shall ensure that the ability to provide tickets
18 and services to individuals under the Program exists
19 in every State as soon as practicable on or after the
20 effective date specified in subsection (c) but not later
21 than 3 years after such date.

22 (4) ONGOING EVALUATION OF PROGRAM.—

23 (A) IN GENERAL.—The Commissioner
24 shall design and conduct a series of evaluations
25 to assess the cost-effectiveness of activities car-

1 ried out under this section and the amendments
2 made thereby, as well as the effects of this sec-
3 tion and the amendments made thereby on
4 work outcomes for beneficiaries receiving tickets
5 to work and self-sufficiency under the Program.

6 (B) CONSULTATION.—The Commissioner
7 shall design and carry out the series of evalua-
8 tions after receiving relevant advice from ex-
9 perts in the fields of disability, vocational reha-
10 bilitation, and program evaluation and individ-
11 uals using tickets to work and self-sufficiency
12 under the Program and consulting with the
13 Work Incentives Advisory Panel established
14 under section 201(f), the Comptroller General
15 of the United States, other agencies of the Fed-
16 eral Government, and private organizations
17 with appropriate expertise.

18 (C) METHODOLOGY.—

19 (i) IMPLEMENTATION.—The Commis-
20 sioner, in consultation with the Work In-
21 centives Advisory Panel established under
22 section 201(f), shall ensure that plans for
23 evaluations and data collection methods
24 under the Program are appropriately de-

1 signed to obtain detailed employment infor-
2 mation.

3 (ii) SPECIFIC MATTERS TO BE AD-
4 DRESSED.—Each such evaluation shall ad-
5 dress (but is not limited to)—

6 (I) the annual cost (including net
7 cost) of the Program and the annual
8 cost (including net cost) that would
9 have been incurred in the absence of
10 the Program;

11 (II) the determinants of return to
12 work, including the characteristics of
13 beneficiaries in receipt of tickets
14 under the Program;

15 (III) the types of employment
16 services, vocational rehabilitation serv-
17 ices, and other support services fur-
18 nished to beneficiaries in receipt of
19 tickets under the Program who return
20 to work and to those who do not re-
21 turn to work;

22 (IV) the duration of employment
23 services, vocational rehabilitation serv-
24 ices, and other support services fur-
25 nished to beneficiaries in receipt of

1 tickets under the Program who return
2 to work and the duration of such serv-
3 ices furnished to those who do not re-
4 turn to work and the cost to employ-
5 ment networks of furnishing such
6 services;

7 (V) the employment outcomes,
8 including wages, occupations, benefits,
9 and hours worked, of beneficiaries
10 who return to work after receiving
11 tickets under the Program and those
12 who return to work without receiving
13 such tickets;

14 (VI) the characteristics of pro-
15 viders whose services are provided
16 within an employment network under
17 the Program;

18 (VII) the extent (if any) to which
19 employment networks display a great-
20 er willingness to provide services to
21 beneficiaries with a range of disabil-
22 ities;

23 (VIII) the characteristics (includ-
24 ing employment outcomes) of those
25 beneficiaries who receive services

1 under the outcome payment system
2 and of those beneficiaries who receive
3 services under the outcome-milestone
4 payment system;

5 (IX) measures of satisfaction
6 among beneficiaries in receipt of tick-
7 ets under the Program; and

8 (X) reasons for (including com-
9 ments solicited from beneficiaries re-
10 garding) their choice not to use their
11 tickets or their inability to return to
12 work despite the use of their tickets.

13 (D) PERIODIC EVALUATION REPORTS.—
14 Following the close of the third and fifth fiscal
15 years ending after the effective date under sub-
16 section (c), and prior to the close of the seventh
17 fiscal year ending after such date, the Commis-
18 sioner shall transmit to the Committee on Ways
19 and Means of the House of Representatives and
20 the Committee on Finance of the Senate a re-
21 port containing the Commissioner's evaluation
22 of the progress of activities conducted under the
23 provisions of this section and the amendments
24 made thereby. Each such report shall set forth
25 the Commissioner's evaluation of the extent to

1 which the Program has been successful and the
2 Commissioner's conclusions on whether or how
3 the Program should be modified. Each such re-
4 port shall include such data, findings, materials,
5 and recommendations as the Commissioner may
6 consider appropriate.

7 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
8 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
9 AMENDMENTS IN SUCH STATE.—

10 (A) IN GENERAL.—In the case of any
11 State in which the amendments made by sub-
12 section (a) have not been fully implemented
13 pursuant to this subsection, the Commissioner
14 shall determine by regulation the extent to
15 which—

16 (i) the requirement under section
17 222(a) of the Social Security Act for
18 prompt referrals to a State agency, and

19 (ii) the authority of the Commissioner
20 under section 222(d)(2) of the Social Secu-
21 rity Act to provide vocational rehabilitation
22 services in such State by agreement or
23 contract with other public or private agen-
24 cies, organizations, institutions, or individ-
25 uals,

1 shall apply in such State.

2 (B) EXISTING AGREEMENTS.—Nothing in
3 subparagraph (A) or the amendments made by
4 subsection (a) shall be construed to limit, im-
5 pede, or otherwise affect any agreement entered
6 into pursuant to section 222(d)(2) of the Social
7 Security Act before the date of enactment of
8 this Act with respect to services provided pursu-
9 ant to such agreement to beneficiaries receiving
10 services under such agreement as of such date,
11 except with respect to services (if any) to be
12 provided after 3 years after the effective date
13 provided in subsection (c).

14 (e) SPECIFIC REGULATIONS REQUIRED.—

15 (1) IN GENERAL.—The Commissioner of Social
16 Security shall prescribe such regulations as are nec-
17 essary to implement the amendments made by this
18 section.

19 (2) SPECIFIC MATTERS TO BE INCLUDED IN
20 REGULATIONS.—The matters which shall be ad-
21 dressed in such regulations shall include—

22 (A) the form and manner in which tickets
23 to work and self-sufficiency may be distributed
24 to beneficiaries pursuant to section 1148(b)(1)
25 of the Social Security Act;

1 (B) the format and wording of such tick-
2 ets, which shall incorporate by reference any
3 contractual terms governing service by employ-
4 ment networks under the Program;

5 (C) the form and manner in which State
6 agencies may elect participation in the Ticket to
7 Work and Self-Sufficiency Program (and revoke
8 such an election) pursuant to section
9 1148(c)(1) of the Social Security Act and provi-
10 sion for periodic opportunities for exercising
11 such elections (and revocations);

12 (D) the status of State agencies under sec-
13 tion 1148(c)(1) at the time that State agencies
14 exercise elections (and revocations) under that
15 section;

16 (E) the terms of agreements to be entered
17 into with program managers pursuant to sec-
18 tion 1148(d) of the Social Security Act,
19 including—

20 (i) the terms by which program man-
21 agers are precluded from direct participa-
22 tion in the delivery of services pursuant to
23 section 1148(d)(3) of the Social Security
24 Act;

1 (ii) standards which must be met by
2 quality assurance measures referred to in
3 paragraph (6) of section 1148(d) and
4 methods of recruitment of employment net-
5 works utilized pursuant to paragraph (2)
6 of section 1148(e); and

7 (iii) the format under which dispute
8 resolution will operate under section
9 1148(d)(7);

10 (F) the terms of agreements to be entered
11 into with employment networks pursuant to sec-
12 tion 1148(d)(4) of the Social Security Act,
13 including—

14 (i) the manner in which service areas
15 are specified pursuant to section
16 1148(f)(2)(A) of the Social Security Act;

17 (ii) the general selection criteria and
18 the specific selection criteria which are ap-
19 plicable to employment networks under
20 section 1148(f)(1)(C) of the Social Secu-
21 rity Act in selecting service providers;

22 (iii) specific requirements relating to
23 annual financial reporting by employment
24 networks pursuant to section 1148(f)(3) of
25 the Social Security Act; and

1 (iv) the national model to which peri-
2 odic outcomes reporting by employment
3 networks must conform under section
4 1148(f)(4) of the Social Security Act;

5 (G) standards which must be met by indi-
6 vidual work plans pursuant to section 1148(g)
7 of the Social Security Act;

8 (H) standards which must be met by pay-
9 ment systems required under section 1148(h) of
10 the Social Security Act, including—

11 (i) the form and manner in which
12 elections by employment networks of pay-
13 ment systems are to be exercised pursuant
14 to section 1148(h)(1)(A);

15 (ii) the terms which must be met by
16 an outcome payment system under section
17 1148(h)(2);

18 (iii) the terms which must be met by
19 an outcome-milestone payment system
20 under section 1148(h)(3);

21 (iv) any revision of the percentage
22 specified in paragraph (2)(C) of section
23 1148(h) of the Social Security Act or the
24 period of time specified in paragraph
25 (4)(B) of such section 1148(h); and

1 (v) annual oversight procedures for
2 such systems; and

3 (I) procedures for effective oversight of the
4 Program by the Commissioner of Social Secu-
5 rity, including periodic reviews and reporting
6 requirements.

7 (f) WORK INCENTIVES ADVISORY PANEL.—

8 (1) ESTABLISHMENT.—There is established
9 within the Social Security Administration a panel to
10 be known as the “Work Incentives Advisory Panel”
11 (in this subsection referred to as the “Panel”).

12 (2) DUTIES OF PANEL.—It shall be the duty of
13 the Panel to—

14 (A) advise the President, Congress, and
15 the Commissioner of Social Security on issues
16 related to work incentives programs, planning,
17 and assistance for individuals with disabilities,
18 including work incentive provisions under titles
19 II, XI, XVI, XVIII, and XIX of the Social Se-
20 curity Act (42 U.S.C. 401 et seq., 1301 et seq.,
21 1381 et seq., 1395 et seq., 1396 et seq.); and

22 (B) with respect to the Ticket to Work and
23 Self-Sufficiency Program established under sec-
24 tion 1148 of the Social Security Act—

1 (i) advise the Commissioner of Social
2 Security with respect to establishing phase-
3 in sites for such Program and fully imple-
4 menting the Program thereafter, the re-
5 finement of access of disabled beneficiaries
6 to employment networks, payment systems,
7 and management information systems, and
8 advise the Commissioner whether such
9 measures are being taken to the extent
10 necessary to ensure the success of the Pro-
11 gram;

12 (ii) advise the Commissioner regard-
13 ing the most effective designs for research
14 and demonstration projects associated with
15 the Program or conducted pursuant to sec-
16 tion 302;

17 (iii) advise the Commissioner on the
18 development of performance measurements
19 relating to quality assurance under section
20 1148(d)(6) of the Social Security Act; and

21 (iv) furnish progress reports on the
22 Program to the Commissioner and each
23 House of Congress.

24 (3) MEMBERSHIP.—

1 (A) NUMBER AND APPOINTMENT.—The
2 Panel shall be composed of 12 members ap-
3 pointed as follows:

4 (i) 4 members appointed by the Presi-
5 dent.

6 (ii) 2 members appointed by the
7 Speaker of the House of Representatives,
8 in consultation with the chairman of the
9 Committee on Ways and Means of the
10 House of Representatives.

11 (iii) 2 members appointed by the Mi-
12 nority Leader of the House of Representa-
13 tives, in consultation with the ranking
14 member of the Committee on Ways and
15 Means of the House of Representatives.

16 (iv) 2 members appointed by the Ma-
17 jority Leader of the Senate, in consultation
18 with the chairman of the Committee on Fi-
19 nance of the Senate.

20 (v) 2 members appointed by the Mi-
21 nority Leader of the Senate, in consulta-
22 tion with the ranking member of the Com-
23 mittee on Finance of the Senate.

24 (B) REPRESENTATION.—All members ap-
25 pointed to the Panel shall have experience or

1 expert knowledge in the fields of, or related to,
2 work incentive programs, employment services,
3 vocational rehabilitation services, health care
4 services, and other support services for individ-
5 uals with disabilities. At least one-half of the
6 members described in each clause of subpara-
7 graph (A) shall be individuals with disabilities,
8 or representatives of individuals with disabil-
9 ities, with consideration to current or former
10 title II disability beneficiaries or title XVI dis-
11 ability beneficiaries (as such terms are defined
12 in section 1148(k) of the Social Security Act
13 (as added by subsection (a)).

14 (C) TERMS.—

15 (i) IN GENERAL.—Each member shall
16 be appointed for a term of 4 years (or, if
17 less, for the remaining life of the Panel),
18 except as provided in clauses (ii) and (iii).
19 The initial members shall be appointed not
20 later than 90 days after the date of enact-
21 ment of this Act.

22 (ii) TERMS OF INITIAL AP-
23 PENTEES.—As designated by the Commis-
24 sioner at the time of appointment, of the
25 members first appointed—

1 (I) one-half of the members ap-
2 pointed under each clause of subpara-
3 graph (A) shall be appointed for a
4 term of 2 years; and

5 (II) the remaining members ap-
6 pointed under each such clause shall
7 be appointed for a term of 4 years.

8 (iii) VACANCIES.—Any member ap-
9 pointed to fill a vacancy occurring before
10 the expiration of the term for which the
11 member's predecessor was appointed shall
12 be appointed only for the remainder of that
13 term. A member may serve after the expi-
14 ration of that member's term until a suc-
15 cessor has taken office. A vacancy in the
16 Panel shall be filled in the manner in
17 which the original appointment was made.

18 (D) BASIC PAY.—Members shall each be
19 paid at a rate, and in a manner, that is con-
20 sistent with guidelines established under section
21 7 of the Federal Advisory Committee Act (5
22 U.S.C. App.).

23 (E) TRAVEL EXPENSES.—Each member
24 shall receive travel expenses, including per diem
25 in lieu of subsistence, in accordance with sec-

1 tions 5702 and 5703 of title 5, United States
2 Code.

3 (F) QUORUM.—Eight members of the
4 Panel shall constitute a quorum but a lesser
5 number may hold hearings.

6 (G) CHAIRPERSON.—The Chairperson of
7 the Panel shall be designated by the President.
8 The term of office of the Chairperson shall be
9 4 years.

10 (H) MEETINGS.—The Panel shall meet at
11 least quarterly and at other times at the call of
12 the Chairperson or a majority of its members.

13 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
14 AND CONSULTANTS.—

15 (A) DIRECTOR.—The Panel shall have a
16 Director who shall be appointed by the Commis-
17 sioner and paid at a rate, and in a manner,
18 that is consistent with guidelines established
19 under section 7 of the Federal Advisory Com-
20 mittee Act (5 U.S.C. App.).

21 (B) STAFF.—Subject to rules prescribed
22 by the Commissioner, the Director may appoint
23 and fix the pay of additional personnel as the
24 Director considers appropriate.

1 (C) EXPERTS AND CONSULTANTS.—Sub-
2 ject to rules prescribed by the Commissioner,
3 the Director may procure temporary and inter-
4 mittent services under section 3109(b) of title
5 5, United States Code.

6 (D) STAFF OF FEDERAL AGENCIES.—
7 Upon request of the Panel, the head of any
8 Federal department or agency may detail, on a
9 reimbursable basis, any of the personnel of that
10 department or agency to the Panel to assist it
11 in carrying out its duties under this subsection.

12 (5) POWERS OF PANEL.—

13 (A) HEARINGS AND SESSIONS.—The Panel
14 may, for the purpose of carrying out its duties
15 under this subsection, hold such hearings, sit
16 and act at such times and places, and take such
17 testimony and evidence as the Panel considers
18 appropriate.

19 (B) POWERS OF MEMBERS AND AGENTS.—
20 Any member or agent of the Panel may, if au-
21 thorized by the Panel, take any action which
22 the Panel is authorized to take by this sub-
23 section.

24 (C) MAILS.—The Panel may use the
25 United States mails in the same manner and

1 under the same conditions as other departments
2 and agencies of the United States.

3 (6) REPORTS.—

4 (A) INTERIM REPORTS.—The Panel shall
5 submit directly to the President and Congress
6 interim reports at least annually.

7 (B) FINAL REPORT.—The Panel shall
8 transmit a final report directly to the President
9 and Congress not later than 8 years after the
10 date of enactment of this Act. The final report
11 shall contain a detailed statement of the find-
12 ings and conclusions of the Panel, together with
13 its recommendations for legislation and admin-
14 istrative actions which the Panel considers ap-
15 propriate.

16 (7) TERMINATION.—The Panel shall terminate
17 30 days after the date of the submission of its final
18 report under paragraph (6)(B).

19 (8) ALLOCATION OF COSTS.—The costs of car-
20 rying out this subsection shall be paid from amounts
21 made available for the administration of title II of
22 the Social Security Act (42 U.S.C. 401 et seq.) and
23 amounts made available for the administration of
24 title XVI of that Act (42 U.S.C. 1381 et seq.), and

1 shall be allocated among those amounts as appro-
 2 priate.

3 **Subtitle B—Elimination of Work**
 4 **Disincentives**

5 **SEC. 211. WORK ACTIVITY STANDARD AS A BASIS FOR RE-**
 6 **VIEW OF AN INDIVIDUAL’S DISABLED STATUS.**

7 Section 221 of the Social Security Act (42 U.S.C.
 8 421) is amended by adding at the end the following:

9 “(m)(1) In any case where an individual entitled to
 10 disability insurance benefits under section 223 or to
 11 monthly insurance benefits under section 202 based on
 12 such individual’s disability (as defined in section 223(d))
 13 has received such benefits for at least 24 months—

14 “(A) no continuing disability review conducted
 15 by the Commissioner may be scheduled for the indi-
 16 vidual solely as a result of the individual’s work ac-
 17 tivity;

18 “(B) no work activity engaged in by the indi-
 19 vidual may be used as evidence that the individual
 20 is no longer disabled; and

21 “(C) no cessation of work activity by the indi-
 22 vidual may give rise to a presumption that the indi-
 23 vidual is unable to engage in work.

24 “(2) An individual to which paragraph (1) applies
 25 shall continue to be subject to—

1 “(i) prior to the month in which the individual
2 files a request for reinstatement—

3 “(I) the individual was entitled to benefits
4 under this section or section 202 on the basis
5 of disability pursuant to an application filed
6 therefore; and

7 “(II) such entitlement terminated due to
8 the performance of substantial gainful activity;

9 “(ii) the individual is under a disability and the
10 physical or mental impairment that is the basis for
11 the finding of disability is the same as (or related
12 to) the physical or mental impairment that was the
13 basis for the finding of disability that gave rise to
14 the entitlement described in clause (i); and

15 “(iii) the individual’s disability renders the indi-
16 vidual unable to perform substantial gainful activity.

17 “(C)(i) Except as provided in clause (ii), the period
18 prescribed in this subparagraph with respect to an indi-
19 vidual is 60 consecutive months beginning with the month
20 following the most recent month for which the individual
21 was entitled to a benefit described in subparagraph
22 (B)(i)(I) prior to the entitlement termination described in
23 subparagraph (B)(i)(II).

24 “(ii) In the case of an individual who fails to file a
25 reinstatement request within the period prescribed in

1 clause (i), the Commissioner may extend the period if the
2 Commissioner determines that the individual had good
3 cause for the failure to so file.

4 “(2)(A)(i) A request for reinstatement shall be filed
5 in such form, and containing such information, as the
6 Commissioner may prescribe.

7 “(ii) A request for reinstatement shall include express
8 declarations by the individual that the individual meets the
9 requirements specified in clauses (ii) and (iii) of para-
10 graph (1)(B).

11 “(B) A request for reinstatement filed in accordance
12 with subparagraph (A) may constitute an application for
13 benefits in the case of any individual who the Commis-
14 sioner determines is not entitled to reinstated benefits
15 under this subsection.

16 “(3) In determining whether an individual meets the
17 requirements of paragraph (1)(B)(ii), the provisions of
18 subsection (f) shall apply.

19 “(4)(A)(i) Subject to clause (ii), entitlement to bene-
20 fits reinstated under this subsection shall commence with
21 the benefit payable for the month in which a request for
22 reinstatement is filed.

23 “(ii) An individual whose entitlement to a benefit for
24 any month would have been reinstated under this sub-
25 section had the individual filed a request for reinstatement

1 before the end of such month shall be entitled to such ben-
2 efit for such month if such request for reinstatement is
3 filed before the end of the twelfth month immediately suc-
4 ceeding such month.

5 “(B)(i) Subject to clauses (ii) and (iii), the amount
6 of the benefit payable for any month pursuant to the rein-
7 statement of entitlement under this subsection shall be de-
8 termined in accordance with the provisions of this title.

9 “(ii) For purposes of computing the primary insur-
10 ance amount of an individual whose entitlement to benefits
11 under this section is reinstated under this subsection, the
12 date of onset of the individual’s disability shall be the date
13 of onset used in determining the individual’s most recent
14 period of disability arising in connection with such benefits
15 payable on the basis of an application.

16 “(iii) Benefits under this section or section 202 pay-
17 able for any month pursuant to a request for reinstate-
18 ment filed in accordance with paragraph (2) shall be re-
19 duced by the amount of any provisional benefit paid to
20 such individual for such month under paragraph (7).

21 “(C) No benefit shall be payable pursuant to an enti-
22 tlement reinstated under this subsection to an individual
23 for any month in which the individual engages in substan-
24 tial gainful activity.

1 “(D) The entitlement of any individual that is rein-
2 stated under this subsection shall end with the benefits
3 payable for the month preceding whichever of the following
4 months is the earliest:

5 “(i) The month in which the individual dies.

6 “(ii) The month in which the individual attains
7 retirement age.

8 “(iii) The third month following the month in
9 which the individual’s disability ceases.

10 “(5) Whenever an individual’s entitlement to benefits
11 under this section is reinstated under this subsection, enti-
12 tlement to benefits payable on the basis of such individ-
13 ual’s wages and self-employment income may be reinstated
14 with respect to any person previously entitled to such ben-
15 efits on the basis of an application if the Commissioner
16 determines that such person satisfies all the requirements
17 for entitlement to such benefits except requirements re-
18 lated to the filing of an application. The provisions of
19 paragraph (4) shall apply to the reinstated entitlement of
20 any such person to the same extent that they apply to
21 the reinstated entitlement of such individual.

22 “(6) An individual to whom benefits are payable
23 under this section or section 202 pursuant to a reinstate-
24 ment of entitlement under this subsection for 24 months
25 (whether or not consecutive) shall, with respect to benefits

1 so payable after such twenty-fourth month, be deemed for
2 purposes of paragraph (1)(B)(i)(I) and the determination,
3 if appropriate, of the termination month in accordance
4 with subsection (a)(1) of this section, or subsection (d)(1),
5 (e)(1), or (f)(1) of section 202, to be entitled to such bene-
6 fits on the basis of an application filed therefore.

7 “(7)(A) An individual described in paragraph (1)(B)
8 who files a request for reinstatement in accordance with
9 the provisions of paragraph (2)(A) shall be entitled to pro-
10 visional benefits payable in accordance with this para-
11 graph, unless the Commissioner determines that the indi-
12 vidual does not meet the requirements of paragraph
13 (1)(B)(i) or that the individual’s declaration under para-
14 graph (2)(A)(ii) is false. Any such determination by the
15 Commissioner shall be final and not subject to review
16 under subsection (b) or (g) of section 205.

17 “(B) The amount of a provisional benefit for a month
18 shall equal the amount of the last monthly benefit payable
19 to the individual under this title on the basis of an applica-
20 tion increased by an amount equal to the amount, if any,
21 by which such last monthly benefit would have been in-
22 creased as a result of the operation of section 215(i).

23 “(C)(i) Provisional benefits shall begin with the
24 month in which a request for reinstatement is filed in ac-
25 cordance with paragraph (2)(A).

1 “(ii) Provisional benefits shall end with the earliest
2 of—

3 “(I) the month in which the Commissioner
4 makes a determination regarding the individual’s en-
5 titlement to reinstated benefits;

6 “(II) the fifth month following the month de-
7 scribed in clause (i);

8 “(III) the month in which the individual per-
9 forms substantial gainful activity; or

10 “(IV) the month in which the Commissioner de-
11 termines that the individual does not meet the re-
12 quirements of paragraph (1)(B)(i) or that the indi-
13 vidual’s declaration made in accordance with para-
14 graph (2)(A)(ii) is false.

15 “(D) In any case in which the Commissioner deter-
16 mines that an individual is not entitled to reinstated bene-
17 fits, any provisional benefits paid to the individual under
18 this paragraph shall not be subject to recovery as an over-
19 payment unless the Commissioner determines that the in-
20 dividual knew or should have known that the individual
21 did not meet the requirements of paragraph (1)(B).”.

22 (b) SSI BENEFITS.—

23 (1) IN GENERAL.—Section 1631 of the Social
24 Security Act (42 U.S.C. 1383) is amended by add-
25 ing at the end the following:

1 “Reinstatement of Eligibility on the Basis of Blindness
2 or Disability

3 “(p)(1)(A) Eligibility for benefits under this title
4 shall be reinstated in any case where the Commissioner
5 determines that an individual described in subparagraph
6 (B) has filed a request for reinstatement meeting the re-
7 quirements of paragraph (2)(A) during the period pre-
8 scribed in subparagraph (C). Reinstatement of eligibility
9 shall be in accordance with the terms of this subsection.

10 “(B) An individual is described in this subparagraph
11 if—

12 “(i) prior to the month in which the individual
13 files a request for reinstatement—

14 “(I) the individual was eligible for benefits
15 under this title on the basis of blindness or dis-
16 ability pursuant to an application filed there-
17 fore; and

18 “(II) the individual thereafter was ineli-
19 gible for such benefits due to earned income (or
20 earned and unearned income) for a period of 12
21 or more consecutive months;

22 “(ii) the individual is blind or disabled and the
23 physical or mental impairment that is the basis for
24 the finding of blindness or disability is the same as
25 (or related to) the physical or mental impairment

1 that was the basis for the finding of blindness or
2 disability that gave rise to the eligibility described in
3 clause (i);

4 “(iii) the individual’s blindness or disability ren-
5 ders the individual unable to perform substantial
6 gainful activity; and

7 “(iv) the individual satisfies the nonmedical re-
8 quirements for eligibility for benefits under this title.

9 “(C)(i) Except as provided in clause (ii), the period
10 prescribed in this subparagraph with respect to an indi-
11 vidual is 60 consecutive months beginning with the month
12 following the most recent month for which the individual
13 was eligible for a benefit under this title (including section
14 1619) prior to the period of ineligibility described in sub-
15 paragraph (B)(i)(II).

16 “(ii) In the case of an individual who fails to file a
17 reinstatement request within the period prescribed in
18 clause (i), the Commissioner may extend the period if the
19 Commissioner determines that the individual had good
20 cause for the failure to so file.

21 “(2)(A)(i) A request for reinstatement shall be filed
22 in such form, and containing such information, as the
23 Commissioner may prescribe.

24 “(ii) A request for reinstatement shall include express
25 declarations by the individual that the individual meets the

1 requirements specified in clauses (ii) through (iv) of para-
2 graph (1)(B).

3 “(B) A request for reinstatement filed in accordance
4 with subparagraph (A) may constitute an application for
5 benefits in the case of any individual who the Commis-
6 sioner determines is not eligible for reinstated benefits
7 under this subsection.

8 “(3) In determining whether an individual meets the
9 requirements of paragraph (1)(B)(ii), the provisions of
10 section 1614(a)(4) shall apply.

11 “(4)(A) Eligibility for benefits reinstated under this
12 subsection shall commence with the benefit payable for the
13 month following the month in which a request for rein-
14 statement is filed.

15 “(B)(i) Subject to clause (ii), the amount of the ben-
16 efit payable for any month pursuant to the reinstatement
17 of eligibility under this subsection shall be determined in
18 accordance with the provisions of this title.

19 “(ii) The benefit under this title payable for any
20 month pursuant to a request for reinstatement filed in ac-
21 cordance with paragraph (2) shall be reduced by the
22 amount of any provisional benefit paid to such individual
23 for such month under paragraph (7).

24 “(C) Except as otherwise provided in this subsection,
25 eligibility for benefits under this title reinstated pursuant

1 to a request filed under paragraph (2) shall be subject
2 to the same terms and conditions as eligibility established
3 pursuant to an application filed therefore.

4 “(5) Whenever an individual’s eligibility for benefits
5 under this title is reinstated under this subsection, eligi-
6 bility for such benefits shall be reinstated with respect to
7 the individual’s spouse if such spouse was previously an
8 eligible spouse of the individual under this title and the
9 Commissioner determines that such spouse satisfies all the
10 requirements for eligibility for such benefits except re-
11 quirements related to the filing of an application. The pro-
12 visions of paragraph (4) shall apply to the reinstated eligi-
13 bility of the spouse to the same extent that they apply
14 to the reinstated eligibility of such individual.

15 “(6) An individual to whom benefits are payable
16 under this title pursuant to a reinstatement of eligibility
17 under this subsection for twenty-four months (whether or
18 not consecutive) shall, with respect to benefits so payable
19 after such twenty-fourth month, be deemed for purposes
20 of paragraph (1)(B)(i)(I) to be eligible for such benefits
21 on the basis of an application filed therefore.

22 “(7)(A) An individual described in paragraph (1)(B)
23 who files a request for reinstatement in accordance with
24 the provisions of paragraph (2)(A) shall be eligible for pro-
25 visional benefits payable in accordance with this para-

1 graph, unless the Commissioner determines that the indi-
2 vidual does not meet the requirements of paragraph
3 (1)(B)(i) or that the individual's declaration under para-
4 graph (2)(A)(ii) is false. Any such determination by the
5 Commissioner shall be final and not subject to review
6 under paragraph (1) or (3) of subsection (c).

7 “(B)(i) Except as otherwise provided in clause (ii),
8 the amount of a provisional benefit for a month shall equal
9 the amount of the monthly benefit that would be payable
10 to an eligible individual under this title with the same kind
11 and amount of income.

12 “(ii) If the individual has a spouse who was pre-
13 viously an eligible spouse of the individual under this title
14 and the Commissioner determines that such spouse satis-
15 fies all the requirements of section 1614(b) except require-
16 ments related to the filing of an application, the amount
17 of a provisional benefit for a month shall equal the amount
18 of the month benefit that would be payable to an eligible
19 individual and eligible spouse under this title with the
20 same kind and amount of income.

21 “(C)(i) Provisional benefits shall begin with the
22 month following the month in which a request for rein-
23 statement is filed in accordance with paragraph (2)(A).

24 “(ii) Provisional benefits shall end with the earliest
25 of—

1 “(I) the month in which the Commissioner
2 makes a determination regarding the individual’s eli-
3 gibility for reinstated benefits;

4 “(II) the fifth month following the month for
5 which provisional benefits are first payable under
6 clause (i); or

7 “(III) the month in which the Commissioner de-
8 termines that the individual does not meet the re-
9 quirements of paragraph (1)(B)(i) or that the indi-
10 vidual’s declaration made in accordance with para-
11 graph (2)(A)(ii) is false.

12 “(D) In any case in which the Commissioner deter-
13 mines that an individual is not eligible for reinstated bene-
14 fits, any provisional benefits paid to the individual under
15 this paragraph shall not be subject to recovery as an over-
16 payment unless the Commissioner determines that the in-
17 dividual knew or should have known that the individual
18 did not meet the requirements of paragraph (1)(B).

19 “(8) For purposes of this subsection other than para-
20 graph (7), the term ‘benefits under this title’ includes
21 State supplementary payments made pursuant to an
22 agreement under section 1616(a) or section 212(b) of
23 Public Law 93–66.”.

24 (2) CONFORMING AMENDMENTS.—

1 (A) Section 1631(j)(1) of such Act (42
2 U.S.C. 1383(j)(1)) is amended by striking the
3 period and inserting “, or has filed a request
4 for reinstatement of eligibility under subsection
5 (p)(2) and been determined to be eligible for re-
6 instatement.”.

7 (B) Section 1631(j)(2)(A)(i)(I) of such Act
8 (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by
9 inserting “(other than pursuant to a request for
10 reinstatement under subsection (p))” after “eli-
11 gible”.

12 (c) EFFECTIVE DATE.—

13 (1) IN GENERAL.—The amendments made by
14 this section shall take effect on the first day of the
15 thirteenth month beginning after the date of enact-
16 ment of this Act.

17 (2) LIMITATION.—No benefit shall be payable
18 under title II or XVI of the Social Security Act on
19 the basis of a request for reinstatement filed under
20 section 223(i) or 1631(p) of such Act before the ef-
21 fective date described in paragraph (1).

1 **Subtitle C—Work Incentives**
2 **Planning, Assistance, and Outreach**

3 **SEC. 221. WORK INCENTIVES OUTREACH PROGRAM.**

4 Part A of title XI of the Social Security Act (42
5 U.S.C. 1301 et seq.), as amended by section 201, is
6 amended by adding after section 1148 the following:

7 “WORK INCENTIVES OUTREACH PROGRAM

8 “SEC. 1149. (a) ESTABLISHMENT.—

9 “(1) IN GENERAL.—The Commissioner, in con-
10 sultation with the Work Incentives Advisory Panel
11 established under section 201(f) of the Work Incen-
12 tives Improvement Act of 1999, shall establish a
13 community-based work incentives planning and as-
14 sistance program for the purpose of disseminating
15 accurate information to disabled beneficiaries on
16 work incentives programs and issues related to such
17 programs.

18 “(2) GRANTS, COOPERATIVE AGREEMENTS,
19 CONTRACTS, AND OUTREACH.—Under the program
20 established under this section, the Commissioner
21 shall—

22 “(A) establish a competitive program of
23 grants, cooperative agreements, or contracts to
24 provide benefits planning and assistance, in-
25 cluding information on the availability of pro-

1 tection and advocacy services, to disabled bene-
2 ficiaries, including individuals participating in
3 the Ticket to Work and Self-Sufficiency Pro-
4 gram established under section 1148, the pro-
5 gram established under section 1619, and other
6 programs that are designed to encourage dis-
7 abled beneficiaries to work;

8 “(B) conduct directly, or through grants,
9 cooperative agreements, or contracts, ongoing
10 outreach efforts to disabled beneficiaries (and
11 to the families of such beneficiaries) who are
12 potentially eligible to participate in Federal or
13 State work incentive programs that are de-
14 signed to assist disabled beneficiaries to work,
15 including—

16 “(i) preparing and disseminating in-
17 formation explaining such programs; and

18 “(ii) working in cooperation with
19 other Federal, State, and private agencies
20 and nonprofit organizations that serve dis-
21 abled beneficiaries, and with agencies and
22 organizations that focus on vocational re-
23 habilitation and work-related training and
24 counseling;

1 “(C) establish a corps of trained, acces-
2 sible, and responsive work incentives specialists
3 within the Social Security Administration who
4 will specialize in disability work incentives
5 under titles II and XVI for the purpose of dis-
6 seminating accurate information with respect to
7 inquiries and issues relating to work incentives
8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
11 and XVI; and

12 “(iii) individuals or entities awarded
13 grants under subparagraphs (A) or (B);
14 and

15 “(D) provide—

16 “(i) training for work incentives spe-
17 cialists and individuals providing planning
18 assistance described in subparagraph (C);
19 and

20 “(ii) technical assistance to organiza-
21 tions and entities that are designed to en-
22 courage disabled beneficiaries to return to
23 work.

24 “(3) COORDINATION WITH OTHER PRO-
25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), a one-stop de-
15 livery system established under subtitle B of title I
16 of the Workforce Investment Act of 1998, and other
17 services.

18 “(b) CONDITIONS.—

19 “(1) SELECTION OF ENTITIES.—

20 “(A) APPLICATION.—An entity shall sub-
21 mit an application for a grant, cooperative
22 agreement, or contract to provide benefits plan-
23 ning and assistance to the Commissioner at
24 such time, in such manner, and containing such
25 information as the Commissioner may deter-

1 mine is necessary to meet the requirements of
2 this section.

3 “(B) STATEWIDENESS.—The Commis-
4 sioner shall ensure that the planning, assist-
5 ance, and information described in paragraph
6 (2) shall be available on a statewide basis.

7 “(C) ELIGIBILITY OF STATES AND PRI-
8 VATE ORGANIZATIONS.—

9 “(i) IN GENERAL.—The Commissioner
10 may award a grant, cooperative agreement,
11 or contract under this section to a State or
12 a private agency or organization (other
13 than Social Security Administration Field
14 Offices and the State agency administering
15 the State medicaid program under title
16 XIX, including any agency or entity de-
17 scribed in clause (ii), that the Commis-
18 sioner determines is qualified to provide
19 the planning, assistance, and information
20 described in paragraph (2)).

21 “(ii) AGENCIES AND ENTITIES DE-
22 SCRIBED.—The agencies and entities de-
23 scribed in this clause are the following:

24 “(I) Any public or private agency
25 or organization (including Centers for

1 Independent Living established under
2 title VII of the Rehabilitation Act of
3 1973, protection and advocacy organi-
4 zations, client assistance programs es-
5 tablished in accordance with section
6 112 of the Rehabilitation Act of 1973,
7 and State Developmental Disabilities
8 Councils established in accordance
9 with section 124 of the Developmental
10 Disabilities Assistance and Bill of
11 Rights Act (42 U.S.C. 6024)) that the
12 Commissioner determines satisfies the
13 requirements of this section.

14 “(II) The State agency admin-
15 istering the State program funded
16 under part A of title IV.

17 “(D) EXCLUSION FOR CONFLICT OF IN-
18 TEREST.—The Commissioner may not award a
19 grant, cooperative agreement, or contract under
20 this section to any entity that the Commissioner
21 determines would have a conflict of interest if
22 the entity were to receive a grant, cooperative
23 agreement, or contract under this section.

24 “(2) SERVICES PROVIDED.—A recipient of a
25 grant, cooperative agreement, or contract to provide

1 benefits planning and assistance shall select individ-
2 uals who will act as planners and provide informa-
3 tion, guidance, and planning to disabled beneficiaries
4 on the—

5 “(A) availability and interrelation of any
6 Federal or State work incentives programs de-
7 signed to assist disabled beneficiaries that the
8 individual may be eligible to participate in;

9 “(B) adequacy of any health benefits cov-
10 erage that may be offered by an employer of
11 the individual and the extent to which other
12 health benefits coverage may be available to the
13 individual; and

14 “(C) availability of protection and advo-
15 cacy services for disabled beneficiaries and how
16 to access such services.

17 “(3) AMOUNT OF GRANTS, COOPERATIVE
18 AGREEMENTS, OR CONTRACTS.—

19 “(A) BASED ON POPULATION OF DIS-
20 ABLED BENEFICIARIES.—Subject to subpara-
21 graph (B), the Commissioner shall award a
22 grant, cooperative agreement, or contract under
23 this section to an entity based on the percent-
24 age of the population of the State where the en-
25 tity is located who are disabled beneficiaries.

1 “(B) LIMITATION PER GRANT.—No entity
2 shall receive a grant, cooperative agreement, or
3 contract under this section for a fiscal year that
4 is less than \$50,000 or more than \$300,000.

5 “(ii) TOTAL AMOUNT FOR ALL
6 GRANTS, COOPERATIVE AGREEMENTS, AND
7 CONTRACTS.—The total amount of all
8 grants, cooperative agreements, and con-
9 tracts awarded under this section for a fis-
10 cal year may not exceed \$23,000,000.

11 “(4) ALLOCATION OF COSTS.—The costs of car-
12 rying out this section shall be paid from amounts
13 made available for the administration of title II and
14 amounts made available for the administration of
15 title XVI, and shall be allocated among those
16 amounts as appropriate.

17 “(c) DEFINITIONS.—In this section:

18 “(1) COMMISSIONER.—The term ‘Commis-
19 sioner’ means the Commissioner of Social Security.

20 “(2) DISABLED BENEFICIARY.—The term ‘dis-
21 abled beneficiary’ has the meaning given that term
22 in section 1148(k)(2).

23 “(d) AUTHORIZATION OF APPROPRIATIONS.—There
24 is authorized to be appropriated to carry out this section
25 \$23,000,000 for each of fiscal years 2000 through 2004.”.

1 **SEC. 222. STATE GRANTS FOR WORK INCENTIVES ASSIST-**
2 **ANCE TO DISABLED BENEFICIARIES.**

3 Part A of title XI of the Social Security Act (42
4 U.S.C. 1301 et seq.), as amended by section 221, is
5 amended by adding after section 1149 the following:

6 “STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO
7 DISABLED BENEFICIARIES

8 “SEC. 1150. (a) IN GENERAL.—Subject to subsection
9 (c), the Commissioner may make payments in each State
10 to the protection and advocacy system established pursu-
11 ant to part C of title I of the Developmental Disabilities
12 Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.)
13 for the purpose of providing services to disabled bene-
14 ficiaries.

15 “(b) SERVICES PROVIDED.—Services provided to dis-
16 abled beneficiaries pursuant to a payment made under this
17 section may include—

18 “(1) information and advice about obtaining vo-
19 cational rehabilitation and employment services; and

20 “(2) advocacy or other services that a disabled
21 beneficiary may need to secure or regain gainful em-
22 ployment.

23 “(c) APPLICATION.—In order to receive payments
24 under this section, a protection and advocacy system shall
25 submit an application to the Commissioner, at such time,

1 in such form and manner, and accompanied by such infor-
2 mation and assurances as the Commissioner may require.

3 “(d) AMOUNT OF PAYMENTS.—

4 “(1) IN GENERAL.—Subject to the amount ap-
5 propriated for a fiscal year for making payments
6 under this section, a protection and advocacy system
7 shall not be paid an amount that is less than—

8 “(A) in the case of a protection and advo-
9 cacy system located in a State (including the
10 District of Columbia and Puerto Rico) other
11 than Guam, American Samoa, the United
12 States Virgin Islands, and the Commonwealth
13 of the Northern Mariana Islands, the greater
14 of—

15 “(i) \$100,000; or

16 “(ii) $\frac{1}{3}$ of 1 percent of the amount
17 available for payments under this section;
18 and

19 “(B) in the case of a protection and advo-
20 cacy system located in Guam, American Samoa,
21 the United States Virgin Islands, and the Com-
22 monwealth of the Northern Mariana Islands,
23 \$50,000.

24 “(2) INFLATION ADJUSTMENT.—For each fiscal
25 year in which the total amount appropriated to carry

1 out this section exceeds the total amount appro-
2 priated to carry out this section in the preceding fis-
3 cal year, the Commissioner shall increase each min-
4 imum payment under subparagraphs (A) and (B) of
5 paragraph (1) by a percentage equal to the percent-
6 age increase in the total amount appropriated to
7 carry out this section between the preceding fiscal
8 year and the fiscal year involved.

9 “(e) ANNUAL REPORT.—Each protection and advo-
10 cacy system that receives a payment under this section
11 shall submit an annual report to the Commissioner and
12 the Work Incentives Advisory Panel established under sec-
13 tion 201(f) of the Work Incentives Improvement Act of
14 1999 on the services provided to individuals by the system.

15 “(f) FUNDING.—

16 “(1) ALLOCATION OF PAYMENTS.—Payments
17 under this section shall be made from amounts made
18 available for the administration of title II and
19 amounts made available for the administration of
20 title XVI, and shall be allocated among those
21 amounts as appropriate.

22 “(2) CARRYOVER.—Any amounts allotted for
23 payment to a protection and advocacy system under
24 this section for a fiscal year shall remain available
25 for payment to or on behalf of the protection and

1 advocacy system until the end of the succeeding fis-
2 cal year.

3 “(g) DEFINITIONS.—In this section:

4 “(1) COMMISSIONER.—The term ‘Commis-
5 sioner’ means the Commissioner of Social Security.

6 “(2) DISABLED BENEFICIARY.—The term ‘dis-
7 abled beneficiary’ has the meaning given that term
8 in section 1148(k)(2).

9 “(3) PROTECTION AND ADVOCACY SYSTEM.—
10 The term ‘protection and advocacy system’ means a
11 protection and advocacy system established pursuant
12 to part C of title I of the Developmental Disabilities
13 Assistance and Bill of Rights Act (42 U.S.C. 6041
14 et seq.).

15 “(h) AUTHORIZATION OF APPROPRIATIONS.—There
16 is authorized to be appropriated to carry out this section
17 \$7,000,000 for each of fiscal years 2000 through 2004.”.

18 **TITLE III—DEMONSTRATION**

19 **PROJECTS AND STUDIES**

20 **SEC. 301. PERMANENT EXTENSION OF DISABILITY INSUR-**
21 **ANCE PROGRAM DEMONSTRATION PROJECT**
22 **AUTHORITY.**

23 (a) PERMANENT EXTENSION OF AUTHORITY.—Title
24 II of the Social Security Act (42 U.S.C. 401 et seq.) is
25 amended by adding at the end the following:

1 “DEMONSTRATION PROJECT AUTHORITY

2 “SEC. 234. (a) AUTHORITY.—

3 “(1) IN GENERAL.—The Commissioner of So-
4 cial Security (in this section referred to as the ‘Com-
5 missioner’) shall develop and carry out experiments
6 and demonstration projects designed to determine
7 the relative advantages and disadvantages of—

8 “(A) various alternative methods of treat-
9 ing the work activity of individuals entitled to
10 disability insurance benefits under section 223
11 or to monthly insurance benefits under section
12 202 based on such individual’s disability (as de-
13 fined in section 223(d)), including such meth-
14 ods as a reduction in benefits based on earn-
15 ings, designed to encourage the return to work
16 of such individuals;

17 “(B) altering other limitations and condi-
18 tions applicable to such individuals (including
19 lengthening the trial work period (as defined in
20 section 222(e)), altering the 24-month waiting
21 period for hospital insurance benefits under sec-
22 tion 226, altering the manner in which the pro-
23 gram under this title is administered, earlier re-
24 ferral of such individuals for rehabilitation, and
25 greater use of employers and others to develop,

1 perform, and otherwise stimulate new forms of
2 rehabilitation); and

3 “(C) implementing sliding scale benefit off-
4 sets using variations in—

5 “(i) the amount of the offset as a pro-
6 portion of earned income;

7 “(ii) the duration of the offset period;
8 and

9 “(iii) the method of determining the
10 amount of income earned by such individ-
11 uals,

12 to the end that savings will acerue to the Trust
13 Funds, or to otherwise promote the objectives or fa-
14 cilitate the administration of this title.

15 “(2) AUTHORITY FOR EXPANSION OF SCOPE.—

16 The Commissioner may expand the scope of any
17 such experiment or demonstration project to include
18 any group of applicants for benefits under the pro-
19 gram established under this title with impairments
20 that reasonably may be presumed to be disabling for
21 purposes of such demonstration project, and may
22 limit any such demonstration project to any such
23 group of applicants, subject to the terms of such
24 demonstration project which shall define the extent
25 of any such presumption.

1 “(b) REQUIREMENTS.—The experiments and dem-
2 onstration projects developed under subsection (a) shall be
3 of sufficient scope and shall be carried out on a wide
4 enough scale to permit a thorough evaluation of the alter-
5 native methods under consideration while giving assurance
6 that the results derived from the experiments and projects
7 will obtain generally in the operation of the disability in-
8 surance program under this title without committing such
9 program to the adoption of any particular system either
10 locally or nationally.

11 “(c) AUTHORITY TO WAIVE COMPLIANCE WITH
12 BENEFITS REQUIREMENTS.—In the case of any experi-
13 ment or demonstration project conducted under subsection
14 (a), the Commissioner may waive compliance with the ben-
15 efit requirements of this title, and the Secretary may
16 (upon the request of the Commissioner) waive compliance
17 with the benefits requirements of title XVIII, insofar as
18 is necessary for a thorough evaluation of the alternative
19 methods under consideration. No such experiment or
20 project shall be actually placed in operation unless at least
21 90 days prior thereto a written report, prepared for pur-
22 poses of notification and information only and containing
23 a full and complete description thereof, has been trans-
24 mitted by the Commissioner to the Committee on Ways
25 and Means of the House of Representatives and to the

1 Committee on Finance of the Senate. Periodic reports on
2 the progress of such experiments and demonstration
3 projects shall be submitted by the Commissioner to such
4 committees. When appropriate, such reports shall include
5 detailed recommendations for changes in administration
6 or law, or both, to carry out the objectives stated in sub-
7 section (a).

8 “(d) REPORTS.—

9 “(1) INTERIM REPORTS.—On or before June 9
10 of each year, the Commissioner shall submit to the
11 Committee on Ways and Means of the House of
12 Representatives and to the Committee on Finance of
13 the Senate an interim report on the progress of the
14 experiments and demonstration projects carried out
15 under this subsection together with any related data
16 and materials that the Commissioner may consider
17 appropriate.

18 “(2) FINAL REPORTS.—Not later than 90 days
19 after the termination of any experiment or dem-
20 onstration project carried out under this section, the
21 Commissioner shall submit to the Committee on
22 Ways and Means of the House of Representatives
23 and to the Committee on Finance of the Senate a
24 final report with respect to that experiment and
25 demonstration project.”.

1 (b) CONFORMING AMENDMENTS; TRANSFER OF
2 PRIOR AUTHORITY.—

3 (1) CONFORMING AMENDMENTS.—

4 (A) REPEAL OF PRIOR AUTHORITY.—Para-
5 graphs (1) through (4) of subsection (a) and
6 subsection (c) of section 505 of the Social Secu-
7 rity Disability Amendments of 1980 (42 U.S.C.
8 1310 note) are repealed.

9 (B) CONFORMING AMENDMENT REGARD-
10 ING FUNDING.—Section 201(k) of the Social
11 Security Act (42 U.S.C. 401(k)) is amended by
12 striking “section 505(a) of the Social Security
13 Disability Amendments of 1980” and inserting
14 “section 234”.

15 (2) TRANSFER OF PRIOR AUTHORITY.—With
16 respect to any experiment or demonstration project
17 being conducted under section 505(a) of the Social
18 Security Disability Amendments of 1980 (42 U.S.C.
19 1310 note) as of the date of enactment of this Act,
20 the authority to conduct such experiment or dem-
21 onstration project (including the terms and condi-
22 tions applicable to the experiment or demonstration
23 project) shall be treated as if that authority (and
24 such terms and conditions) had been established

1 under section 234 of the Social Security Act, as
2 added by subsection (a).

3 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
4 **DUCTIONS IN DISABILITY INSURANCE BENE-**
5 **FITS BASED ON EARNINGS.**

6 (a) **AUTHORITY.**—The Commissioner of Social Secu-
7 rity shall conduct demonstration projects for the purpose
8 of evaluating, through the collection of data, a program
9 for title II disability beneficiaries (as defined in section
10 1148(k)(3) of the Social Security Act) under which each
11 \$1 of benefits payable under section 223, or under section
12 202 based on the beneficiary's disability, is reduced for
13 each \$2 of such beneficiary's earnings that is above a level
14 to be determined by the Commissioner. Such projects shall
15 be conducted at a number of localities which the Commis-
16 sioner shall determine is sufficient to adequately evaluate
17 the appropriateness of national implementation of such a
18 program. Such projects shall identify reductions in Fed-
19 eral expenditures that may result from the permanent im-
20 plementation of such a program.

21 (b) **SCOPE AND SCALE AND MATTERS TO BE DETER-**
22 **MINED.**—

23 (1) **IN GENERAL.**—The demonstration projects
24 developed under subsection (a) shall be of sufficient
25 duration, shall be of sufficient scope, and shall be

1 carried out on a wide enough scale to permit a thor-
2 ough evaluation of the project to determine—

3 (A) the effects, if any, of induced entry
4 into the project and reduced exit from the
5 project;

6 (B) the extent, if any, to which the project
7 being tested is affected by whether it is in oper-
8 ation in a locality within an area under the ad-
9 ministration of the Ticket to Work and Self-
10 Sufficiency Program established under section
11 1148 of the Social Security Act; and

12 (C) the savings that accrue to the Federal
13 Old-Age and Survivors Insurance Trust Fund,
14 the Federal Disability Insurance Trust Fund,
15 and other Federal programs under the project
16 being tested.

17 The Commissioner shall take into account advice
18 provided by the Work Incentives Advisory Panel pur-
19 suant to section 201(f)(2)(B)(ii).

20 (2) ADDITIONAL MATTERS.—The Commissioner
21 shall also determine with respect to each project—

22 (A) the annual cost (including net cost) of
23 the project and the annual cost (including net
24 cost) that would have been incurred in the ab-
25 sence of the project;

1 (B) the determinants of return to work, in-
2 cluding the characteristics of the beneficiaries
3 who participate in the project; and

4 (C) the employment outcomes, including
5 wages, occupations, benefits, and hours worked,
6 of beneficiaries who return to work as a result
7 of participation in the project.

8 The Commissioner may include within the matters
9 evaluated under the project the merits of trial work
10 periods and periods of extended eligibility.

11 (c) WAIVERS.—The Commissioner may waive compli-
12 ance with the benefit provisions of title II of the Social
13 Security Act, and the Secretary of Health and Human
14 Services may waive compliance with the benefit require-
15 ments of title XVIII of that Act, insofar as is necessary
16 for a thorough evaluation of the alternative methods under
17 consideration. No such project shall be actually placed in
18 operation unless at least 90 days prior thereto a written
19 report, prepared for purposes of notification and informa-
20 tion only and containing a full and complete description
21 thereof, has been transmitted by the Commissioner to the
22 Committee on Ways and Means of the House of Rep-
23 resentatives and to the Committee on Finance of the Sen-
24 ate. Periodic reports on the progress of such projects shall
25 be submitted by the Commissioner to such committees.

1 When appropriate, such reports shall include detailed rec-
2 ommendations for changes in administration or law, or
3 both, to carry out the objectives stated in subsection (a).

4 (d) INTERIM REPORTS.—Not later than 2 years after
5 the date of enactment of this Act, and annually thereafter,
6 the Commissioner of Social Security shall submit to Con-
7 gress an interim report on the progress of the demonstra-
8 tion projects carried out under this subsection together
9 with any related data and materials that the Commis-
10 sioner of Social Security may consider appropriate.

11 (e) FINAL REPORT.—The Commissioner of Social Se-
12 curity shall submit to Congress a final report with respect
13 to all demonstration projects carried out under this section
14 not later than 1 year after their completion.

15 (f) EXPENDITURES.—Expenditures made for dem-
16 onstration projects under this section shall be made from
17 the Federal Disability Insurance Trust Fund and the Fed-
18 eral Old-Age and Survivors Insurance Trust Fund, as de-
19 termined appropriate by the Commissioner of Social Secu-
20 rity, and from the Federal Hospital Insurance Trust Fund
21 and the Federal Supplementary Medical Insurance Trust
22 Fund, as determined appropriate by the Secretary of
23 Health and Human Services, to the extent provided in ad-
24 vance in appropriation Acts.

1 **SEC. 303. STUDIES AND REPORTS.**

2 (a) STUDY BY GENERAL ACCOUNTING OFFICE OF
3 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
4 TIVES.—

5 (1) STUDY.—As soon as practicable after the
6 date of enactment of this Act, the Comptroller Gen-
7 eral of the United States shall undertake a study to
8 assess existing tax credits and other disability-re-
9 lated employment incentives under the Americans
10 with Disabilities Act of 1990 and other Federal
11 laws. In such study, the Comptroller General shall
12 specifically address the extent to which such credits
13 and other incentives would encourage employers to
14 hire and retain individuals with disabilities.

15 (2) REPORT.—Not later than 3 years after the
16 date of enactment of this Act, the Comptroller Gen-
17 eral shall transmit to the Committee on Ways and
18 Means of the House of Representatives and the
19 Committee on Finance of the Senate a written re-
20 port presenting the results of the Comptroller Gen-
21 eral's study conducted pursuant to this subsection,
22 together with such recommendations for legislative
23 or administrative changes as the Comptroller Gen-
24 eral determines are appropriate.

25 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
26 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS

1 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
2 ING CONCURRENT ENTITLEMENT.—

3 (1) STUDY.—As soon as practicable after the
4 date of enactment of this Act, the Comptroller Gen-
5 eral of the United States shall undertake a study to
6 evaluate the coordination under current law of the
7 disability insurance program under title II of the So-
8 cial Security Act and the supplemental security in-
9 come program under title XVI of that Act, as such
10 programs relate to individuals entering or leaving
11 concurrent entitlement under such programs. In
12 such study, the Comptroller General shall specifically
13 address the effectiveness of work incentives under
14 such programs with respect to such individuals and
15 the effectiveness of coverage of such individuals
16 under titles XVIII and XIX of the Social Security
17 Act.

18 (2) REPORT.—Not later than 3 years after the
19 date of enactment of this Act, the Comptroller Gen-
20 eral shall transmit to the Committee on Ways and
21 Means of the House of Representatives and the
22 Committee on Finance of the Senate a written re-
23 port presenting the results of the Comptroller Gen-
24 eral's study conducted pursuant to this subsection,
25 together with such recommendations for legislative

1 or administrative changes as the Comptroller Gen-
2 eral determines are appropriate.

3 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
4 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
5 LIMIT ON RETURN TO WORK.—

6 (1) STUDY.—As soon as practicable after the
7 date of enactment of this Act, the Comptroller Gen-
8 eral of the United States shall undertake a study of
9 the substantial gainful activity level applicable as of
10 that date to recipients of benefits under section 223
11 of the Social Security Act (42 U.S.C. 423) and
12 under section 202 of that Act (42 U.S.C. 402) on
13 the basis of a recipient having a disability, and the
14 effect of such level as a disincentive for those recipi-
15 ents to return to work. In the study, the Comptroller
16 General also shall address the merits of increasing
17 the substantial gainful activity level applicable to
18 such recipients of benefits and the rationale for not
19 yearly indexing that level to inflation.

20 (2) REPORT.—Not later than 2 years after the
21 date of enactment of this Act, the Comptroller Gen-
22 eral shall transmit to the Committee on Ways and
23 Means of the House of Representatives and the
24 Committee on Finance of the Senate a written re-
25 port presenting the results of the Comptroller Gen-

1 eral's study conducted pursuant to this subsection,
2 together with such recommendations for legislative
3 or administrative changes as the Comptroller Gen-
4 eral determines are appropriate.

5 (d) REPORT ON DISREGARDS UNDER THE DI AND
6 SSI PROGRAMS.—Not later than 90 days after the date
7 of enactment of this Act, the Commissioner of Social Secu-
8 rity shall submit to the Committee on Ways and Means
9 of the House of Representatives and the Committee on
10 Finance of the Senate a report that—

11 (1) identifies all income, assets, and resource
12 disregards (imposed under statutory or regulatory
13 authority) that are applicable to individuals receiving
14 benefits under title II or XVI of the Social Security
15 Act (42 U.S.C. 401 et seq., 1381 et seq.);

16 (2) with respect to each such disregard—

17 (A) specifies the most recent statutory or
18 regulatory modification of the disregard; and

19 (B) recommends whether further statutory
20 or regulatory modification of the disregard
21 would be appropriate; and

22 (3) with respect to the disregard described in
23 section 1612(b)(7) of the Social Security Act (42
24 U.S.C. 1382a(b)(7)) (relating to grants, scholar-
25 ships, or fellowships received for use in paying the

1 cost of tuition and fees at any educational (including
2 technical or vocational education) institution)—

3 (A) identifies the number of individuals re-
4 ceiving benefits under title XVI of such Act (42
5 U.S.C. 1381 et seq.) who have attained age 22
6 and have not had any portion of any grant,
7 scholarship, or fellowship received for use in
8 paying the cost of tuition and fees at any edu-
9 cational (including technical or vocational edu-
10 cation) institution excluded from their income
11 in accordance with that section;

12 (B) recommends whether the age at which
13 such grants, scholarships, or fellowships are ex-
14 cluded from income for purposes of determining
15 eligibility under title XVI of the Social Security
16 Act should be increased to age 25; and

17 (C) recommends whether such disregard
18 should be expanded to include any such grant,
19 scholarship, or fellowship received for use in
20 paying the cost of room and board at any such
21 institution.

1 **TITLE IV—MISCELLANEOUS AND**
2 **TECHNICAL AMENDMENTS**

3 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
4 **ADDICTS AND ALCOHOLICS.**

5 (a) CLARIFICATION RELATING TO THE EFFECTIVE
6 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
7 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
8 tion 105(a)(5) of the Contract with America Advancement
9 Act of 1996 (Public Law 104–121; 110 Stat. 853) is
10 amended—

11 (1) in subparagraph (A), by striking “by the
12 Commissioner of Social Security” and “by the Com-
13 missioner”; and

14 (2) by adding at the end the following:

15 “(D) For purposes of this paragraph, an
16 individual’s claim, with respect to benefits
17 under title II of the Social Security Act based
18 on disability, which has been denied in whole
19 before the date of enactment of this Act, may
20 not be considered to be finally adjudicated be-
21 fore such date if, on or after such date—

22 “(i) there is pending a request for ei-
23 ther administrative or judicial review with
24 respect to such claim, or

1 “(ii) there is pending, with respect to
2 such claim, a readjudication by the Com-
3 missioner of Social Security pursuant to
4 relief in a class action or implementation
5 by the Commissioner of a court remand
6 order.

7 “(E) Notwithstanding the provisions of
8 this paragraph, with respect to any individual
9 for whom the Commissioner of Social Security
10 does not perform the entitlement redetermina-
11 tion before the date prescribed in subparagraph
12 (C), the Commissioner shall perform such enti-
13 tlement redetermination in lieu of a continuing
14 disability review whenever the Commissioner de-
15 termines that the individual’s entitlement is
16 subject to redetermination based on the pre-
17 ceding provisions of this paragraph, and the
18 provisions of section 223(f) of the Social Secu-
19 rity Act shall not apply to such redetermina-
20 tion.”.

21 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
22 SIONS CONCERNING REPRESENTATIVE PAYEES AND
23 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
24 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
25 Section 105(a)(5)(B) of the Contract with America Ad-

1 vancement Act of 1996 (42 U.S.C. 405 note) is amended
2 to read as follows:

3 “(B) The amendments made by para-
4 graphs (2) and (3) shall take effect on July 1,
5 1996, with respect to any individual—

6 “(i) whose claim for benefits is finally
7 adjudicated on or after the date of enact-
8 ment of this Act; or

9 “(ii) whose entitlement to benefits is
10 based on an entitlement redetermination
11 made pursuant to subparagraph (C).”.

12 (c) EFFECTIVE DATES.—The amendments made by
13 this section shall take effect as if included in the enact-
14 ment of section 105 of the Contract with America Ad-
15 vancement Act of 1996 (Public Law 104–121; 110 Stat.
16 852 et seq.).

17 **SEC. 402. TREATMENT OF PRISONERS.**

18 (a) IMPLEMENTATION OF PROHIBITION AGAINST
19 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

20 (1) IN GENERAL.—Section 202(x)(3) of the So-
21 cial Security Act (42 U.S.C. 402(x)(3)) is
22 amended—

23 (A) by inserting “(A)” after “(3)”; and

24 (B) by adding at the end the following:

1 “(B)(i) The Commissioner shall enter into an agree-
2 ment under this subparagraph with any interested State
3 or local institution comprising a jail, prison, penal institu-
4 tion, or correctional facility, or comprising any other insti-
5 tution a purpose of which is to confine individuals as de-
6 scribed in paragraph (1)(A)(ii). Under such agreement—

7 “(I) the institution shall provide to the Com-
8 missioner, on a monthly basis and in a manner spec-
9 ified by the Commissioner, the names, Social Secu-
10 rity account numbers, dates of birth, confinement
11 commencement dates, and, to the extent available to
12 the institution, such other identifying information
13 concerning the individuals confined in the institution
14 as the Commissioner may require for the purpose of
15 carrying out paragraph (1); and

16 “(II) the Commissioner shall pay to the institu-
17 tion, with respect to information described in sub-
18 clause (I) concerning each individual who is confined
19 therein as described in paragraph (1)(A), who re-
20 ceives a benefit under this title for the month pre-
21 ceeding the first month of such confinement, and
22 whose benefit under this title is determined by the
23 Commissioner to be not payable by reason of con-
24 finement based on the information provided by the
25 institution, \$400 (subject to reduction under clause

1 (ii) if the institution furnishes the information to
2 the Commissioner within 30 days after the date such
3 individual's confinement in such institution begins,
4 or \$200 (subject to reduction under clause (ii)) if
5 the institution furnishes the information after 30
6 days after such date but within 90 days after such
7 date.

8 “(ii) The dollar amounts specified in clause (i)(II)
9 shall be reduced by 50 percent if the Commissioner is also
10 required to make a payment to the institution with respect
11 to the same individual under an agreement entered into
12 under section 1611(e)(1)(I).

13 “(iii) There is authorized to be transferred from the
14 Federal Old-Age and Survivors Insurance Trust Fund and
15 the Federal Disability Insurance Trust Fund, as appro-
16 priate, such sums as may be necessary to enable the Com-
17 missioner to make payments to institutions required by
18 clause (i)(II).

19 “(iv) The Commissioner is authorized to provide, on
20 a reimbursable basis, information obtained pursuant to
21 agreements entered into under clause (i) to any agency
22 administering a Federal or federally assisted cash, food,
23 or medical assistance program for eligibility purposes.”.

1 (2) CONFORMING AMENDMENT TO THE PRI-
2 VACY ACT.—Section 552a(a)(8)(B) of title 5, United
3 States Code, is amended—

4 (A) in clause (vi), by striking “or” at the
5 end;

6 (B) in clause (vii), by adding “or” at the
7 end; and

8 (C) by adding at the end the following:

9 “(viii) matches performed pursuant to
10 section 202(x)(3)(B) or 1611(e)(1)(I) of
11 the Social Security Act (42 U.S.C.
12 402(x)(3)(B), 1382(e)(1)(I));”.

13 (3) EFFECTIVE DATE.—The amendments made
14 by this subsection shall apply to individuals whose
15 period of confinement in an institution commences
16 on or after the first day of the fourth month begin-
17 ning after the month in which this Act is enacted.

18 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
19 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
20 PRISONMENT FOR MORE THAN 1 YEAR.—

21 (1) IN GENERAL.—Section 202(x)(1)(A) of the
22 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
23 amended—

24 (A) in the matter preceding clause (i), by
25 striking “during” and inserting “throughout”;

1 (B) in clause (i), by striking “an offense
2 punishable by imprisonment for more than 1
3 year (regardless of the actual sentence im-
4 posed)” and inserting “a criminal offense”; and

5 (C) in clause (ii)(I), by striking “an of-
6 fense punishable by imprisonment for more
7 than 1 year” and inserting “a criminal of-
8 fense”.

9 (2) EFFECTIVE DATE.—The amendments made
10 by this subsection shall apply to individuals whose
11 period of confinement in an institution commences
12 on or after the first day of the fourth month begin-
13 ning after the month in which this Act is enacted.

14 (c) CONFORMING TITLE XVI AMENDMENTS.—

15 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
16 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
17 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
18 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

19 (A) in clause (i)(II), by inserting “(subject
20 to reduction under clause (ii))” after “\$400”
21 and after “\$200”;

22 (B) by redesignating clauses (ii) and (iii)
23 as clauses (iii) and (iv), respectively; and

24 (C) by inserting after clause (i) the fol-
25 lowing:

1 “(ii) The dollar amounts specified in clause (i)(II)
2 shall be reduced by 50 percent if the Commissioner is also
3 required to make a payment to the institution with respect
4 to the same individual under an agreement entered into
5 under section 202(x)(3)(B).”.

6 (2) EXPANSION OF CATEGORIES OF INSTITU-
7 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
8 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
9 the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i))
10 is amended in the matter preceding subclause (I) by
11 striking “institution” and all that follows through
12 “section 202(x)(1)(A),” and inserting “institution
13 comprising a jail, prison, penal institution, or correc-
14 tional facility, or with any other interested State or
15 local institution a purpose of which is to confine in-
16 dividuals as described in section 202(x)(1)(A)(ii),”.

17 (3) ELIMINATION OF OVERLY BROAD EXEMP-
18 TION.—Section 1611(e)(1)(I)(iii) of such Act (42
19 U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by para-
20 graph (1)(B), is amended by striking “(I) The provi-
21 sions” and all that follows through “(II)”.

22 (4) EFFECTIVE DATE.—The amendments made
23 by this subsection shall take effect as if included in
24 the enactment of section 203(a) of the Personal Re-
25 sponsibility and Work Opportunity Reconciliation

1 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
 2 The reference to section 202(x)(1)(A)(ii) of the So-
 3 cial Security Act in section 1611(e)(1)(I)(i) of the
 4 Social Security Act as amended by paragraph (2)
 5 shall be deemed a reference to such section
 6 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

7 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
 8 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
 9 TIONS UPON COMPLETION OF PRISON TERM.—

10 (1) IN GENERAL.—Section 202(x)(1)(A) of the
 11 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
 12 amended—

13 (A) in clause (i), by striking “or” at the
 14 end;

15 (B) in clause (ii)(IV), by striking the pe-
 16 riod and inserting “, or”; and

17 (C) by adding at the end the following:

18 “(iii) immediately upon completion of confine-
 19 ment as described in clause (i) pursuant to convic-
 20 tion of a criminal offense an element of which is sex-
 21 ual activity, is confined by court order in an institu-
 22 tion at public expense pursuant to a finding that the
 23 individual is a sexually dangerous person or a sexual
 24 predator or a similar finding.”.

1 (2) CONFORMING AMENDMENT.—Section
2 202(x)(1)(B)(ii) of the Social Security Act (42
3 U.S.C. 402(x)(1)(B)(ii)) is amended by striking
4 “clause (ii)” and inserting “clauses (ii) and (iii)”.

5 (3) EFFECTIVE DATE.—The amendments made
6 by this subsection shall apply with respect to bene-
7 fits for months ending after the date of enactment
8 of this Act.

9 **SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
10 **EXEMPTION FROM SOCIAL SECURITY COV-**
11 **ERAGE.**

12 (a) IN GENERAL.—Notwithstanding section
13 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
14 emption which has been received under section 1402(e)(1)
15 of such Code by a duly ordained, commissioned, or li-
16 censed minister of a church, a member of a religious order,
17 or a Christian Science practitioner, and which is effective
18 for the taxable year in which this Act is enacted, may be
19 revoked by filing an application therefore (in such form
20 and manner, and with such official, as may be prescribed
21 by the Commissioner of the Internal Revenue Service), if
22 such application is filed no later than the due date of the
23 Federal income tax return (including any extension there-
24 of) for the applicant’s second taxable year beginning after
25 December 31, 1999. Any such revocation shall be effective

1 (for purposes of chapter 2 of the Internal Revenue Code
2 of 1986 and title II of the Social Security Act), as speci-
3 fied in the application, either with respect to the appli-
4 cant's first taxable year beginning after December 31,
5 1999, or with respect to the applicant's second taxable
6 year beginning after such date, and for all succeeding tax-
7 able years; and the applicant for any such revocation may
8 not thereafter again file application for an exemption
9 under such section 1402(e)(1). If the application is filed
10 after the due date of the applicant's Federal income tax
11 return for a taxable year and is effective with respect to
12 that taxable year, it shall include or be accompanied by
13 payment in full of an amount equal to the total of the
14 taxes that would have been imposed by section 1401 of
15 the Internal Revenue Code of 1986 with respect to all of
16 the applicant's income derived in that taxable year which
17 would have constituted net earnings from self-employment
18 for purposes of chapter 2 of such Code (notwithstanding
19 paragraph (4) or (5) of section 1402(c) of such Code) ex-
20 cept for the exemption under section 1402(e)(1) of such
21 Code.

22 (b) EFFECTIVE DATE.—Subsection (a) shall apply
23 with respect to service performed (to the extent specified
24 in such subsection) in taxable years beginning after De-
25 cember 31, 1999, and with respect to monthly insurance

1 benefits payable under title II of the Social Security Act
 2 on the basis of the wages and self-employment income of
 3 any individual for months in or after the calendar year
 4 in which such individual's application for revocation (as
 5 described in such subsection) is effective (and lump-sum
 6 death payments payable under such title on the basis of
 7 such wages and self-employment income in the case of
 8 deaths occurring in or after such calendar year).

9 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
 10 **TO COOPERATIVE RESEARCH OR DEM-**
 11 **ONSTRATION PROJECTS UNDER TITLES II**
 12 **AND XVI.**

13 (a) IN GENERAL.—Section 1110(a)(3) of the Social
 14 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
 15 ing “title XVI” and inserting “title II or XVI”.

16 (b) EFFECTIVE DATE.—The amendment made by
 17 subsection (a) shall take effect as if included in the enact-
 18 ment of the Social Security Independence and Program
 19 Improvements Act of 1994 (Public Law 103–296; 108
 20 Stat. 1464).

21 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
 22 **WAGE REPORTS.**

23 (a) IN GENERAL.—Section 1137(a)(3) of the Social
 24 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
 25 inserting before the semicolon the following: “, and except

1 that in the case of wage reports with respect to domestic
2 service employment, a State may permit employers (as so
3 defined) that make returns with respect to such employ-
4 ment on a calendar year basis pursuant to section 3510
5 of the Internal Revenue Code of 1986 to make such re-
6 ports on an annual basis”.

7 (b) TECHNICAL AMENDMENTS.—Section 1137(a)(3)
8 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
9 amended—

10 (1) by striking “(as defined in section
11 453A(a)(2)(B)(iii))”; and

12 (2) by inserting “(as defined in section
13 453A(a)(2)(B))” after “employers” .

14 (c) EFFECTIVE DATE.—The amendments made by
15 this section shall apply to wage reports required to be sub-
16 mitted on and after the date of enactment of this Act.

Passed the Senate June 16, 1999.

Attest:

Secretary.

106TH CONGRESS
1ST SESSION

S. 331

AN ACT

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

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| S 331 ES— | 8 |
| S 331 ES— | 9 |
| S 331 ES— | 10 |

Mr. BONIOR. I thank my colleague. I will rest well this weekend with his assurances.

Let me ask my friend from New York, the Vieques resolution, when does he expect that up on suspensions and what day, if it is under suspension?

Mr. LAZIO. If the gentleman will continue to yield, I would say to the gentleman that we are trying to negotiate through and accommodate the minority's concerns on this piece of legislation. We will have a hearing and markup in committee. It will go through regular order, as expected.

We are trying to accommodate the concerns that have been raised by the minority before we see it on the floor.

Mr. BONIOR. Am I to gather from the gentleman's answer that this will be under regular order and not under the Suspension Calendar?

Mr. LAZIO. I would say to the gentleman, I think the plan is to go through the committee process and to have regular hearings, have a markup, and have it on the floor, but not next week. It is not likely to be up on the floor for next week.

Mr. BONIOR. Let me ask the gentleman one other question. Tuesday is Election Day, as my colleague knows, across the country. Will votes occur after a certain time on Tuesday?

Mr. LAZIO. We are trying to ensure that the votes will be held until the afternoon to allow those Members who have the opportunity, that live in the close proximity and have the ability to have a flight to get back after votes on Monday evening, to do that.

So I would say Members should anticipate not having any votes in the morning of Tuesday nor in the early afternoon, but rather in the mid or later afternoon would be the earliest we would have votes. Members should stay in contact, I think, with their respective cloakrooms. We will perhaps be giving more updates on Tuesday.

Mr. BONIOR. Finally, if the gentleman from New York can tell me when he expects to have the conferees named on the Patients' Bill of Rights?

Mr. LAZIO. I would say to the gentleman that we are expecting that would be completed for next week.

Mr. BONIOR. The gentleman expects to name conferees next week?

Mr. LAZIO. Yes, sir.

Mr. BONIOR. How about Friday, next Friday? Do we anticipate votes next Friday?

Mr. LAZIO. Right now I would say to the gentleman that it appears that Members should count on being here for Friday votes. We expect the House to be in session for votes on Friday.

As the gentleman knows, the CR expires on Friday. It would be wonderful if we had an accommodation and agreement that would allow us to conclude our business by Friday, but right now, Members should anticipate being here on Friday.

Mr. BONIOR. I thank my colleague.

ADJOURNMENT TO MONDAY, NOVEMBER 1, 1999

Mr. BLUNT. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 12:30 p.m. on Monday next for morning hour debates.

The SPEAKER pro tempore (Mr. PEASE). Is there objection to the request of the gentleman from Missouri? There was no objection.

DISPENSING WITH CALENDAR WEDNESDAY BUSINESS ON WEDNESDAY NEXT

Mr. BLUNT. Mr. Speaker, I ask unanimous consent that business in order under the Calendar Wednesday rule be dispensed with on Wednesday next.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

REMOVAL OF NAME OF MEMBER AS COSPONSOR OF H.R. 3140

Mr. BLUNT. Mr. Speaker, I ask unanimous consent that my name be removed from the cosponsorship of H.R. 3140.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Missouri?

There was no objection.

ANNOUNCEMENT REGARDING SUB- MISSION OF AMENDMENTS ON H.R. 2389, COUNTY SCHOOLS FUNDING REVITALIZATION ACT OF 1999

(Mr. DREIER asked and was given permission to address the House for 1 minute and to revise and extend his remarks.)

Mr. DREIER. Mr. Speaker, this afternoon a Dear Colleague letter was sent to all Members informing them that the Committee on Rules is planning to meet the week of November 1 to grant a rule for consideration of H.R. 2389, the County Schools Funding Revitalization Act of 1999.

The Committee on Rules may grant a rule which would require that amendments be preprinted in the CONGRESSIONAL RECORD. In this case, amendments must be preprinted prior to their consideration on the floor. Amendments should be drafted to an amendment in the nature of a substitute offered by the gentleman from Virginia (Mr. GOODLATTE) which will be printed in today's CONGRESSIONAL RECORD and numbered 1.

It is the intention of the Committee on Rules to make in order the amendment offered by the gentleman from Virginia (Mr. GOODLATTE) as base text for the purpose of further amendment. Members should use the Office of Legislative Counsel to assure that their amendments are properly drafted, and should check with the Office of the Parliamentarian to be certain that

their amendments comply with the rules of the House.

APPOINTMENT OF CONFEREES ON H.R. 1180, TICKET TO WORK AND WORK INCENTIVES IMPROVE- MENT ACT OF 1999

Mr. ARCHER. Mr. Speaker, I ask unanimous consent to take from the Speaker's table the bill (H.R. 1180) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes, with a Senate amendment thereto, disagree to the Senate amendment, and agree to the conference asked by the Senate.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas? The Chair hears none and, without objection, appoints the following conferees: Messrs. ARCHER, BLILEY, ARMEY, RANGEL, and DINGELL.

There was no objection.

APPOINTMENT OF MEMBERS TO ATTEND THE FUNERAL OF THE LATE SENATOR JOHN H. CHAFEE

The SPEAKER pro tempore. Pursuant to the provisions of House Resolution 341, the Chair announces the Speaker's appointment of the following Members of the House to the committee to attend the funeral of the late John H. Chafee:

Mr. KENNEDY of Rhode Island;
Mr. WEYGAND of Rhode Island;
Mr. SHUSTER of Pennsylvania;
Mr. WAXMAN of California; and
Mr. PETRI of Wisconsin.

□ 1745

SPECIAL ORDERS

The SPEAKER pro tempore (Mr. PEASE). Under the Speaker's announced policy of January 6, 1999, and under a previous order of the House, the following Members will be recognized for 5 minutes each.

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. GOSS) is recognized for 5 minutes.

(Mr. GOSS addressed the House. His remarks will appear hereafter in the Extensions of Remarks.)

U.S.-INDIA RELATIONS

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from New Jersey (Mr. PALLONE) is recognized for 5 minutes.

Mr. PALLONE. Mr. Speaker, I wanted to take this time to talk about some important developments in the relationship between the United States and India.

Mr. SANTORUM. Mr. President, I ask for the yeas and nays on the amendment.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

Mr. SANTORUM. Mr. President, I move to table amendment No. 2321 and ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

The PRESIDING OFFICER. The question is on agreeing to the motion to table the amendment No. 2321. The yeas and nays have been ordered.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. NICKLES. I announce that the Senator from Arizona (Mr. MCCAIN) is necessarily absent.

The result was announced—yeas 48, nays 51, as follows:

[Rollcall Vote No. 336 Leg.]

YEAS—48

| | | |
|-----------|------------|------------|
| Abraham | Fitzgerald | Mack |
| Allard | Frist | McConnell |
| Ashcroft | Gorton | Murkowski |
| Bennett | Gramm | Nickles |
| Bond | Grams | Reid |
| Breaux | Grassley | Roberts |
| Brownback | Gregg | Roth |
| Bunning | Hagel | Santorum |
| Burns | Hatch | Sessions |
| Cochran | Helms | Shelby |
| Coverdell | Hutchinson | Smith (NH) |
| Craig | Hutchison | Smith (OR) |
| Crapo | Inhofe | Thomas |
| DeWine | Kyl | Thompson |
| Domenici | Lott | Thurmond |
| Enzi | Lugar | Voinovich |

NAYS—51

| | | |
|----------|------------|-------------|
| Akaka | Edwards | Lieberman |
| Baucus | Feingold | Lincoln |
| Bayh | Feinstein | Mikulski |
| Biden | Graham | Moynihan |
| Bingaman | Harkin | Murray |
| Boxer | Hollings | Reed |
| Bryan | Inouye | Robb |
| Byrd | Jeffords | Rockefeller |
| Campbell | Johnson | Sarbanes |
| Chafee | Kennedy | Schumer |
| Cleland | Kerrey | Snowe |
| Collins | Kerry | Specter |
| Conrad | Kohl | Stevens |
| Daschle | Landrieu | Torricelli |
| Dodd | Lautenberg | Warner |
| Dorgan | Leahy | Wellstone |
| Durbin | Levin | Wyden |

NOT VOTING—1

McCain

The motion was rejected.

Mr. BYRD. Mr. President, earlier today I voted against tabling a sense of the Congress amendment proposed by Senator HARKIN regarding the Supreme Court's 1973 decision in the case of Roe v. Wade. Because that vote was, to the best of my recollection, the first time the Senate has directly and specifically addressed the issue of the Court's ruling, I wish to take a few moments to explain my position for the benefit of my constituents in West Virginia.

First, despite the fact that I supported the Harkin amendment, I reiterate that I am, as I always have been, personally opposed to abortion, with few exceptions—such as when the life of the woman would be endangered, or in cases of incest or rape, when promptly reported.

However, the reality of the situation is that the decision of the Supreme Court in Roe v. Wade is the law of the land. No matter what I think personally of the procedure in question, I accept the fact that the Court, in a 7-to-2 ruling, has definitively spoken on this matter. Accordingly, I felt it was appropriate to support the language of the Harkin amendment.

The PRESIDING OFFICER. The question is on agreeing to the amendment. The yeas and nays have been ordered.

The Senator from Pennsylvania.

Mr. SANTORUM. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mrs. HUTCHISON. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Pennsylvania.

Mr. SANTORUM. Mr. President, I ask unanimous consent there be a vote on the Harkin amendment at 2 o'clock.

The PRESIDING OFFICER. Is there objection? Without objection, it is so ordered.

WORK INCENTIVES IMPROVEMENT ACT OF 1999

Mr. SANTORUM. Mr. President, I ask unanimous consent the Senate now proceed to the consideration of H.R. 1180, the work incentives bill. I further ask consent that all after the enacting clause be stricken and the text of S. 331, as passed by the Senate, be inserted in lieu thereof. I further ask the bill be read a third time and passed, the motion to reconsider be laid upon the table, the Senate then insist upon its amendment, and request a conference with the House.

I further ask consent that nothing in this agreement shall alter the provisions of the consent agreement on June 14, 1999, relating to S. 331.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill (H.R. 1180), as amended, was read the third time and passed.

(The text of S. 331 is printed in the CONGRESSIONAL RECORD of June 16, 1999.)

Mr. SANTORUM. Mr. President, I ask unanimous consent the Chair be authorized to appoint conferees on the part of the Senate.

The PRESIDING OFFICER. Is there objection?

Mr. KENNEDY. Reserving the right to object. I reserve the right to object, Mr. President.

The PRESIDING OFFICER. The Senator reserves the right to object.

Mr. KENNEDY. If the Senator from Pennsylvania is the acting leader, could he give us some indication of when we will go to conference on that legislation? It is the most important piece of legislation affecting the dis-

abled in this country. We have passed the legislation 99-0. It has been in the House of Representatives for several months. I hope at the time we are announcing we are going to appoint conferees, we would have at least some indication from the leadership as to when we are going to get to conference. I know millions of disabled Americans across this country will want to know what the intention of the leadership is on this legislation.

Can the Senator give us some idea?

Mr. SANTORUM. I say to the Senator from Massachusetts, first, I think this bill we are considering right now has a far greater impact on people with disabilities to come than this piece of legislation. But that being said, I am just doing this on behalf of the leader. I have not conferred with the leader as to what his plans are, so I am unable to answer the Senator's question.

Mr. KENNEDY. Further reserving the right to object, and I will not at this time, I think this legislation is of enormous importance. We are very hopeful we will get an early conference on it and we will get a favorable resolution. This has passed 99-0 in our body. It is a good bill that came out of the House. It is legislation we ought to complete before we adjourn.

I have no objection.

There being no objection, the Presiding Officer (Mr. HAGEL) appointed Mr. ROTH, Mr. LOTT, and Mr. MOYNIHAN conferees on the part of the Senate.

PARTIAL-BIRTH ABORTION BAN ACT OF 1999—Continued

Mr. BROWNBACK. Mr. President, I submit for the RECORD a speech given by Mother Teresa. I think it is quite germane to this debate we are having on partial-birth abortion. It is piercing in its view of the truth. It is piercing in its view of the issue of abortion. It is quite clear. I think it is full of great wisdom.

I ask unanimous consent it be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

THIS GIFT OF PEACE—SMILE AT EACH OTHER

(By Mother Teresa)

As we have gathered here together to thank God for the Nobel Peace Prize, I think it will be beautiful that we pray the prayer of St. Francis of Assisi which always surprises me very much—we pray this prayer every day after Holy Communion, because it is very fitting for each one of us, and I always wonder that 4-500 years ago as St. Francis of Assisi composed this prayer that they had the same difficulties that we have today, as we compose this prayer that fits very nicely for us also. I think some of you already have got it—so we will pray together.

Let us thank God for the opportunity that we all have together today, for this gift of peace that reminds us that we have been created to live that peace, and Jesus became man to bring that good news to the poor. He being God became man in all things like us except sin, and he proclaimed very clearly that he had come to give the good news. The

TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT
ACT OF 1999

NOVEMBER 17, 1999.—Ordered to be printed

Mr. ARCHER, from the committee on conference,
submitted the following

CONFERENCE REPORT

[To accompany H.R. 1180]

The committee of conference on the disagreeing votes of the two Houses on the amendment of the Senate to the bill (H.R. 1180), to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes, having met, after full and free conference, have agreed to recommend and do recommend to their respective Houses as follows:

That the House recede from its disagreement to the amendment of the Senate and agree to the same with an amendment as follows:

In lieu of the matter proposed to be inserted by the Senate amendment, insert the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) *SHORT TITLE.*—*This Act may be cited as the “Ticket to Work and Work Incentives Improvement Act of 1999”.*

(b) *TABLE OF CONTENTS.*—*The table of contents is as follows:*

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

**TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED
PROVISIONS**

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

- Sec. 111. *Work activity standard as a basis for review of an individual's disabled status.*
 Sec. 112. *Expedited reinstatement of disability benefits.*

Subtitle C—Work Incentives Planning, Assistance, and Outreach

- Sec. 121. *Work incentives outreach program.*
 Sec. 122. *State grants for work incentives assistance to disabled beneficiaries.*

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

- Sec. 201. *Expanding State options under the medicaid program for workers with disabilities.*
 Sec. 202. *Extending medicare coverage for OASDI disability benefit recipients.*
 Sec. 203. *Grants to develop and establish State infrastructures to support working individuals with disabilities.*
 Sec. 204. *Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.*
 Sec. 205. *Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.*

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

- Sec. 301. *Extension of disability insurance program demonstration project authority.*
 Sec. 302. *Demonstration projects providing for reductions in disability insurance benefits based on earnings.*
 Sec. 303. *Studies and reports.*

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

- Sec. 401. *Technical amendments relating to drug addicts and alcoholics.*
 Sec. 402. *Treatment of prisoners.*
 Sec. 403. *Revocation by members of the clergy of exemption from social security coverage.*
 Sec. 404. *Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.*
 Sec. 405. *Authorization for State to permit annual wage reports.*
 Sec. 406. *Assessment on attorneys who receive their fees via the Social Security Administration.*
 Sec. 407. *Extension of authority of State medicaid fraud control units.*
 Sec. 408. *Climate database modernization.*
 Sec. 409. *Special allowance adjustment for student loans.*
 Sec. 410. *Schedule for payments under SSI state supplementation agreements.*
 Sec. 411. *Bonus commodities.*
 Sec. 412. *Simplification of definition of foster child under EIC.*
 Sec. 413. *Delay of effective date of organ procurement and transplantation network final rule.*

TITLE V—TAX RELIEF EXTENSION ACT OF 1999

- Sec. 500. *Short title of title.*

Subtitle A—Extensions

- Sec. 501. *Allowance of nonrefundable personal credits against regular and minimum tax liability.*
 Sec. 502. *Research credit.*
 Sec. 503. *Subpart F exemption for active financing income.*
 Sec. 504. *Taxable income limit on percentage depletion for marginal production.*
 Sec. 505. *Work opportunity credit and welfare-to-work credit.*
 Sec. 506. *Employer-provided educational assistance.*
 Sec. 507. *Extension and modification of credit for producing electricity from certain renewable resources.*
 Sec. 508. *Extension of duty-free treatment under Generalized System of Preferences.*
 Sec. 509. *Extension of credit for holders of qualified zone academy bonds.*
 Sec. 510. *Extension of first-time homebuyer credit for District of Columbia.*
 Sec. 511. *Extension of expensing of environmental remediation costs.*
 Sec. 512. *Temporary increase in amount of rum excise tax covered over to Puerto Rico and Virgin Islands.*

Subtitle B—Other Time-Sensitive Provisions

- Sec. 521. Advance pricing agreements treated as confidential taxpayer information.*
Sec. 522. Authority to postpone certain tax-related deadlines by reason of Y2K failures.
Sec. 523. Inclusion of certain vaccines against streptococcus pneumoniae to list of taxable vaccines.
Sec. 524. Delay in effective date of requirement for approved diesel or kerosene terminals.
Sec. 525. Production flexibility contract payments.

*Subtitle C—Revenue Offsets**PART I—GENERAL PROVISIONS*

- Sec. 531. Modification of estimated tax safe harbor.*
Sec. 532. Clarification of tax treatment of income and loss on derivatives.
Sec. 533. Expansion of reporting of cancellation of indebtedness income.
Sec. 534. Limitation on conversion of character of income from constructive ownership transactions.
Sec. 535. Treatment of excess pension assets used for retiree health benefits.
Sec. 536. Modification of installment method and repeal of installment method for accrual method taxpayers.
Sec. 537. Denial of charitable contribution deduction for transfers associated with split-dollar insurance arrangements.
Sec. 538. Distributions by a partnership to a corporate partner of stock in another corporation.

*PART II—PROVISIONS RELATING TO REAL ESTATE INVESTMENT TRUSTS**SUBPART A—TREATMENT OF INCOME AND SERVICES PROVIDED BY TAXABLE REIT SUBSIDIARIES*

- Sec. 541. Modifications to asset diversification test.*
Sec. 542. Treatment of income and services provided by taxable REIT subsidiaries.
Sec. 543. Taxable REIT subsidiary.
Sec. 544. Limitation on earnings stripping.
Sec. 545. 100 percent tax on improperly allocated amounts.
Sec. 546. Effective date.
Sec. 547. Study relating to taxable REIT subsidiaries.

SUBPART B—HEALTH CARE REITS

- Sec. 551. Health care REITs.*

SUBPART C—CONFORMITY WITH REGULATED INVESTMENT COMPANY RULES

- Sec. 556. Conformity with regulated investment company rules.*

SUBPART D—CLARIFICATION OF EXCEPTION FROM IMPERMISSIBLE TENANT SERVICE INCOME

- Sec. 561. Clarification of exception for independent operators.*

SUBPART E—MODIFICATION OF EARNINGS AND PROFITS RULES

- Sec. 566. Modification of earnings and profits rules.*

SUBPART F—MODIFICATION OF ESTIMATED TAX RULES

- Sec. 571. Modification of estimated tax rules for closely held real estate investment trusts.*

SEC. 2. FINDINGS AND PURPOSES.

(a) FINDINGS.—The Congress makes the following findings:

(1) It is the policy of the United States to provide assistance to individuals with disabilities to lead productive work lives.

(2) Health care is important to all Americans.

(3) Health care is particularly important to individuals with disabilities and special health care needs who often cannot afford the insurance available to them through the private market, are uninsurable by the plans available in the private sector,

and are at great risk of incurring very high and economically devastating health care costs.

(4) Americans with significant disabilities often are unable to obtain health care insurance that provides coverage of the services and supports that enable them to live independently and enter or rejoin the workforce. Personal assistance services (such as attendant services, personal assistance with transportation to and from work, reader services, job coaches, and related assistance) remove many of the barriers between significant disability and work. Coverage for such services, as well as for prescription drugs, durable medical equipment, and basic health care are powerful and proven tools for individuals with significant disabilities to obtain and retain employment.

(5) For individuals with disabilities, the fear of losing health care and related services is one of the greatest barriers keeping the individuals from maximizing their employment, earning potential, and independence.

(6) Social Security Disability Insurance and Supplemental Security Income beneficiaries risk losing medicare or medicaid coverage that is linked to their cash benefits, a risk that is an equal, or greater, work disincentive than the loss of cash benefits associated with working.

(7) Individuals with disabilities have greater opportunities for employment than ever before, aided by important public policy initiatives such as the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.), advancements in public understanding of disability, and innovations in assistive technology, medical treatment, and rehabilitation.

(8) Despite such historic opportunities and the desire of millions of disability recipients to work and support themselves, fewer than one-half of one percent of Social Security Disability Insurance and Supplemental Security Income beneficiaries leave the disability rolls and return to work.

(9) In addition to the fear of loss of health care coverage, beneficiaries cite financial disincentives to work and earn income and lack of adequate employment training and placement services as barriers to employment.

(10) Eliminating such barriers to work by creating financial incentives to work and by providing individuals with disabilities real choice in obtaining the services and technology they need to find, enter, and maintain employment can greatly improve their short- and long-term financial independence and personal well-being.

(11) In addition to the enormous advantages such changes promise for individuals with disabilities, redesigning government programs to help individuals with disabilities return to work may result in significant savings and extend the life of the Social Security Disability Insurance Trust Fund.

(12) If only an additional one-half of one percent of the current Social Security Disability Insurance and Supplemental Security Income recipients were to cease receiving benefits as a result of employment, the savings to the Social Security Trust Funds and to the Treasury in cash assistance would total \$3,500,000,000 over the worklife of such individuals, far exceed-

ing the cost of providing incentives and services needed to assist them in entering work and achieving financial independence to the best of their abilities.

(b) PURPOSES.—The purposes of this Act are as follows:

(1) To provide health care and employment preparation and placement services to individuals with disabilities that will enable those individuals to reduce their dependency on cash benefit programs.

(2) To encourage States to adopt the option of allowing individuals with disabilities to purchase medicaid coverage that is necessary to enable such individuals to maintain employment.

(3) To provide individuals with disabilities the option of maintaining medicare coverage while working.

(4) To establish a return to work ticket program that will allow individuals with disabilities to seek the services necessary to obtain and retain employment and reduce their dependency on cash benefit programs.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) IN GENERAL.—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding at the end the following new section:

“THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

“SEC. 1148. (a) IN GENERAL.—The Commissioner shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary’s choice and which is willing to provide such services to such beneficiary.

“(b) TICKET SYSTEM.—

“(1) DISTRIBUTION OF TICKETS.—The Commissioner may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

“(2) ASSIGNMENT OF TICKETS.—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary’s choice which is serving under the Program and is willing to accept the assignment.

“(3) TICKET TERMS.—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner’s agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support

services as the employment network may provide to the beneficiary.

“(4) *PAYMENTS TO EMPLOYMENT NETWORKS.*—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

“(c) *STATE PARTICIPATION.*—

“(1) *IN GENERAL.*—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.) may elect to participate in the Program as an employment network with respect to a disabled beneficiary. If the State agency does elect to participate in the Program, the State agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system in accordance with subsection (h)(1). With respect to a disabled beneficiary that the State agency does not elect to have participate in the Program, the State agency shall be paid for services provided to that beneficiary under the system for payment applicable under section 222(d) and subsections (d) and (e) of section 1615. The Commissioner shall provide for periodic opportunities for exercising such elections.

“(2) *EFFECT OF PARTICIPATION BY STATE AGENCY.*—

“(A) *STATE AGENCIES PARTICIPATING.*—In any case in which a State agency described in paragraph (1) elects under that paragraph to participate in the Program, the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.).

“(B) *STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.*—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

“(3) *AGREEMENTS BETWEEN STATE AGENCIES AND EMPLOYMENT NETWORKS.*—State agencies and employment networks shall enter into agreements regarding the conditions under which services will be provided when an individual is referred by an employment network to a State agency for services. The Commissioner shall establish by regulations the timeframe within which such agreements must be entered into and the mechanisms for dispute resolution between State agencies and employment networks with respect to such agreements.

“(d) *RESPONSIBILITIES OF THE COMMISSIONER.*—

“(1) *SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.*—The Commissioner shall enter into agreements with 1 or more organizations in the private or public sector for service as a program manager to assist the Commissioner in admin-

istering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

“(2) *TENURE, RENEWAL, AND EARLY TERMINATION.*—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include—

“(A) measures for ease of access by beneficiaries to services; and

“(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) *PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.*—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement; and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) *SELECTION OF EMPLOYMENT NETWORKS.*—

“(A) *IN GENERAL.*—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(B) *ALTERNATE PARTICIPANTS.*—In any State where the Program is being implemented, the Commissioner shall enter into an agreement with any alternate participant that is operating under the authority of section 222(d)(2) in the State as of the date of the enactment of this section and chooses to serve as an employment network under the Program.

“(5) *TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.*—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) *QUALITY ASSURANCE.*—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall solicit and consider the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service re-

ipients as they select employment networks. The Commissioner shall ensure that the periodic surveys of beneficiaries receiving services under the Program are designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks without being deemed to have rejected services under the Program. When such a change occurs, the program manager shall reassign the ticket based on the choice of the beneficiary. Upon the request of the employment network, the program manager shall make a determination of the allocation of the outcome or milestone-outcome payments based on the services provided by each employment network. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible formats.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are

provided to beneficiaries throughout the geographic area covered under the program manager's agreement, including rural areas.

"(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Services provided under the Program may include case management, work incentives planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are available in each service area.

"(f) EMPLOYMENT NETWORKS.—

"(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—

"(A) IN GENERAL.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, that assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b).

"(B) ONE-STOP DELIVERY SYSTEMS.—An employment network serving under the Program may consist of a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998 (29 U.S.C. 2811 et seq.).

"(C) COMPLIANCE WITH SELECTION CRITERIA.—No employment network may serve under the Program unless it meets and maintains compliance with both general selection criteria (such as professional and educational qualifications, where applicable) and specific selection criteria (such as substantial expertise and experience in providing relevant employment services and supports).

"(D) SINGLE OR ASSOCIATED PROVIDERS ALLOWED.—An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

"(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

"(A) serve prescribed service areas; and

"(B) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or

under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) REQUIREMENTS.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subparagraph (C);

“(B) develop and implement each such individual work plan, in partnership with each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal;

“(C) ensure that each individual work plan includes at least—

“(i) a statement of the vocational goal developed with the beneficiary, including, as appropriate, goals for earnings and job advancement;

“(ii) a statement of the services and supports that have been deemed necessary for the beneficiary to accomplish that goal;

“(iii) a statement of any terms and conditions related to the provision of such services and supports; and

“(iv) a statement of understanding regarding the beneficiary’s rights under the Program (such as the right to retrieve the ticket to work and self-sufficiency if the beneficiary is dissatisfied with the services being provided by the employment network) and remedies available to the individual, including information on the availability of advocacy services and assistance in

resolving disputes through the State grant program authorized under section 1150;

“(D) provide a beneficiary the opportunity to amend the individual work plan if a change in circumstances necessitates a change in the plan; and

“(E) make each beneficiary’s individual work plan available to the beneficiary in, as appropriate, an accessible format chosen by the beneficiary.

“(2) EFFECTIVE UPON WRITTEN APPROVAL.—A beneficiary’s individual work plan shall take effect upon written approval by the beneficiary or a representative of the beneficiary and a representative of the employment network that, in providing such written approval, acknowledges assignment of the beneficiary’s ticket to work and self-sufficiency.

“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

“(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

“(B) NO CHANGE IN METHOD OF PAYMENT FOR BENEFICIARIES WITH TICKETS ALREADY ASSIGNED TO THE EMPLOYMENT NETWORKS.—Any election of a payment system by an employment network that would result in a change in the method of payment to the employment network for services provided to a beneficiary who is receiving services from the employment network at the time of the election shall not be effective with respect to payment for services provided to that beneficiary and the method of payment previously selected shall continue to apply with respect to such services.

“(2) OUTCOME PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual’s outcome payment period, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual because of work or earnings.

“(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

“(i) the payment for each month during the outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs; and

“(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

“(3) **OUTCOME-MILESTONE PAYMENT SYSTEM.**—

“(A) **IN GENERAL.**—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) **EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.**—The outcome-milestone payment system shall provide for 1 or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, that are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure that provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

“(C) **LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.**—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

“(4) **DEFINITIONS.**—In this subsection:

“(A) **PAYMENT CALCULATION BASE.**—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year; and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained 18 years of age but have not attained 65 years of age.

“(B) **OUTCOME PAYMENT PERIOD.**—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity; and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNTS OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, or other reliable sources.

“(C) REPORT ON THE ADEQUACY OF INCENTIVES.—The Commissioner shall submit to the Congress not later than 36 months after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999 a re-

port with recommendations for a method or methods to adjust payment rates under subparagraphs (A) and (B), that would ensure adequate incentives for the provision of services by employment networks of—

“(i) individuals with a need for ongoing support and services;

“(ii) individuals with a need for high-cost accommodations;

“(iii) individuals who earn a subminimum wage; and

“(iv) individuals who work and receive partial cash benefits.

The Commissioner shall consult with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 during the development and evaluation of the study. The Commissioner shall implement the necessary adjusted payment rates prior to full implementation of the Ticket to Work and Self-Sufficiency Program.

“(i) *SUSPENSION OF DISABILITY REVIEWS.*—During any period for which an individual is using, as defined by the Commissioner, a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) *AUTHORIZATIONS.*—

“(1) *PAYMENTS TO EMPLOYMENT NETWORKS.*—

“(A) *TITLE II DISABILITY BENEFICIARIES.*—There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums as may be necessary to make payments to employment networks under this section. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund.

“(B) *TITLE XVI DISABILITY BENEFICIARIES.*—Amounts authorized to be appropriated to the Social Security Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

“(2) *ADMINISTRATIVE EXPENSES.*—The costs of administering this section (other than payments to employment networks) shall be paid from amounts made available for the administration of title II and amounts made available for the ad-

ministration of title XVI, and shall be allocated among such amounts as appropriate.

“(k) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(3) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(4) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

“(5) SUPPLEMENTAL SECURITY INCOME BENEFIT.—The term ‘supplemental security income benefit under title XVI’ means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

“(l) REGULATIONS.—Not later than 1 year after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999, the Commissioner shall prescribe such regulations as are necessary to carry out the provisions of this section.”.

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(i) of the Social Security Act (42 U.S.C. 421(i)) is amended by adding at the end the following new paragraph:

“(5) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”.

(B) Section 222(a) of such Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of such Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of such Act (42 U.S.C. 425(b)(1)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of such Act (42 U.S.C. 1382d(a)) is amended to read as follows:

“SEC. 1615. (a) In the case of any blind or disabled individual who—

“(1) has not attained age 16; and
 “(2) with respect to whom benefits are paid under this title, the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.”.

(B) Section 1615(c) of such Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of such Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(D) Section 1633(c) of such Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting “(1)” after “(c)”; and

(ii) by adding at the end the following new paragraph:

“(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”.

(c) **EFFECTIVE DATE.**—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following 1 year after the date of the enactment of this Act.

(d) **GRADUATED IMPLEMENTATION OF PROGRAM.**—

(1) **IN GENERAL.**—Not later than 1 year after the date of the enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) **REQUIREMENTS.**—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) **FULL IMPLEMENTATION.**—The Commissioner shall ensure that ability to provide tickets and services to individuals under the Program exists in every State as soon as practicable on or after the effective date specified in subsection (c) but not later than 3 years after such date.

(4) **ONGOING EVALUATION OF PROGRAM.**—

(A) **IN GENERAL.**—The Commissioner shall provide for independent evaluations to assess the effectiveness of the

activities carried out under this section and the amendments made thereby. Such evaluations shall address the cost-effectiveness of such activities, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) CONSULTATION.—Evaluations shall be conducted under this paragraph after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program and in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of this Act, the Comptroller General of the United States, other agencies of the Federal Government, and private organizations with appropriate expertise.

(C) METHODOLOGY.—

(i) IMPLEMENTATION.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of this Act, shall ensure that plans for evaluations and data collection methods under the Program are appropriately designed to obtain detailed employment information.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to)—

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of individuals in possession of tickets under the Program who are not accepted for services and, to the extent reasonably

determinable, the reasons for which such beneficiaries were not accepted for services;

(VII) the characteristics of providers whose services are provided within an employment network under the Program;

(VIII) the extent (if any) to which employment networks display a greater willingness to provide services to beneficiaries with a range of disabilities;

(IX) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome payment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(X) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(XI) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(D) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) of the Social Security Act (42 U.S.C. 422(a)) for prompt referrals to a State agency; and

(ii) the authority of the Commissioner under section 222(d)(2) of such Act (42 U.S.C. 422(d)(2)) to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals, shall apply in such State.

(B) *EXISTING AGREEMENTS.*—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act (42 U.S.C. 422(d)(2)) before the date of the enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to services (if any) to be provided after 3 years after the effective date provided in subsection (c).

(e) *SPECIFIC REGULATIONS REQUIRED.*—

(1) *IN GENERAL.*—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) *SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.*—The matters which shall be addressed in such regulations shall include—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1148(b)(1) of the Social Security Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program pursuant to section 1148(c)(1) of such Act and provision for periodic opportunities for exercising such elections;

(D) the status of State agencies under section 1148(c)(1) of such Act at the time that State agencies exercise elections under that section;

(E) the terms of agreements to be entered into with program managers pursuant to section 1148(d) of such Act, including—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1148(d)(3) of such Act;

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1148(d) of such Act and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1148(e) of such Act; and

(iii) the format under which dispute resolution will operate under section 1148(d)(7) of such Act;

(F) the terms of agreements to be entered into with employment networks pursuant to section 1148(d)(4) of such Act, including—

(i) the manner in which service areas are specified pursuant to section 1148(f)(2)(A) of such Act;

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1148(f)(1)(C) of such Act in selecting service providers;

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1148(f)(3) of such Act; and

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1148(f)(4) of such Act;

(G) standards which must be met by individual work plans pursuant to section 1148(g) of such Act;

(H) standards which must be met by payment systems required under section 1148(h) of such Act, including—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1148(h)(1)(A) of such Act;

(ii) the terms which must be met by an outcome payment system under section 1148(h)(2) of such Act;

(iii) the terms which must be met by an outcome-milestone payment system under section 1148(h)(3) of such Act;

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1148(h) of such Act or the period of time specified in paragraph (4)(B) of such section 1148(h) of such Act; and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

(f) **THE TICKET TO WORK AND WORK INCENTIVES ADVISORY PANEL.**—

(1) **ESTABLISHMENT.**—There is established within the Social Security Administration a panel to be known as the “Ticket to Work and Work Incentives Advisory Panel” (in this subsection referred to as the “Panel”).

(2) **DUTIES OF PANEL.**—It shall be the duty of the Panel to—

(A) advise the President, the Congress, and the Commissioner of Social Security on issues related to work incentives programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq., 1395 et seq., 1396 et seq.); and

(B) with respect to the Ticket to Work and Self-Sufficiency Program established under section 1148 of such Act—

(i) advise the Commissioner of Social Security with respect to establishing phase-in sites for such Program and fully implementing the Program thereafter, the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems, and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program;

(ii) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to section 302 of this Act;

(iii) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1148(d)(6) of the Social Security Act; and

(iv) furnish progress reports on the Program to the Commissioner and each House of Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 12 members as follows:

(i) 4 members appointed by the President, not more than 2 of whom may be of the same political party;

(ii) 2 members appointed by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means of the House of Representatives;

(iii) 2 members appointed by the minority leader of the House of Representatives, in consultation with the ranking member of the Committee on Ways and Means of the House of Representatives;

(iv) 2 members appointed by the majority leader of the Senate, in consultation with the Chairman of the Committee on Finance of the Senate; and

(v) 2 members appointed by the minority leader of the Senate, in consultation with the ranking member of the Committee on Finance of the Senate.

(B) REPRESENTATION.—

(i) IN GENERAL.—The members appointed under subparagraph (A) shall have experience or expert knowledge as a recipient, provider, employer, or employee in the fields of, or related to, employment services, vocational rehabilitation services, and other support services.

(ii) REQUIREMENT.—At least one-half of the members appointed under subparagraph (A) shall be individuals with disabilities, or representatives of individuals with disabilities, with consideration given to current or former title II disability beneficiaries or title XVI disability beneficiaries (as such terms are defined in section 1148(k) of the Social Security Act (as added by subsection (a))).

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of the enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—Of the members first appointed under each clause of subparagraph

(A), as designated by the appointing authority for each such clause—

(I) one-half of such members shall be appointed for a term of 2 years; and

(II) the remaining members shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Panel shall be filled in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—8 members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Chairperson, and paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(B) STAFF.—Subject to rules prescribed by the Commissioner of Social Security, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Commissioner of Social Security, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this Act.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places,

and take such testimony and evidence as the Panel considers appropriate.

(B) *POWERS OF MEMBERS AND AGENTS.*—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this section.

(C) *MAILS.*—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(6) *REPORTS.*—

(A) *INTERIM REPORTS.*—The Panel shall submit to the President and the Congress interim reports at least annually.

(B) *FINAL REPORT.*—The Panel shall transmit a final report to the President and the Congress not later than eight years after the date of the enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislation and administrative actions which the Panel considers appropriate.

(7) *TERMINATION.*—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) *AUTHORIZATION OF APPROPRIATIONS.*—There are authorized to be appropriated from the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the general fund of the Treasury, as appropriate, such sums as are necessary to carry out this subsection.

Subtitle B—Elimination of Work Disincentives

SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN INDIVIDUAL'S DISABLED STATUS.

(a) *IN GENERAL.*—Section 221 of the Social Security Act (42 U.S.C. 421) is amended by adding at the end the following new subsection:

“(m)(1) In any case where an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)) has received such benefits for at least 24 months—

“(A) no continuing disability review conducted by the Commissioner may be scheduled for the individual solely as a result of the individual’s work activity;

“(B) no work activity engaged in by the individual may be used as evidence that the individual is no longer disabled; and

“(C) no cessation of work activity by the individual may give rise to a presumption that the individual is unable to engage in work.

“(2) An individual to which paragraph (1) applies shall continue to be subject to—

“(A) continuing disability reviews on a regularly scheduled basis that is not triggered by work; and

“(B) termination of benefits under this title in the event that the individual has earnings that exceed the level of earnings es-

published by the Commissioner to represent substantial gainful activity.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on January 1, 2002.

SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS.

(a) OASDI BENEFITS.—Section 223 of the Social Security Act (42 U.S.C. 423) is amended—

- (1) by redesignating subsection (i) as subsection (j); and*
- (2) by inserting after subsection (h) the following new subsection:*

“Reinstatement of Entitlement

“(i)(1)(A) Entitlement to benefits described in subparagraph (B)(i)(I) shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of such entitlement shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was entitled to benefits under this section or section 202 on the basis of disability pursuant to an application filed therefor; and

“(II) such entitlement terminated due to the performance of substantial gainful activity;

“(ii) the individual is under a disability and the physical or mental impairment that is the basis for the finding of disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of disability that gave rise to the entitlement described in clause (i); and

“(iii) the individual’s disability renders the individual unable to perform substantial gainful activity.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was entitled to a benefit described in subparagraph (B)(i)(I) prior to the entitlement termination described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) and (iii) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case

of any individual who the Commissioner determines is not entitled to reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of subsection (f) shall apply.

“(4)(A)(i) Subject to clause (ii), entitlement to benefits reinstated under this subsection shall commence with the benefit payable for the month in which a request for reinstatement is filed.

“(ii) An individual whose entitlement to a benefit for any month would have been reinstated under this subsection had the individual filed a request for reinstatement before the end of such month shall be entitled to such benefit for such month if such request for reinstatement is filed before the end of the twelfth month immediately succeeding such month.

“(B)(i) Subject to clauses (ii) and (iii), the amount of the benefit payable for any month pursuant to the reinstatement of entitlement under this subsection shall be determined in accordance with the provisions of this title.

“(ii) For purposes of computing the primary insurance amount of an individual whose entitlement to benefits under this section is reinstated under this subsection, the date of onset of the individual’s disability shall be the date of onset used in determining the individual’s most recent period of disability arising in connection with such benefits payable on the basis of an application.

“(iii) Benefits under this section or section 202 payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) No benefit shall be payable pursuant to an entitlement reinstated under this subsection to an individual for any month in which the individual engages in substantial gainful activity.

“(D) The entitlement of any individual that is reinstated under this subsection shall end with the benefits payable for the month preceding whichever of the following months is the earliest:

“(i) The month in which the individual dies.

“(ii) The month in which the individual attains retirement age.

“(iii) The third month following the month in which the individual’s disability ceases.

“(5) Whenever an individual’s entitlement to benefits under this section is reinstated under this subsection, entitlement to benefits payable on the basis of such individual’s wages and self-employment income may be reinstated with respect to any person previously entitled to such benefits on the basis of an application if the Commissioner determines that such person satisfies all the requirements for entitlement to such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated entitlement of any such person to the same extent that they apply to the reinstated entitlement of such individual.

“(6) An individual to whom benefits are payable under this section or section 202 pursuant to a reinstatement of entitlement under this subsection for 24 months (whether or not consecutive) shall,

with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) and the determination, if appropriate, of the termination month in accordance with subsection (a)(1) of this section, or subsection (d)(1), (e)(1), or (f)(1) of section 202, to be entitled to such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be entitled to provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under subsection (b) or (g) of section 205.

“(B) The amount of a provisional benefit for a month shall equal the amount of the last monthly benefit payable to the individual under this title on the basis of an application increased by an amount equal to the amount, if any, by which such last monthly benefit would have been increased as a result of the operation of section 215(i).

“(C)(i) Provisional benefits shall begin with the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s entitlement to reinstated benefits;

“(II) the fifth month following the month described in clause (i);

“(III) the month in which the individual performs substantial gainful activity; or

“(IV) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not entitled to reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).”

(b) SSI BENEFITS.—

(1) IN GENERAL.—Section 1631 of the Social Security Act (42 U.S.C. 1383) is amended by adding at the end the following new subsection:

“Reinstatement of Eligibility on the Basis of Blindness or Disability

“(p)(1)(A) Eligibility for benefits under this title shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of eligibility shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was eligible for benefits under this title on the basis of blindness or disability pursuant to an application filed therefor; and

“(II) the individual thereafter was ineligible for such benefits due to earned income (or earned and unearned income) for a period of 12 or more consecutive months;

“(ii) the individual is blind or disabled and the physical or mental impairment that is the basis for the finding of blindness or disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of blindness or disability that gave rise to the eligibility described in clause (i);

“(iii) the individual’s blindness or disability renders the individual unable to perform substantial gainful activity; and

“(iv) the individual satisfies the nonmedical requirements for eligibility for benefits under this title.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was eligible for a benefit under this title (including section 1619) prior to the period of ineligibility described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) through (iv) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not eligible for reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of section 1614(a)(4) shall apply.

“(4)(A) Eligibility for benefits reinstated under this subsection shall commence with the benefit payable for the month following the month in which a request for reinstatement is filed.

“(B)(i) Subject to clause (ii), the amount of the benefit payable for any month pursuant to the reinstatement of eligibility under this subsection shall be determined in accordance with the provisions of this title.

“(ii) The benefit under this title payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) Except as otherwise provided in this subsection, eligibility for benefits under this title reinstated pursuant to a request filed under paragraph (2) shall be subject to the same terms and conditions as eligibility established pursuant to an application filed therefor.

“(5) Whenever an individual’s eligibility for benefits under this title is reinstated under this subsection, eligibility for such benefits shall be reinstated with respect to the individual’s spouse if such spouse was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements for eligibility for such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated eligibility of the spouse to the same extent that they apply to the reinstated eligibility of such individual.

“(6) An individual to whom benefits are payable under this title pursuant to a reinstatement of eligibility under this subsection for twenty-four months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) to be eligible for such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be eligible for provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under paragraph (1) or (3) of subsection (c).

“(B)(i) Except as otherwise provided in clause (ii), the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual under this title with the same kind and amount of income.

“(ii) If the individual has a spouse who was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements of section 1614(b) except requirements related to the filing of an application, the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual and eligible spouse under this title with the same kind and amount of income.

“(C)(i) Provisional benefits shall begin with the month following the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s eligibility for reinstated benefits;

“(II) the fifth month following the month for which provisional benefits are first payable under clause (i); or

“(III) the month in which the Commissioner determines that the individual does not meet the requirements of para-

graph (1)(B)(i) or that the individual's declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not eligible for reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).

“(8) For purposes of this subsection other than paragraph (7), the term ‘benefits under this title’ includes State supplementary payments made pursuant to an agreement under section 1616(a) of this Act or section 212(b) of Public Law 93–66.”

(2) CONFORMING AMENDMENTS.—

(A) Section 1631(j)(1) of such Act (42 U.S.C. 1383(j)(1)) is amended by striking the period and inserting “, or has filed a request for reinstatement of eligibility under subsection (p)(2) and been determined to be eligible for reinstatement.”

(B) Section 1631(j)(2)(A)(i)(I) of such Act (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by inserting “(other than pursuant to a request for reinstatement under subsection (p))” after “eligible”.

(c) EFFECTIVE DATE.—

(1) IN GENERAL.—The amendments made by this section shall take effect on the first day of the thirteenth month beginning after the date of the enactment of this Act.

(2) LIMITATION.—No benefit shall be payable under title II or XVI on the basis of a request for reinstatement filed under section 223(i) or 1631(p) of the Social Security Act (42 U.S.C. 423(i), 1383(p)) before the effective date described in paragraph (1).

Subtitle C—Work Incentives Planning, Assistance, and Outreach

SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 101 of this Act, is amended by adding after section 1148 the following new section:

“WORK INCENTIVES OUTREACH PROGRAM

“SEC. 1149. (a) ESTABLISHMENT.—

“(1) IN GENERAL.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, shall establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

“(2) GRANTS, COOPERATIVE AGREEMENTS, CONTRACTS, AND OUTREACH.—Under the program established under this section, the Commissioner shall—

“(A) establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including individuals participating in the Ticket to Work and Self-Sufficiency Program established under section 1148, the program established under section 1619, and other programs that are designed to encourage disabled beneficiaries to work;

“(B) conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and to the families of such beneficiaries) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work, including—

“(i) preparing and disseminating information explaining such programs; and

“(ii) working in cooperation with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling;

“(C) establish a corps of trained, accessible, and responsive work incentives specialists within the Social Security Administration who will specialize in disability work incentives under titles II and XVI for the purpose of disseminating accurate information with respect to inquiries and issues relating to work incentives to—

“(i) disabled beneficiaries;

“(ii) benefit applicants under titles II and XVI; and

“(iii) individuals or entities awarded grants under subparagraphs (A) or (B); and

“(D) provide—

“(i) training for work incentives specialists and individuals providing planning assistance described in subparagraph (C); and

“(ii) technical assistance to organizations and entities that are designed to encourage disabled beneficiaries to return to work.

“(3) COORDINATION WITH OTHER PROGRAMS.—The responsibilities of the Commissioner established under this section shall be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries including the program under section 1619, the plans for achieving self-support program (PASS), and any other Federal or State work incentives programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, transition services (as defined in, and provided in accordance with, the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)), a one-stop delivery system established under subtitle B

of title I of the Workforce Investment Act of 1998 (29 U.S.C. 2811 et seq.), and other services.

“(b) CONDITIONS.—

“(1) SELECTION OF ENTITIES.—

“(A) APPLICATION.—An entity shall submit an application for a grant, cooperative agreement, or contract to provide benefits planning and assistance to the Commissioner at such time, in such manner, and containing such information as the Commissioner may determine is necessary to meet the requirements of this section.

“(B) STATEWIDENESS.—The Commissioner shall ensure that the planning, assistance, and information described in paragraph (2) shall be available on a statewide basis.

“(C) ELIGIBILITY OF STATES AND PRIVATE ORGANIZATIONS.—

“(i) IN GENERAL.—The Commissioner may award a grant, cooperative agreement, or contract under this section to a State or a private agency or organization (other than Social Security Administration Field Offices and the State agency administering the State medicaid program under title XIX, including any agency or entity described in clause (ii), that the Commissioner determines is qualified to provide the planning, assistance, and information described in paragraph (2)).

“(ii) AGENCIES AND ENTITIES DESCRIBED.—The agencies and entities described in this clause are the following:

“(I) Any public or private agency or organization (including Centers for Independent Living established under title VII of the Rehabilitation Act of 1973 (29 U.S.C. 796 et seq.), protection and advocacy organizations, client assistance programs established in accordance with section 112 of the Rehabilitation Act of 1973 (29 U.S.C. 732), and State Developmental Disabilities Councils established in accordance with section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6024)) that the Commissioner determines satisfies the requirements of this section.

“(II) The State agency administering the State program funded under part A of title IV.

“(D) EXCLUSION FOR CONFLICT OF INTEREST.—The Commissioner may not award a grant, cooperative agreement, or contract under this section to any entity that the Commissioner determines would have a conflict of interest if the entity were to receive a grant, cooperative agreement, or contract under this section.

“(2) SERVICES PROVIDED.—A recipient of a grant, cooperative agreement, or contract to provide benefits planning and assistance shall select individuals who will act as planners and provide information, guidance, and planning to disabled beneficiaries on the—

“(A) availability and interrelation of any Federal or State work incentives programs designed to assist disabled beneficiaries that the individual may be eligible to participate in;

“(B) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual; and

“(C) availability of protection and advocacy services for disabled beneficiaries and how to access such services.

“(3) AMOUNT OF GRANTS, COOPERATIVE AGREEMENTS, OR CONTRACTS.—

“(A) BASED ON POPULATION OF DISABLED BENEFICIARIES.—Subject to subparagraph (B), the Commissioner shall award a grant, cooperative agreement, or contract under this section to an entity based on the percentage of the population of the State where the entity is located who are disabled beneficiaries.

“(B) LIMITATIONS.—

“(i) PER GRANT.—No entity shall receive a grant, cooperative agreement, or contract under this section for a fiscal year that is less than \$50,000 or more than \$300,000.

“(ii) TOTAL AMOUNT FOR ALL GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS.—The total amount of all grants, cooperative agreements, and contracts awarded under this section for a fiscal year may not exceed \$23,000,000.

“(4) ALLOCATION OF COSTS.—The costs of carrying out this section shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(c) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$23,000,000 for each of the fiscal years 2000 through 2004.”

SEC. 122. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 121 of this Act, is amended by adding after section 1149 the following new section:

“STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

“SEC. 1150. (a) IN GENERAL.—Subject to subsection (c), the Commissioner may make payments in each State to the protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42

U.S.C. 6041 et seq.) for the purpose of providing services to disabled beneficiaries.

“(b) *SERVICES PROVIDED.*—Services provided to disabled beneficiaries pursuant to a payment made under this section may include—

“(1) information and advice about obtaining vocational rehabilitation and employment services; and

“(2) advocacy or other services that a disabled beneficiary may need to secure or regain gainful employment.

“(c) *APPLICATION.*—In order to receive payments under this section, a protection and advocacy system shall submit an application to the Commissioner, at such time, in such form and manner, and accompanied by such information and assurances as the Commissioner may require.

“(d) *AMOUNT OF PAYMENTS.*—

“(1) *IN GENERAL.*—Subject to the amount appropriated for a fiscal year for making payments under this section, a protection and advocacy system shall not be paid an amount that is less than—

“(A) in the case of a protection and advocacy system located in a State (including the District of Columbia and Puerto Rico) other than Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, the greater of—

“(i) \$100,000; or

“(ii) $\frac{1}{3}$ of 1 percent of the amount available for payments under this section; and

“(B) in the case of a protection and advocacy system located in Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, \$50,000.

“(2) *INFLATION ADJUSTMENT.*—For each fiscal year in which the total amount appropriated to carry out this section exceeds the total amount appropriated to carry out this section in the preceding fiscal year, the Commissioner shall increase each minimum payment under subparagraphs (A) and (B) of paragraph (1) by a percentage equal to the percentage increase in the total amount so appropriated to carry out this section.

“(e) *ANNUAL REPORT.*—Each protection and advocacy system that receives a payment under this section shall submit an annual report to the Commissioner and the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 on the services provided to individuals by the system.

“(f) *FUNDING.*—

“(1) *ALLOCATION OF PAYMENTS.*—Payments under this section shall be made from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(2) *CARRYOVER.*—Any amounts allotted for payment to a protection and advocacy system under this section for a fiscal year shall remain available for payment to or on behalf of the

protection and advocacy system until the end of the succeeding fiscal year.

“(g) **DEFINITIONS.**—In this section:

“(1) **COMMISSIONER.**—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) **DISABLED BENEFICIARY.**—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(3) **PROTECTION AND ADVOCACY SYSTEM.**—The term ‘protection and advocacy system’ means a protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.).

“(h) **AUTHORIZATION OF APPROPRIATIONS.**—There are authorized to be appropriated to carry out this section \$7,000,000 for each of the fiscal years 2000 through 2004.”.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

SEC. 201. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES.

(a) **IN GENERAL.**—

(1) **STATE OPTION TO ELIMINATE INCOME, ASSETS, AND RESOURCE LIMITATIONS FOR WORKERS WITH DISABILITIES BUYING INTO MEDICAID.**—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

(A) in subclause (XIII), by striking “or” at the end;

(B) in subclause (XIV), by adding “or” at the end; and

(C) by adding at the end the following new subclause:

“(XV) who, but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income, who is at least 16, but less than 65, years of age, and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish.”.

(2) **STATE OPTION TO PROVIDE OPPORTUNITY FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY TO BUY INTO MEDICAID.**—

(A) **ELIGIBILITY.**—Section 1902(a)(10) (A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as amended by paragraph (1), is amended—

(i) in subclause (XIV), by striking “or” at the end;

(ii) in subclause (XV), by adding “or” at the end;

and

(iii) by adding at the end the following new subclause:

“(XVI) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XV),”.

(B) *DEFINITION OF EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY.*—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following new subsection:

“(v)(1) The term ‘employed individual with a medically improved disability’ means an individual who—

“(A) is at least 16, but less than 65, years of age;

“(B) is employed (as defined in paragraph (2));

“(C) ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XV) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and

“(D) continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.

“(2) For purposes of paragraph (1), an individual is considered to be ‘employed’ if the individual—

“(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

“(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.”.

(C) *CONFORMING AMENDMENT.*—Section 1905(a) of such Act (42 U.S.C. 1396d(a)) is amended in the matter preceding paragraph (1)—

(i) in clause (x), by striking “or” at the end;

(ii) in clause (xi), by adding “or” at the end; and

(iii) by inserting after clause (xi), the following new clause:

“(xii) employed individuals with a medically improved disability (as defined in subsection (v)),”.

(3) *STATE AUTHORITY TO IMPOSE INCOME-RELATED PREMIUMS AND COST-SHARING.*—Section 1916 of such Act (42 U.S.C. 1396o) is amended—

(A) in subsection (a), by striking “The State plan” and inserting “Subject to subsection (g), the State plan”; and

(B) by adding at the end the following new subsection:

“(g) With respect to individuals provided medical assistance only under subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii)—

“(1) a State may (in a uniform manner for individuals described in either such subclause)—

“(A) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and

“(B) require payment of 100 percent of such premiums for such year in the case of such an individual who has income for a year that exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved, except that in the case of such an individual who has income for a year that does not exceed 450 percent of such poverty line, such requirement

may only apply to the extent such premiums do not exceed 7.5 percent of such income; and

“(2) such State shall require payment of 100 percent of such premiums for a year by such an individual whose adjusted gross income (as defined in section 62 of the Internal Revenue Code of 1986) for such year exceeds \$75,000, except that a State may choose to subsidize such premiums by using State funds which may not be federally matched under this title.

In the case of any calendar year beginning after 2000, the dollar amount specified in paragraph (2) shall be increased in accordance with the provisions of section 215(i)(2)(A)(ii).”

(4) PROHIBITION AGAINST SUPPLANTATION OF STATE FUNDS AND STATE FAILURE TO MAINTAIN EFFORT.—Section 1903(i) of such Act (42 U.S.C. 1396b(i)) is amended—

(A) by striking the period at the end of paragraph (19) and inserting “; or”; and

(B) by inserting after such paragraph the following new paragraph:

“(20) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended for such programs during the most recent State fiscal year ending before the date of the enactment of this paragraph.”

(b) CONFORMING AMENDMENTS.—Section 1903(f)(4) of the Social Security Act (42 U.S.C. 1396b(f)(4)) is amended in the matter preceding subparagraph (A) by inserting “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI),” before “1905(p)(1).”

(c) GAO REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress regarding the amendments made by this section that examines—

(1) the extent to which higher health care costs for individuals with disabilities at higher income levels deter employment or progress in employment;

(2) whether such individuals have health insurance coverage or could benefit from the State option established under such amendments to provide a medicaid buy-in; and

(3) how the States are exercising such option, including—

(A) how such States are exercising the flexibility afforded them with regard to income disregards;

(B) what income and premium levels have been set;

(C) the degree to which States are subsidizing premiums above the dollar amount specified in section 1916(g)(2) of the Social Security Act (42 U.S.C. 1396o(g)(2)); and

(D) the extent to which there exists any crowd-out effect.

(d) *EFFECTIVE DATE.*—The amendments made by this section apply to medical assistance for items and services furnished on or after October 1, 2000.

SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS.

(a) *IN GENERAL.*—The next to last sentence of section 226(b) of the Social Security Act (42 U.S.C. 426) is amended by striking “24” and inserting “78”.

(b) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall be effective on and after October 1, 2000.

(c) *GAO REPORT.*—Not later than 5 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress that—

(1) examines the effectiveness and cost of the amendment made by subsection (a);

(2) examines the necessity and effectiveness of providing continuation of medicare coverage under section 226(b) of the Social Security Act (42 U.S.C. 426(b)) to individuals whose annual income exceeds the contribution and benefit base (as determined under section 230 of such Act (42 U.S.C. 430));

(3) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a sliding scale premium for individuals whose annual income exceeds such contribution and benefit base;

(4) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a premium buy-in by the beneficiary’s employer in lieu of coverage under private health insurance;

(5) examines the interrelation between the use of the continuation of medicare coverage under such section 226(b) and the use of private health insurance coverage by individuals during the extended period; and

(6) recommends such legislative or administrative changes relating to the continuation of medicare coverage for recipients of social security disability benefits as the Comptroller General determines are appropriate.

SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES.

(a) *ESTABLISHMENT.*—

(1) *IN GENERAL.*—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall award grants described in subsection (b) to States to support the design, establishment, and operation of State infrastructures that provide items and services to support working individuals with disabilities.

(2) *APPLICATION.*—In order to be eligible for an award of a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary shall require.

(3) *DEFINITION OF STATE.*—In this section, the term “State” means each of the 50 States, the District of Columbia, Puerto Rico, Guam, the United States Virgin Islands, American

Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) **GRANTS FOR INFRASTRUCTURE AND OUTREACH.**—

(1) **IN GENERAL.**—*Out of the funds appropriated under subsection (e), the Secretary shall award grants to States to—*

(A) *support the establishment, implementation, and operation of the State infrastructures described in subsection (a); and*

(B) *conduct outreach campaigns regarding the existence of such infrastructures.*

(2) **ELIGIBILITY FOR GRANTS.**—

(A) **IN GENERAL.**—*No State may receive a grant under this subsection unless the State demonstrates to the satisfaction of the Secretary that the State makes personal assistance services available under the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to the extent necessary to enable individuals with disabilities to remain employed, including individuals described in section 1902(a)(10)(A)(ii)(XIII) of such Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) if the State has elected to provide medical assistance under such plan to such individuals.*

(B) **DEFINITIONS.**—*In this section:*

(i) **EMPLOYED.**—*The term “employed” means—*

(I) *earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or*

(II) *being engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined and approved by the Secretary.*

(ii) **PERSONAL ASSISTANCE SERVICES.**—*The term “personal assistance services” means a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability. Such services shall be designed to increase the individual’s control in life and ability to perform everyday activities on or off the job.*

(3) **DETERMINATION OF AWARDS.**—

(A) **IN GENERAL.**—*Subject to subparagraph (B), the Secretary shall develop a methodology for awarding grants to States under this section for a fiscal year in a manner that—*

(i) *rewards States for their efforts in encouraging individuals described in paragraph (2)(A) to be employed; and*

(ii) *does not provide a State that has not elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) with proportionally more*

funds for a fiscal year than a State that has exercised such election.

(B) AWARD LIMITS.—

(i) MINIMUM AWARDS.—

(I) IN GENERAL.—*Subject to subclause (II), no State with an approved application under this section shall receive a grant for a fiscal year that is less than \$500,000.*

(II) PRO RATA REDUCTIONS.—*If the funds appropriated under subsection (e) for a fiscal year are not sufficient to pay each State with an application approved under this section the minimum amount described in subclause (I), the Secretary shall pay each such State an amount equal to the pro rata share of the amount made available.*

(ii) MAXIMUM AWARDS.—

(I) STATES THAT ELECTED OPTIONAL MEDICAID ELIGIBILITY.—*No State that has an application that has been approved under this section and that has elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of such Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) shall receive a grant for a fiscal year that exceeds 10 percent of the total expenditures by the State (including the reimbursed Federal share of such expenditures) for medical assistance provided under such title for such individuals, as estimated by the State and approved by the Secretary.*

(II) OTHER STATES.—*The Secretary shall determine, consistent with the limit described in subclause (I), a maximum award limit for a grant for a fiscal year for a State that has an application that has been approved under this section but that has not elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)).*

(c) AVAILABILITY OF FUNDS.—

(1) FUNDS AWARDED TO STATES.—*Funds awarded to a State under a grant made under this section for a fiscal year shall remain available until expended.*

(2) FUNDS NOT AWARDED TO STATES.—*Funds not awarded to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for awarding by the Secretary.*

(d) ANNUAL REPORT.—*A State that is awarded a grant under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include the percentage increase in the number of title II disability beneficiaries, as defined in section 1148(k)(3) of the Social Security Act (as added by section 101(a) of this Act) in the State, and title XVI disability beneficiaries, as defined in section 1148(k)(4) of the Social Security Act (as so added) in the State who return to work.*

(e) APPROPRIATION.—

(1) *IN GENERAL.*—*Out of any funds in the Treasury not otherwise appropriated, there is appropriated to make grants under this section—*

(A) *for fiscal year 2001, \$20,000,000;*

(B) *for fiscal year 2002, \$25,000,000;*

(C) *for fiscal year 2003, \$30,000,000;*

(D) *for fiscal year 2004, \$35,000,000;*

(E) *for fiscal year 2005, \$40,000,000; and*

(F) *for each of fiscal years 2006 through 2011, the amount appropriated for the preceding fiscal year increased by the percentage increase (if any) in the Consumer Price Index for All Urban Consumers (United States city average) for the preceding fiscal year.*

(2) *BUDGET AUTHORITY.*—*This subsection constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under paragraph (1).*

(f) *RECOMMENDATION.*—*Not later than October 1, 2010, the Secretary, in consultation with the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of this Act, shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the grant program established under this section should be continued after fiscal year 2011.*

SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES.

(a) *STATE APPLICATION.*—*A State may apply to the Secretary of Health and Human Services (in this section referred to as the “Secretary”) for approval of a demonstration project (in this section referred to as a “demonstration project”) under which up to a specified maximum number of individuals who are workers with a potentially severe disability (as defined in subsection (b)(1)) are provided medical assistance equal to—*

(1) *that provided under section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)) to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)); or*

(2) *in the case of a State that has not elected to provide medical assistance under that section to such individuals, such medical assistance as the Secretary determines is an appropriate equivalent to the medical assistance described in paragraph (1).*

(b) *WORKER WITH A POTENTIALLY SEVERE DISABILITY DEFINED.*—*For purposes of this section—*

(1) *IN GENERAL.*—*The term “worker with a potentially severe disability” means, with respect to a demonstration project, an individual who—*

(A) *is at least 16, but less than 65, years of age;*

(B) *has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected, but for the receipt of items and services described in section 1905(a) of the Social Security Act*

(42 U.S.C. 1396d(a)), to become blind or disabled (as defined under section 1614(a) of the Social Security Act (42 U.S.C. 1382c(a))); and

(C) is employed (as defined in paragraph (2)).

(2) *DEFINITION OF EMPLOYED.*—An individual is considered to be “employed” if the individual—

(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined under the demonstration project and approved by the Secretary.

(c) *APPROVAL OF DEMONSTRATION PROJECTS.*—

(1) *IN GENERAL.*—Subject to paragraph (3), the Secretary shall approve applications under subsection (a) that meet the requirements of paragraph (2) and such additional terms and conditions as the Secretary may require. The Secretary may waive the requirement of section 1902(a)(1) of the Social Security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-State demonstrations.

(2) *TERMS AND CONDITIONS OF DEMONSTRATION PROJECTS.*—The Secretary may not approve a demonstration project under this section unless the State provides assurances satisfactory to the Secretary that the following conditions are or will be met:

(A) *MAINTENANCE OF STATE EFFORT.*—Federal funds paid to a State pursuant to this section must be used to supplement, but not supplant, the level of State funds expended for workers with potentially severe disabilities under programs in effect for such individuals at the time the demonstration project is approved under this section.

(B) *INDEPENDENT EVALUATION.*—The State provides for an independent evaluation of the project.

(3) *LIMITATIONS ON FEDERAL FUNDING.*—

(A) *APPROPRIATION.*—

(i) *IN GENERAL.*—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to carry out this section—

(I) \$42,000,000 for each of fiscal years 2001 through 2004, and

(II) \$41,000,000 for each of fiscal years 2005 and 2006.

(ii) *BUDGET AUTHORITY.*—Clause (i) constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under clause (i).

(B) *LIMITATION ON PAYMENTS.*—In no case may—

(i) the aggregate amount of payments made by the Secretary to States under this section exceed \$250,000,000;

(ii) the aggregate amount of payments made by the Secretary to States for administrative expenses relating to annual reports required under subsection (d) exceed \$2,000,000 of such \$250,000,000; or

(iii) payments be provided by the Secretary for a fiscal year after fiscal year 2009.

(C) FUNDS ALLOCATED TO STATES.—The Secretary shall allocate funds to States based on their applications and the availability of funds. Funds allocated to a State under a grant made under this section for a fiscal year shall remain available until expended.

(D) FUNDS NOT ALLOCATED TO STATES.—Funds not allocated to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for allocation by the Secretary using the allocation formula established under this section.

(E) PAYMENTS TO STATES.—The Secretary shall pay to each State with a demonstration project approved under this section, from its allocation under subparagraph (C), an amount for each quarter equal to the Federal medical assistance percentage (as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1395d(b)) of expenditures in the quarter for medical assistance provided to workers with a potentially severe disability.

(d) ANNUAL REPORT.—A State with a demonstration project approved under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include enrollment and financial statistics on—

(1) the total population of workers with potentially severe disabilities served by the demonstration project; and

(2) each population of such workers with a specific physical or mental impairment described in subsection (b)(1)(B) served by such project.

(e) RECOMMENDATION.—Not later than October 1, 2004, the Secretary shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the demonstration project established under this section should be continued after fiscal year 2006.

(f) STATE DEFINED.—In this section, the term “State” has the meaning given such term for purposes of title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) IN GENERAL.—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting “or paragraph (6)” after “this paragraph”; and

(2) by adding at the end the following new paragraph:

“(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group

health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss.”

(b) *EFFECTIVE DATE.*—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

SEC. 301. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) *EXTENSION OF AUTHORITY.*—Title II of the Social Security Act (42 U.S.C. 401 et seq.) is amended by adding at the end the following new section:

“DEMONSTRATION PROJECT AUTHORITY

“SEC. 234. (a) AUTHORITY.—

“(1) IN GENERAL.—The Commissioner of Social Security (in this section referred to as the ‘Commissioner’) shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of—

“(A) various alternative methods of treating the work activity of individuals entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)), including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of such individuals;

“(B) altering other limitations and conditions applicable to such individuals (including lengthening the trial work period (as defined in section 222(c)), altering the 24-month waiting period for hospital insurance benefits under section 226, altering the manner in which the program under this title is administered, earlier referral of such individuals for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation); and

“(C) implementing sliding scale benefit offsets using variations in—

“(i) the amount of the offset as a proportion of earned income;

“(ii) the duration of the offset period; and

“(iii) the method of determining the amount of income earned by such individuals,

to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of this title.

“(2) AUTHORITY FOR EXPANSION OF SCOPE.—The Commissioner may expand the scope of any such experiment or demonstration project to include any group of applicants for benefits under the program established under this title with impair-

ments that reasonably may be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.

“(b) REQUIREMENTS.—The experiments and demonstration projects developed under subsection (a) shall be of sufficient scope and shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration while giving assurance that the results derived from the experiments and projects will obtain generally in the operation of the disability insurance program under this title without committing such program to the adoption of any particular system either locally or nationally.

“(c) AUTHORITY TO WAIVE COMPLIANCE WITH BENEFITS REQUIREMENTS.—In the case of any experiment or demonstration project conducted under subsection (a), the Commissioner may waive compliance with the benefit requirements of this title and the requirements of section 1148 as they relate to the program established under this title, and the Secretary may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

“(d) REPORTS.—

“(1) INTERIM REPORTS.—On or before June 9 of each year, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate an annual interim report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials that the Commissioner may consider appropriate.

“(2) TERMINATION AND FINAL REPORT.—The authority under the preceding provisions of this section (including any waiver granted pursuant to subsection (c)) shall terminate 5 years after the date of the enactment of this Act. Not later than 90 days after the termination of any experiment or demonstration project carried out under this section, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate a final report with respect to that experiment or demonstration project.”.

(b) CONFORMING AMENDMENTS; TRANSFER OF PRIOR AUTHORITY.—

(1) CONFORMING AMENDMENTS.—

(A) **REPEAL OF PRIOR AUTHORITY.**—Paragraphs (1) through (4) of subsection (a) and subsection (c) of section 505 of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) are repealed.

(B) **CONFORMING AMENDMENT REGARDING FUNDING.**—Section 201(k) of the Social Security Act (42 U.S.C. 401(k)) is amended by striking “section 505(a) of the Social Security Disability Amendments of 1980” and inserting “section 234”.

(2) **TRANSFER OF PRIOR AUTHORITY.**—With respect to any experiment or demonstration project being conducted under section 505(a) of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) as of the date of the enactment of this Act, the authority to conduct such experiment or demonstration project (including the terms and conditions applicable to the experiment or demonstration project) shall be treated as if that authority (and such terms and conditions) had been established under section 234 of the Social Security Act, as added by subsection (a).

SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.

(a) **AUTHORITY.**—The Commissioner of Social Security shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1148(k)(3) of the Social Security Act) under which benefits payable under section 223 of such Act, or under section 202 of such Act based on the beneficiary’s disability, are reduced by \$1 for each \$2 of the beneficiary’s earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(b) **SCOPE AND SCALE AND MATTERS TO BE DETERMINED.**—

(1) **IN GENERAL.**—The demonstration projects developed under subsection (a) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(A) the effects, if any, of induced entry into the project and reduced exit from the project;

(B) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act; and

(C) the savings that accrue to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Ticket to Work and Work Incentives Advisory Panel pursuant to section 101(f)(2)(B)(ii) of this Act.

(2) ADDITIONAL MATTERS.—The Commissioner shall also determine with respect to each project—

(A) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project;

(B) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project; and

(C) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project.

The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(c) WAIVERS.—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act (42 U.S.C. 401 et seq.), and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of such Act (42 U.S.C. 1395 et seq.), insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

(d) INTERIM REPORTS.—Not later than 2 years after the date of the enactment of this Act, and annually thereafter, the Commissioner of Social Security shall submit to the Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials that the Commissioner of Social Security may consider appropriate.

(e) FINAL REPORT.—The Commissioner of Social Security shall submit to the Congress a final report with respect to all demonstration projects carried out under this section not later than 1 year after their completion.

(f) EXPENDITURES.—Expenditures made for demonstration projects under this section shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

SEC. 303. STUDIES AND REPORTS.**(a) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.—**

(1) *STUDY.*—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) and other Federal laws. In such study, the Comptroller General shall specifically address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities.

(2) *REPORT.*—Not later than 3 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(b) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.—

(1) *STUDY.*—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act (42 U.S.C. 401 et seq.) and the supplemental security income program under title XVI of such Act (42 U.S.C. 1381 et seq.), as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of such Act (42 U.S.C. 1395 et seq., 1396 et seq.).

(2) *REPORT.*—Not later than 3 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(c) STUDY BY GENERAL ACCOUNTING OFFICE OF THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON RETURN TO WORK.—

(1) *STUDY.*—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study of the substantial gainful activity level applicable as of that date to recipients of benefits under section 223 of the Social Security Act (42 U.S.C. 423) and under section 202 of such Act (42 U.S.C. 402) on the basis of a recipient having a disability, and the effect of such level as a disincentive for those recipients to return to work. In the

study, the Comptroller General also shall address the merits of increasing the substantial gainful activity level applicable to such recipients of benefits and the rationale for not yearly indexing that level to inflation.

(2) *REPORT.—Not later than 2 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.*

(d) *REPORT ON DISREGARDS UNDER THE DI AND SSI PROGRAMS.—Not later than 90 days after the date of the enactment of this Act, the Commissioner of Social Security shall submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report that—*

(1) *identifies all income, assets, and resource disregards (imposed under statutory or regulatory authority) that are applicable to individuals receiving benefits under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.);*

(2) *with respect to each such disregard—*

(A) *specifies the most recent statutory or regulatory modification of the disregard; and*

(B) *recommends whether further statutory or regulatory modification of the disregard would be appropriate; and*

(3) *with respect to the disregard described in section 1612(b)(7) of such Act (42 U.S.C. 1382a(b)(7)) (relating to grants, scholarships, or fellowships received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution)—*

(A) *identifies the number of individuals receiving benefits under title XVI of such Act (42 U.S.C. 1381 et seq.) who have attained age 22 and have not had any portion of any grant, scholarship, or fellowship received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution excluded from their income in accordance with that section;*

(B) *recommends whether the age at which such grants, scholarships, or fellowships are excluded from income for purposes of determining eligibility under title XVI of such Act (42 U.S.C. 1381 et seq.) should be increased to age 25; and*

(C) *recommends whether such disregard should be expanded to include any such grant, scholarship, or fellowship received for use in paying the cost of room and board at any such institution.*

(e) *STUDY BY THE GENERAL ACCOUNTING OFFICE OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY INSURANCE PROGRAM DEMONSTRATION AUTHORITY.—*

(1) *STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess the results of the Social*

Security Administration's efforts to conduct disability demonstrations authorized under prior law as well as under section 234 of the Social Security Act (as added by section 301 of this Act).

(2) *REPORT.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this section, together with a recommendation as to whether the demonstration authority authorized under section 234 of the Social Security Act (as added by section 301 of this Act) should be made permanent.*

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) *CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended—*

(1) *in subparagraph (A), by striking “by the Commissioner of Social Security” and “by the Commissioner”; and*

(2) *by adding at the end the following new subparagraph:*

“(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

“(i) there is pending a request for either administrative or judicial review with respect to such claim; or

“(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

“(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) shall not apply to such redetermination.”

(b) *CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5)(B) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended to read as follows:*

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act; or

“(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).”

(c) **EFFECTIVE DATES.**—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104-121; 110 Stat. 852 et seq.).

SEC. 402. TREATMENT OF PRISONERS.

(a) **IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.**—

(1) **IN GENERAL.**—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”; and

(B) by adding at the end the following new subparagraph:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, Social Security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1) and other provisions of this title; and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual’s confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Dis-

ability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II).

“(iv) The Commissioner shall maintain, and shall provide on a reimbursable basis, information obtained pursuant to agreements entered into under this paragraph to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility and other administrative purposes under such program.”

(2) CONFORMING AMENDMENTS TO THE PRIVACY ACT.—Section 552a(a)(8)(B) of title 5, United States Code, is amended—

(A) in clause (vi), by striking “or” at the end;

(B) in clause (vii), by adding “or” at the end; and

(C) by adding at the end the following new clause:

“(viii) matches performed pursuant to section 202(x)(3) or 1611(e)(1) of the Social Security Act (42 U.S.C. 402(x)(3), 1382(e)(1));”.

(3) CONFORMING AMENDMENTS TO TITLE XVI.—

(A) Section 1611(e)(1)(I)(i)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)(I)) is amended by striking “; and” and inserting “and the other provisions of this title; and”.

(B) Section 1611(e)(1)(I)(ii)(II) of such Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amended by striking “is authorized to provide, on a reimbursable basis,” and inserting “shall maintain, and shall provide on a reimbursable basis,”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during which” and inserting “ending with or during or beginning with or during a period of more than 30 days throughout all of which”;

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) 50 PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section

1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv) respectively; and

(C) by inserting after clause (i) the following new clause:

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”

(2) **EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.**—Section 1611(e)(1)(I)(i) of such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii).”

(3) **ELIMINATION OF OVERLY BROAD EXEMPTION.**—Section 1611(e)(1)(I)(iii) of such Act (42 U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by paragraph (1)(B)) is amended further—

(A) by striking “(I) The provisions” and all that follows through “(II)”; and

(B) by striking “eligibility purposes” and inserting “eligibility and other administrative purposes under such program”.

(4) **EFFECTIVE DATE.**—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104–193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) of the Social Security Act in section 1611(e)(1)(I)(i) of the Social Security Act, as amended by paragraph (2) of this subsection, shall be deemed a reference to such section 202(x)(1)(A)(ii) of such Act as amended by subsection (b)(1)(C) of this section.

(d) **CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.**—

(1) **IN GENERAL.**—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following new clause:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”

(2) *CONFORMING AMENDMENT.*—Section 202(x)(1)(B)(ii) of such Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii)”.

(3) *EFFECTIVE DATE.*—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of the enactment of this Act.

SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) *IN GENERAL.*—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefor (in such form and manner, and with such official, as may be prescribed by the Commissioner of Internal Revenue), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant’s second taxable year beginning after December 31, 1999. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act (42 U.S.C. 401 et seq.)), as specified in the application, either with respect to the applicant’s first taxable year beginning after December 31, 1999, or with respect to the applicant’s second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant’s Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant’s income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding paragraphs (4) and (5) of section 1402(c)) except for the exemption under section 1402(e)(1) of such Code.

(b) *EFFECTIVE DATE.*—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under title II on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual’s application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) *IN GENERAL.*—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking “title XVI” and inserting “title II or XVI”.

(b) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103–296; 108 Stat. 1464).

SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL WAGE REPORTS.

(a) *IN GENERAL.*—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by inserting before the semicolon the following: “, and except that in the case of wage reports with respect to domestic service employment, a State may permit employers (as so defined) that make returns with respect to such employment on a calendar year basis pursuant to section 3510 of the Internal Revenue Code of 1986 to make such reports on an annual basis”.

(b) *TECHNICAL AMENDMENTS.*—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is amended—

(1) by striking “(as defined in section 453A(a)(2)(B)(iii))”; and

(2) by inserting “(as defined in section 453A(a)(2)(B))” after “employers”.

(c) *EFFECTIVE DATE.*—The amendments made by this section shall apply to wage reports required to be submitted on and after the date of the enactment of this Act.

SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE THEIR FEES VIA THE SOCIAL SECURITY ADMINISTRATION.

(a) *ASSESSMENT ON ATTORNEYS.*—

(1) *IN GENERAL.*—Section 206 of the Social Security Act (42 U.S.C. 406) is amended by adding at the end the following new subsection:

“(d) *ASSESSMENT ON ATTORNEYS.*—

“(1) *IN GENERAL.*—Whenever a fee for services is required to be certified for payment to an attorney from a claimant’s past-due benefits pursuant to subsection (a)(4) or (b)(1), the Commissioner shall impose on the attorney an assessment calculated in accordance with paragraph (2).

“(2) *AMOUNT.*—

“(A) The amount of an assessment under paragraph (1) shall be equal to the product obtained by multiplying the amount of the representative’s fee that would be required to be so certified by subsection (a)(4) or (b)(1) before the application of this subsection, by the percentage specified in subparagraph (B).

“(B) The percentage specified in this subparagraph is—

“(i) for calendar years before 2001, 6.3 percent, and

“(ii) for calendar years after 2000, such percentage rate as the Commissioner determines is necessary in order to achieve full recovery of the costs of determining and certifying fees to attorneys from the past-due benefits of claimants, but not in excess of 6.3 percent.

“(3) *COLLECTION.*—The Commissioner may collect the assessment imposed on an attorney under paragraph (1) by offset from the amount of the fee otherwise required by subsection

(a)(4) or (b)(1) to be certified for payment to the attorney from a claimant's past-due benefits.

“(4) *PROHIBITION ON CLAIMANT REIMBURSEMENT.*—An attorney subject to an assessment under paragraph (1) may not, directly or indirectly, request or otherwise obtain reimbursement for such assessment from the claimant whose claim gave rise to the assessment.

“(5) *DISPOSITION OF ASSESSMENTS.*—Assessments on attorneys collected under this subsection shall be credited to the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate.

“(6) *AUTHORIZATION OF APPROPRIATIONS.*—The assessments authorized under this section shall be collected and available for obligation only to the extent and in the amount provided in advance in appropriations Acts. Amounts so appropriated are authorized to remain available until expended, for administrative expenses in carrying out this title and related laws.”.

(2) *CONFORMING AMENDMENTS.*—

(A) Section 206(a)(4)(A) of such Act (42 U.S.C. 406(a)(4)(A)) is amended by inserting “and subsection (d)” after “subparagraph (B)”.

(B) Section 206(b)(1)(A) of such Act (42 U.S.C. 406(b)(1)(A)) is amended by inserting “, but subject to subsection (d) of this section” after “section 205(i)”.

(b) *ELIMINATION OF 15-DAY WAITING PERIOD FOR PAYMENT OF FEES.*—Section 206(a)(4) of such Act (42 U.S.C. 406(a)(4)), as amended by subsection (a)(2)(A) of this section, is amended—

(1) by striking “(4)(A)” and inserting “(4)”;

(2) by striking “subparagraph (B) and”; and

(3) by striking subparagraph (B).

(c) *GAO STUDY AND REPORT.*—

(1) *STUDY.*—The Comptroller General of the United States shall conduct a study that—

(A) examines the costs incurred by the Social Security Administration in administering the provisions of subsection (a)(4) and (b)(1) of section 206 of the Social Security Act (42 U.S.C. 406) and itemizes the components of such costs, including the costs of determining fees to attorneys from the past-due benefits of claimants before the Commissioner of Social Security and of certifying such fees;

(B) identifies efficiencies that the Social Security Administration could implement to reduce such costs;

(C) examines the feasibility and advisability of linking the payment of, or the amount of, the assessment under section 206(d) of the Social Security Act (42 U.S.C. 406(d)) to the timeliness of the payment of the fee to the attorney as certified by the Commissioner of Social Security pursuant to subsection (a)(4) or (b)(1) of section 206 of such Act (42 U.S.C. 406);

(D) determines whether the provisions of subsection (a)(4) and (b)(1) of section 206 of such Act (42 U.S.C. 406) should be applied to claimants under title XVI of such Act (42 U.S.C. 1381 et seq.);

(E) determines the feasibility and advisability of stating fees under section 206(d) of such Act (42 U.S.C. 406(d)) in terms of a fixed dollar amount as opposed to a percentage;

(F) determines whether the dollar limit specified in section 206(a)(2)(A)(ii)(II) of such Act (42 U.S.C. 406(a)(2)(A)(ii)(II)) should be raised; and

(G) determines whether the assessment on attorneys required under section 206(d) of such Act (42 U.S.C. 406(d)) (as added by subsection (a)(1) of this section) impairs access to legal representation for claimants.

(2) **REPORT.**—Not later than 1 year after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate on the study conducted under paragraph (1), together with any recommendations for legislation that the Comptroller General determines to be appropriate as a result of such study.

(d) **EFFECTIVE DATE.**—The amendments made by this section shall apply in the case of any attorney with respect to whom a fee for services is required to be certified for payment from a claimant's past-due benefits pursuant to subsection (a)(4) or (b)(1) of section 206 of the Social Security Act after the later of—

- (1) December 31, 1999, or
- (2) the last day of the first month beginning after the month in which this Act is enacted.

SEC. 407. EXTENSION OF AUTHORITY OF STATE MEDICAID FRAUD CONTROL UNITS.

(a) **EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE FRAUD IN OTHER FEDERAL HEALTH CARE PROGRAMS.**—Section 1903(q)(3) of the Social Security Act (42 U.S.C. 1396b(q)(3)) is amended—

- (1) by inserting “(A)” after “in connection with”; and
- (2) by striking “title.” and inserting “title; and (B) upon the approval of the Inspector General of the relevant Federal agency, any aspect of the provision of health care services and activities of providers of such services under any Federal health care program (as defined in section 1128B(f)(1)), if the suspected fraud or violation of law in such case or investigation is primarily related to the State plan under this title.”.

(b) **RECOUPMENT OF FUNDS.**—Section 1903(q)(5) of such Act (42 U.S.C. 1396b(q)(5)) is amended—

- (1) by inserting “or under any Federal health care program (as so defined)” after “plan”; and
- (2) by adding at the end the following: “All funds collected in accordance with this paragraph shall be credited exclusively to, and available for expenditure under, the Federal health care program (including the State plan under this title) that was subject to the activity that was the basis for the collection.”.

(c) **EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID BOARD AND CARE FACILITIES.**—Section 1903(q)(4) of such Act (42 U.S.C. 1396b(q)(4)) is amended to read as follows:

“(4)(A) The entity has—

“(i) procedures for reviewing complaints of abuse or neglect of patients in health care facilities which receive payments under the State plan under this title;

“(ii) at the option of the entity, procedures for reviewing complaints of abuse or neglect of patients residing in board and care facilities; and

“(iii) procedures for acting upon such complaints under the criminal laws of the State or for referring such complaints to other State agencies for action.

“(B) For purposes of this paragraph, the term ‘board and care facility’ means a residential setting which receives payment (regardless of whether such payment is made under the State plan under this title) from or on behalf of two or more unrelated adults who reside in such facility, and for whom one or both of the following is provided:

“(i) Nursing care services provided by, or under the supervision of, a registered nurse, licensed practical nurse, or licensed nursing assistant.

“(ii) A substantial amount of personal care services that assist residents with the activities of daily living, including personal hygiene, dressing, bathing, eating, toileting, ambulation, transfer, positioning, self-medication, body care, travel to medical services, essential shopping, meal preparation, laundry, and housework.”.

(d) **EFFECTIVE DATE.**—The amendments made by this section take effect on the date of the enactment of this Act.

SEC. 408. CLIMATE DATABASE MODERNIZATION.

Notwithstanding any other provision of law, the National Oceanic and Atmospheric Administration (NOAA) shall contract for its multi-year program for climate database modernization and utilization in accordance with NIH Image World Contract #263-96-D-0323 and Task Order #56-DKNE-9-98303 which were awarded as a result of fair and open competition conducted in response to NOAA’s solicitation IW SOW 1082.

SEC. 409. SPECIAL ALLOWANCE ADJUSTMENT FOR STUDENT LOANS.

(a) **AMENDMENT.**—Section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087–1(b)(2)) is amended—

(1) in subparagraph (A), by striking “(G), and (H)” and inserting “(G), (H), and (I)”;

(2) in subparagraph (B)(iv), by striking “(G), or (H)” and inserting “(G), (H), or (I)”;

(3) in subparagraph (C)(ii), by striking “(G) and (H)” and inserting “(G), (H), and (I)”;

(4) in the heading of subparagraph (H), by striking “JULY 1, 2003” and inserting “JANUARY 1, 2000”;

(5) in subparagraph (H), by striking “July 1, 2003,” each place it appears and inserting “January 1, 2000,”; and

(6) by inserting after subparagraph (H) the following new subparagraph:

“(I) **LOANS DISBURSED ON OR AFTER JANUARY 1, 2000, AND BEFORE JULY 1, 2003.**—

“(i) *IN GENERAL.*—Notwithstanding subparagraphs (G) and (H), but subject to paragraph (4) and clauses (ii), (iii), and (iv) of this subparagraph, and except as provided in subparagraph (B), the special allowance paid pursuant to this subsection on loans for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, shall be computed—

“(I) by determining the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period;

“(II) by subtracting the applicable interest rates on such loans from such average bond equivalent rate;

“(III) by adding 2.34 percent to the resultant percent; and

“(IV) by dividing the resultant percent by 4.

“(ii) *IN SCHOOL AND GRACE PERIOD.*—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(2), clause (i)(III) of this subparagraph shall be applied by substituting ‘1.74 percent’ for ‘2.34 percent’.

“(iii) *PLUS LOANS.*—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(3), clause (i)(III) of this subparagraph shall be applied by substituting ‘2.64 percent’ for ‘2.34 percent’, subject to clause (v) of this subparagraph.

“(iv) *CONSOLIDATION LOANS.*—In the case of any consolidation loan for which the application is received by an eligible lender on or after January 1, 2000, and before July 1, 2003, and for which the applicable interest rate is determined under section 427A(k)(4), clause (i)(III) of this subparagraph shall be applied by substituting ‘2.64 percent’ for ‘2.34 percent’, subject to clause (vi) of this subparagraph.

“(v) *LIMITATION ON SPECIAL ALLOWANCES FOR PLUS LOANS.*—In the case of PLUS loans made under section 428B and first disbursed on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(3), a special allowance shall not be paid for such loan during any 12-month period beginning on July 1 and ending on June 30 unless, on the June 1 preceding such July 1—

“(I) the bond equivalent rate of 91-day Treasury bills auctioned at the final auction held prior to such June 1 (as determined by the Secretary for purposes of such section); plus

“(II) 3.1 percent,

exceeds 9.0 percent.

“(vi) **LIMITATION ON SPECIAL ALLOWANCES FOR CONSOLIDATION LOANS.**—In the case of consolidation loans made under section 428C and for which the application is received on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(4), a special allowance shall not be paid for such loan during any 3-month period ending March 31, June 30, September 30, or December 31 unless—

“(I) the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period; plus

“(II) 2.64 percent,

exceeds the rate determined under section 427A(k)(4).”.

(b) **EFFECTIVE DATE.**—Subparagraph (I) of section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087-1(b)(2)) as added by subsection (a) of this section shall apply with respect to any payment pursuant to such section with respect to any 3-month period beginning on or after January 1, 2000, for loans for which the first disbursement is made after such date.

SEC. 410. SCHEDULE FOR PAYMENTS UNDER SSI STATE SUPPLEMENTATION AGREEMENTS.

(a) **SCHEDULE FOR SSI SUPPLEMENTATION PAYMENTS.**—

(1) **IN GENERAL.**—Section 1616(d) of the Social Security Act (42 U.S.C. 1382e(d)) is amended—

(A) in paragraph (1), by striking “at such times and in such installments as may be agreed upon between the Commissioner of Social Security and such State” and inserting “in accordance with paragraph (5)”; and

(B) by adding at the end the following new paragraph:

“(5)(A)(i) Any State which has entered into an agreement with the Commissioner of Social Security under this section shall remit the payments and fees required under this subsection with respect to monthly benefits paid to individuals under this title no later than—

“(I) the business day preceding the date that the Commissioner pays such monthly benefits; or

“(II) with respect to such monthly benefits paid for the month that is the last month of the State’s fiscal year, the fifth business day following such date.

“(ii) The Commissioner may charge States a penalty in an amount equal to 5 percent of the payment and the fees due if the remittance is received after the date required by clause (i).

“(B) The Cash Management Improvement Act of 1990 shall not apply to any payments or fees required under this subsection that are paid by a State before the date required by subparagraph (A)(i).

“(C) Notwithstanding subparagraph (A)(i), the Commissioner may make supplementary payments on behalf of a State with funds appropriated for payment of benefits under this title, and subsequently to be reimbursed for such payments by the State at such

times as the Commissioner and State may agree. Such authority may be exercised only if extraordinary circumstances affecting a State's ability to make payment when required by subparagraph (A)(i) are determined by the Commissioner to exist.”.

(2) AMENDMENT TO SECTION 212.—Section 212 of Public Law 93-66 (42 U.S.C. 1382 note) is amended—

(A) in subsection (b)(3)(A), by striking “at such times and in such installments as may be agreed upon between the Secretary and the State” and inserting “in accordance with subparagraph (E)”;

(B) by adding at the end of subsection (b)(3) the following new subparagraph:

“(E)(i) Any State which has entered into an agreement with the Commissioner of Social Security under this section shall remit the payments and fees required under this paragraph with respect to monthly benefits paid to individuals under title XVI of the Social Security Act no later than—

“(I) the business day preceding the date that the Commissioner pays such monthly benefits; or

“(II) with respect to such monthly benefits paid for the month that is the last month of the State's fiscal year, the fifth business day following such date.

“(ii) The Cash Management Improvement Act of 1990 shall not apply to any payments or fees required under this paragraph that are paid by a State before the date required by clause (i).

“(iii) Notwithstanding clause (i), the Commissioner may make supplementary payments on behalf of a State with funds appropriated for payment of supplemental security income benefits under title XVI of the Social Security Act, and subsequently to be reimbursed for such payments by the State at such times as the Commissioner and State may agree. Such authority may be exercised only if extraordinary circumstances affecting a State's ability to make payment when required by clause (i) are determined by the Commissioner to exist.”; and

(C) by striking “Secretary of Health, Education, and Welfare” and “Secretary” each place such term appear and inserting “Commissioner of Social Security”.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall apply to payments and fees arising under an agreement between a State and the Commissioner of Social Security under section 1616 of the Social Security Act (42 U.S.C. 1382e) or under section 212 of Public Law 93-66 (42 U.S.C. 1382 note) with respect to monthly benefits paid to individuals under title XVI of the Social Security Act for months after September 2009 (October 2009 in the case of a State with a fiscal year that coincides with the Federal fiscal year), without regard to whether the agreement has been modified to reflect such amendments or the Commissioner has promulgated regulations implementing such amendments.

SEC. 411. BONUS COMMODITIES.

Section 6(e)(1) of the Richard B. Russell National School Lunch Act (42 U.S.C. 1755(e)(1)) is amended—

(1) by striking “in the form of commodity assistance” and inserting “in the form of—

“(A) commodity assistance”;

(2) by striking the period at the end and inserting “; or”;
and

(3) by adding at the end the following:

“(B) during the period beginning October 1, 2000, and ending September 30, 2009, commodities provided by the Secretary under any provision of law.”.

SEC. 412. SIMPLIFICATION OF DEFINITION OF FOSTER CHILD UNDER EIC.

(a) *IN GENERAL.*—Section 32(c)(3)(B)(iii) of the Internal Revenue Code of 1986 (defining eligible foster child) is amended by redesignating subclauses (I) and (II) as subclauses (II) and (III), respectively, and by inserting before subclause (II), as so redesignated, the following:

“(I) is a brother, sister, stepbrother, or step-sister of the taxpayer (or a descendant of any such relative) or is placed with the taxpayer by an authorized placement agency,”.

(b) *EFFECTIVE DATE.*—The amendments made by this section shall apply to taxable years beginning after December 31, 1999.

SEC. 413. DELAY OF EFFECTIVE DATE OF ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK FINAL RULE.

(a) *IN GENERAL.*—The final rule entitled “Organ Procurement and Transplantation Network”, promulgated by the Secretary of Health and Human Services on April 2, 1998 (63 Fed. Reg. 16295 et seq.) (relating to part 121 of title 42, Code of Federal Regulations), together with the amendments to such rules promulgated on October 20, 1999 (64 Fed. Reg. 56649 et seq.) shall not become effective before the expiration of the 90-day period beginning on the date of the enactment of this Act.

(b) *NOTICE AND REVIEW.*—For purposes of subsection (a):

(1) Not later than 3 days after the date of the enactment of this Act, the Secretary of Health and Human Services (referred to in this subsection as the “Secretary”) shall publish in the Federal Register a notice providing that the period within which comments on the final rule may be submitted to the Secretary is 60 days after the date of such publication of the notice.

(2) Not later than 21 days after the expiration of such 60-day period, the Secretary shall complete the review of the comments submitted pursuant to paragraph (1) and shall amend the final rule with any revisions appropriate according to the review by the Secretary of such comments. The final rule may be in the form of amendments to the rule referred to in subsection (a) that was promulgated on April 2, 1998, and in the form of amendments to the rule referred to in such subsection that was promulgated on October 20, 1999.

TITLE V—TAX RELIEF EXTENSION ACT OF 1999

SEC. 500. SHORT TITLE OF TITLE.

This title may be cited as the “Tax Relief Extension Act of 1999”.

Subtitle A—Extensions**SEC. 501. ALLOWANCE OF NONREFUNDABLE PERSONAL CREDITS AGAINST REGULAR AND MINIMUM TAX LIABILITY.**

(a) *IN GENERAL.*—Subsection (a) of section 26 of the Internal Revenue Code of 1986 (relating to limitation based on amount of tax) is amended to read as follows:

“(a) *LIMITATION BASED ON AMOUNT OF TAX.*—

“(1) *IN GENERAL.*—The aggregate amount of credits allowed by this subpart for the taxable year shall not exceed the excess (if any) of—

“(A) the taxpayer’s regular tax liability for the taxable year, over

“(B) the tentative minimum tax for the taxable year (determined without regard to the alternative minimum tax foreign tax credit).

For purposes of subparagraph (B), the taxpayer’s tentative minimum tax for any taxable year beginning during 1999 shall be treated as being zero.”

“(2) *SPECIAL RULE FOR 2000 AND 2001.*—For purposes of any taxable year beginning during 2000 or 2001, the aggregate amount of credits allowed by this subpart for the taxable year shall not exceed the sum of—

“(A) the taxpayer’s regular tax liability for the taxable year reduced by the foreign tax credit allowable under section 27(a), and

“(B) the tax imposed by section 55(a) for the taxable year.”

(b) *CONFORMING AMENDMENTS.*—

(1) Section 24(d)(2) of such Code is amended by striking “1998” and inserting “2001”.

(2) Section 904(h) of such Code is amended by adding at the end the following: “This subsection shall not apply to taxable years beginning during 2000 or 2001.”

(c) *EFFECTIVE DATE.*—The amendments made by this section shall apply to taxable years beginning after December 31, 1998.

SEC. 502. RESEARCH CREDIT.

(a) *EXTENSION.*—

(1) *IN GENERAL.*—Paragraph (1) of section 41(h) of the Internal Revenue Code of 1986 (relating to termination) is amended—

(A) by striking “June 30, 1999” and inserting “June 30, 2004”, and

(B) by striking the material following subparagraph (B).

(2) *TECHNICAL AMENDMENT.*—Subparagraph (D) of section 45C(b)(1) of such Code is amended by striking “June 30, 1999” and inserting “June 30, 2004”.

(3) *EFFECTIVE DATE.*—The amendments made by this subsection shall apply to amounts paid or incurred after June 30, 1999.

(b) *INCREASE IN PERCENTAGES UNDER ALTERNATIVE INCREMENTAL CREDIT.*—

(1) *IN GENERAL.*—Subparagraph (A) of section 41(c)(4) of such Code is amended—

(A) by striking “1.65 percent” and inserting “2.65 percent”,

(B) by striking “2.2 percent” and inserting “3.2 percent”, and

(C) by striking “2.75 percent” and inserting “3.75 percent”.

(2) *EFFECTIVE DATE.*—The amendments made by this subsection shall apply to taxable years beginning after June 30, 1999.

(c) *EXTENSION OF RESEARCH CREDIT TO RESEARCH IN PUERTO RICO AND THE POSSESSIONS OF THE UNITED STATES.*—

(1) *IN GENERAL.*—Subsections (c)(6) and (d)(4)(F) of section 41 of such Code (relating to foreign research) are each amended by inserting “, the Commonwealth of Puerto Rico, or any possession of the United States” after “United States”.

(2) *DENIAL OF DOUBLE BENEFIT.*—Section 280C(c)(1) of such Code is amended by inserting “or credit” after “deduction” each place it appears.

(3) *EFFECTIVE DATE.*—The amendments made by this subsection shall apply to amounts paid or incurred after June 30, 1999.

(d) *SPECIAL RULE.*—

(1) *IN GENERAL.*—For purposes of the Internal Revenue Code of 1986, the credit determined under section 41 of such Code which is otherwise allowable under such Code—

(A) shall not be taken into account prior to October 1, 2000, to the extent such credit is attributable to the first suspension period, and

(B) shall not be taken into account prior to October 1, 2001, to the extent such credit is attributable to the second suspension period.

On or after the earliest date that an amount of credit may be taken into account, such amount may be taken into account through the filing of an amended return, an application for expedited refund, an adjustment of estimated taxes, or other means allowed by such Code.

(2) *SUSPENSION PERIODS.*—For purposes of this subsection—

(A) the first suspension period is the period beginning on July 1, 1999, and ending on September 30, 2000, and

(B) the second suspension period is the period beginning on October 1, 2000, and ending on September 30, 2001.

(3) *EXPEDITED REFUNDS.*—

(A) *IN GENERAL.*—If there is an overpayment of tax with respect to a taxable year by reason of paragraph (1), the taxpayer may file an application for a tentative refund of such overpayment. Such application shall be in such manner and form, and contain such information, as the Secretary may prescribe.

(B) *DEADLINE FOR APPLICATIONS.*—Subparagraph (A) shall apply only to an application filed before the date

which is 1 year after the close of the suspension period to which the application relates.

(C) *ALLOWANCE OF ADJUSTMENTS.*—Not later than 90 days after the date on which an application is filed under this paragraph, the Secretary shall—

- (i) review the application,
- (ii) determine the amount of the overpayment, and
- (iii) apply, credit, or refund such overpayment,

in a manner similar to the manner provided in section 6411(b) of such Code.

(D) *CONSOLIDATED RETURNS.*—The provisions of section 6411(c) of such Code shall apply to an adjustment under this paragraph in such manner as the Secretary may provide.

(4) *CREDIT ATTRIBUTABLE TO SUSPENSION PERIOD.*—

(A) *IN GENERAL.*—For purposes of this subsection, in the case of a taxable year which includes a portion of the suspension period, the amount of credit determined under section 41 of such Code for such taxable year which is attributable to such period is the amount which bears the same ratio to the amount of credit determined under such section 41 for such taxable year as the number of months in the suspension period which are during such taxable year bears to the number of months in such taxable year.

(B) *WAIVER OF ESTIMATED TAX PENALTIES.*—No addition to tax shall be made under section 6654 or 6655 of such Code for any period before July 1, 1999, with respect to any underpayment of tax imposed by such Code to the extent such underpayment was created or increased by reason of subparagraph (A).

(5) *SECRETARY.*—For purposes of this subsection, the term “Secretary” means the Secretary of the Treasury (or such Secretary’s delegate).

SEC. 503. SUBPART F EXEMPTION FOR ACTIVE FINANCING INCOME.

(a) *IN GENERAL.*—Sections 953(e)(10) and 954(h)(9) of the Internal Revenue Code of 1986 (relating to application) are each amended—

(1) by striking “the first taxable year” and inserting “taxable years”,

(2) by striking “January 1, 2000” and inserting “January 1, 2002”, and

(3) by striking “within which such” and inserting “within which any such”.

(b) *TECHNICAL AMENDMENT.*—Paragraph (10) of section 953(e) of such Code is amended by adding at the end the following new sentence: “If this subsection does not apply to a taxable year of a foreign corporation beginning after December 31, 2001 (and taxable years of United States shareholders ending with or within such taxable year), then, notwithstanding the preceding sentence, subsection (a) shall be applied to such taxable years in the same manner as it would if the taxable year of the foreign corporation began in 1998.”

(c) *EFFECTIVE DATE.*—The amendments made by this section shall apply to taxable years beginning after December 31, 1999.

SEC. 504. TAXABLE INCOME LIMIT ON PERCENTAGE DEPLETION FOR MARGINAL PRODUCTION.

(a) *IN GENERAL.*—Subparagraph (H) of section 613A(c)(6) of the Internal Revenue Code of 1986 (relating to temporary suspension of taxable limit with respect to marginal production) is amended by striking “January 1, 2000” and inserting “January 1, 2002”.

(b) *EFFECTIVE DATE.*—The amendment made by this section shall apply to taxable years beginning after December 31, 1999.

SEC. 505. WORK OPPORTUNITY CREDIT AND WELFARE-TO-WORK CREDIT.

(a) *TEMPORARY EXTENSION.*—Sections 51(c)(4)(B) and 51A(f) of the Internal Revenue Code of 1986 (relating to termination) are each amended by striking “June 30, 1999” and inserting “December 31, 2001”.

(b) *CLARIFICATION OF FIRST YEAR OF EMPLOYMENT.*—Paragraph (2) of section 51(i) of such Code is amended by striking “during which he was not a member of a targeted group”.

(c) *EFFECTIVE DATE.*—The amendments made by this section shall apply to individuals who begin work for the employer after June 30, 1999.

SEC. 506. EMPLOYER-PROVIDED EDUCATIONAL ASSISTANCE.

(a) *IN GENERAL.*—Subsection (d) of section 127 of the Internal Revenue Code of 1986 (relating to termination) is amended by striking “May 31, 2000” and inserting “December 31, 2001”.

(b) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall apply to courses beginning after May 31, 2000.

SEC. 507. EXTENSION AND MODIFICATION OF CREDIT FOR PRODUCING ELECTRICITY FROM CERTAIN RENEWABLE RESOURCES.

(a) *EXTENSION AND MODIFICATION OF PLACED-IN-SERVICE RULES.*—Paragraph (3) of section 45(c) of the Internal Revenue Code of 1986 is amended to read as follows:

“(3) *QUALIFIED FACILITY.*—

“(A) *WIND FACILITY.*—In the case of a facility using wind to produce electricity, the term ‘qualified facility’ means any facility owned by the taxpayer which is originally placed in service after December 31, 1993, and before January 1, 2002.

“(B) *CLOSED-LOOP BIOMASS FACILITY.*—In the case of a facility using closed-loop biomass to produce electricity, the term ‘qualified facility’ means any facility owned by the taxpayer which is originally placed in service after December 31, 1992, and before January 1, 2002.

“(C) *POULTRY WASTE FACILITY.*—In the case of a facility using poultry waste to produce electricity, the term ‘qualified facility’ means any facility of the taxpayer which is originally placed in service after December 31, 1999, and before January 1, 2002.”

(b) *EXPANSION OF QUALIFIED ENERGY RESOURCES.*—

(1) *IN GENERAL.*—Section 45(c)(1) of such Code (defining qualified energy resources) is amended by striking “and” at the end of subparagraph (A), by striking the period at the end of subparagraph (B) and inserting “, and”, and by adding at the end the following new subparagraph:

“(C) poultry waste.”

(2) *DEFINITION.*—Section 45(c) of such Code is amended by adding at the end the following new paragraph:

“(4) *POULTRY WASTE.*—The term ‘poultry waste’ means poultry manure and litter, including wood shavings, straw, rice hulls, and other bedding material for the disposition of manure.”

(c) *SPECIAL RULES.*—Section 45(d) of such Code (relating to definitions and special rules) is amended by adding at the end the following new paragraphs:

“(6) *CREDIT ELIGIBILITY IN THE CASE OF GOVERNMENT-OWNED FACILITIES USING POULTRY WASTE.*—In the case of a facility using poultry waste to produce electricity and owned by a governmental unit, the person eligible for the credit under subsection (a) is the lessee or the operator of such facility.

“(7) *CREDIT NOT TO APPLY TO ELECTRICITY SOLD TO UTILITIES UNDER CERTAIN CONTRACTS.*—

“(A) *IN GENERAL.*—The credit determined under subsection (a) shall not apply to electricity—

“(i) produced at a qualified facility described in paragraph (3)(A) which is placed in service by the taxpayer after June 30, 1999, and

“(ii) sold to a utility pursuant to a contract originally entered into before January 1, 1987 (whether or not amended or restated after that date).

“(B) *EXCEPTION.*—Subparagraph (A) shall not apply if—

“(i) the prices for energy and capacity from such facility are established pursuant to an amendment to the contract referred to in subparagraph (A)(ii),

“(ii) such amendment provides that the prices set forth in the contract which exceed avoided cost prices determined at the time of delivery shall apply only to annual quantities of electricity (prorated for partial years) which do not exceed the greater of—

“(I) the average annual quantity of electricity sold to the utility under the contract during calendar years 1994, 1995, 1996, 1997, and 1998, or

“(II) the estimate of the annual electricity production set forth in the contract, or, if there is no such estimate, the greatest annual quantity of electricity sold to the utility under the contract in any of the calendar years 1996, 1997, or 1998, and

“(iii) such amendment provides that energy and capacity in excess of the limitation in clause (ii) may be—

“(I) sold to the utility only at prices that do not exceed avoided cost prices determined at the time of delivery, or

“(II) sold to a third party subject to a mutually agreed upon advance notice to the utility.

For purposes of this subparagraph, avoided cost prices shall be determined as provided for in 18 CFR 292.304(d)(1) or any successor regulation.”

(d) *EFFECTIVE DATE.*—The amendments made by this section shall take effect on the date of the enactment of this Act.

SEC. 508. EXTENSION OF DUTY-FREE TREATMENT UNDER GENERALIZED SYSTEM OF PREFERENCES.

(a) *IN GENERAL.*—Section 505 of the Trade Act of 1974 (19 U.S.C. 2465) is amended by striking “June 30, 1999” and inserting “September 30, 2001”.

(b) *EFFECTIVE DATE.*—

(1) *IN GENERAL.*—The amendment made by this section applies to articles entered on or after the date of the enactment of this Act.

(2) *RETROACTIVE APPLICATION FOR CERTAIN LIQUIDATIONS AND RELIQUIDATIONS.*—

(A) *GENERAL RULE.*—Notwithstanding section 514 of the Tariff Act of 1930 or any other provision of law, and subject to paragraph (3), any entry—

(i) of an article to which duty-free treatment under title V of the Trade Act of 1974 would have applied if such entry had been made on July 1, 1999, and such title had been in effect on July 1, 1999, and

(ii) that was made—

(I) after June 30, 1999, and

(II) before the date of enactment of this Act, shall be liquidated or reliquidated as free of duty, and the Secretary of the Treasury shall refund any duty paid with respect to such entry.

(B) *ENTRY.*—As used in this paragraph, the term “entry” includes a withdrawal from warehouse for consumption.

(3) *REQUESTS.*—Liquidation or reliquidation may be made under paragraph (2) with respect to an entry only if a request therefore is filed with the Customs Service, within 180 days after the date of enactment of this Act, that contains sufficient information to enable the Customs Service—

(A) to locate the entry, or

(B) to reconstruct the entry if it cannot be located.

SEC. 509. EXTENSION OF CREDIT FOR HOLDERS OF QUALIFIED ZONE ACADEMY BONDS.

(a) *IN GENERAL.*—Section 1397E(e)(1) of the Internal Revenue Code of 1986 (relating to national limitation) is amended by striking “and 1999” and inserting “, 1999, 2000, and 2001”.

(b) *LIMITATION ON CARRYOVER PERIODS.*—Paragraph (4) of section 1397E(e) of such Code is amended by adding at the end the following flush sentences:

“Any carryforward of a limitation amount may be carried only to the first 2 years (3 years for carryforwards from 1998 or 1999) following the unused limitation year. For purposes of the preceding sentence, a limitation amount shall be treated as used on a first-in first-out basis.”

SEC. 510. EXTENSION OF FIRST-TIME HOMEBUYER CREDIT FOR DISTRICT OF COLUMBIA.

Section 1400C(i) of the Internal Revenue Code of 1986 is amended by striking “2001” and inserting “2002”.

SEC. 511. EXTENSION OF EXPENSING OF ENVIRONMENTAL REMEDIATION COSTS.

Section 198(h) of the Internal Revenue Code of 1986 is amended by striking “2000” and inserting “2001”.

SEC. 512. TEMPORARY INCREASE IN AMOUNT OF RUM EXCISE TAX COVERED OVER TO PUERTO RICO AND VIRGIN ISLANDS.

(a) *IN GENERAL.*—Section 7652(f)(1) of the Internal Revenue Code of 1986 (relating to limitation on cover over of tax on distilled spirits) is amended to read as follows:

“(1) \$10.50 (\$13.25 in the case of distilled spirits brought into the United States after June 30, 1999, and before January 1, 2002), or”.

(b) *SPECIAL COVER OVER TRANSFER RULES.*—Notwithstanding section 7652 of the Internal Revenue Code of 1986, the following rules shall apply with respect to any transfer before October 1, 2000, of amounts relating to the increase in the cover over of taxes by reason of the amendment made by subsection (a):

(1) *INITIAL TRANSFER OF INCREMENTAL INCREASE IN COVER OVER.*—The Secretary of the Treasury shall, within 15 days after the date of the enactment of this Act, transfer an amount equal to the lesser of—

(A) the amount of such increase otherwise required to be covered over after June 30, 1999, and before the date of the enactment of this Act, or

(B) \$20,000,000.

(2) *TRANSFER OF INCREMENTAL INCREASE FOR FISCAL YEAR 2001.*—The Secretary of the Treasury shall on October 1, 2000, transfer an amount equal to the excess of—

(A) the amount of such increase otherwise required to be covered over after June 30, 1999, and before October 1, 2000, over

(B) the amount of the transfer described in paragraph (1).

(c) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall take effect on July 1, 1999.

Subtitle B—Other Time-Sensitive Provisions

SEC. 521. ADVANCE PRICING AGREEMENTS TREATED AS CONFIDENTIAL TAXPAYER INFORMATION.

(a) *IN GENERAL.*—

(1) *TREATMENT AS RETURN INFORMATION.*—Paragraph (2) of section 6103(b) of the Internal Revenue Code of 1986 (defining return information) is amended by striking “and” at the end of subparagraph (A), by inserting “and” at the end of subparagraph (B), and by inserting after subparagraph (B) the following new subparagraph:

“(C) any advance pricing agreement entered into by a taxpayer and the Secretary and any background information related to such agreement or any application for an advance pricing agreement,”.

(2) *EXCEPTION FROM PUBLIC INSPECTION AS WRITTEN DETERMINATION.*—Paragraph (1) of section 6110(b) of such Code (defining written determination) is amended by adding at the end the following new sentence: “Such term shall not include

any advance pricing agreement entered into by a taxpayer and the Secretary and any background information related to such agreement or any application for an advance pricing agreement.”.

(3) *EFFECTIVE DATE.*—The amendments made by this subsection shall take effect on the date of the enactment of this Act.

(b) *ANNUAL REPORT REGARDING ADVANCE PRICING AGREEMENTS.*—

(1) *IN GENERAL.*—Not later than 90 days after the end of each calendar year, the Secretary of the Treasury shall prepare and publish a report regarding advance pricing agreements.

(2) *CONTENTS OF REPORT.*—The report shall include the following for the calendar year to which such report relates:

(A) Information about the structure, composition, and operation of the advance pricing agreement program office.

(B) A copy of each model advance pricing agreement.

(C) The number of—

(i) applications filed during such calendar year for advance pricing agreements;

(ii) advance pricing agreements executed cumulatively to date and during such calendar year;

(iii) renewals of advance pricing agreements issued;

(iv) pending requests for advance pricing agreements;

(v) pending renewals of advance pricing agreements;

(vi) for each of the items in clauses (ii) through (v), the number that are unilateral, bilateral, and multilateral, respectively;

(vii) advance pricing agreements revoked or canceled, and the number of withdrawals from the advance pricing agreement program; and

(viii) advance pricing agreements finalized or renewed by industry.

(D) General descriptions of—

(i) the nature of the relationships between the related organizations, trades, or businesses covered by advance pricing agreements;

(ii) the covered transactions and the business functions performed and risks assumed by such organizations, trades, or businesses;

(iii) the related organizations, trades, or businesses whose prices or results are tested to determine compliance with transfer pricing methodologies prescribed in advance pricing agreements;

(iv) methodologies used to evaluate tested parties and transactions and the circumstances leading to the use of those methodologies;

(v) critical assumptions made and sources of comparables used;

(vi) comparable selection criteria and the rationale used in determining such criteria;

(vii) the nature of adjustments to comparables or tested parties;

(viii) the nature of any ranges agreed to, including information regarding when no range was used and why, when interquartile ranges were used, and when there was a statistical narrowing of the comparables;

(ix) adjustment mechanisms provided to rectify results that fall outside of the agreed upon advance pricing agreement range;

(x) the various term lengths for advance pricing agreements, including rollback years, and the number of advance pricing agreements with each such term length;

(xi) the nature of documentation required; and

(xii) approaches for sharing of currency or other risks.

(E) Statistics regarding the amount of time taken to complete new and renewal advance pricing agreements.

(F) A detailed description of the Secretary of the Treasury's efforts to ensure compliance with existing advance pricing agreements.

(3) **CONFIDENTIALITY.**—The reports required by this subsection shall be treated as authorized by the Internal Revenue Code of 1986 for purposes of section 6103 of such Code, but the reports shall not include information—

(A) which would not be permitted to be disclosed under section 6110(c) of such Code if such report were a written determination as defined in section 6110 of such Code, or

(B) which can be associated with, or otherwise identify, directly or indirectly, a particular taxpayer.

(4) **FIRST REPORT.**—The report for calendar year 1999 shall include prior calendar years after 1990.

(c) **REGULATIONS.**—The Secretary of the Treasury or the Secretary's delegate shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of section 6103(b)(2)(C), and the last sentence of section 6110(b)(1), of the Internal Revenue Code of 1986, as added by this section.

SEC. 522. AUTHORITY TO POSTPONE CERTAIN TAX-RELATED DEADLINES BY REASON OF Y2K FAILURES.

(a) **IN GENERAL.**—In the case of a taxpayer determined by the Secretary of the Treasury (or the Secretary's delegate) to be affected by a Y2K failure, the Secretary may disregard a period of up to 90 days in determining, under the internal revenue laws, in respect of any tax liability (including any interest, penalty, additional amount, or addition to the tax) of such taxpayer—

(1) whether any of the acts described in paragraph (1) of section 7508(a) of the Internal Revenue Code of 1986 (without regard to the exceptions in parentheses in subparagraphs (A) and (B)) were performed within the time prescribed therefor, and

(2) the amount of any credit or refund.

(b) **APPLICABILITY OF CERTAIN RULES.**—For purposes of this section, rules similar to the rules of subsections (b) and (e) of section 7508 of the Internal Revenue Code of 1986 shall apply.

SEC. 523. INCLUSION OF CERTAIN VACCINES AGAINST STREPTOCOCCUS PNEUMONIAE TO LIST OF TAXABLE VACCINES.

(a) INCLUSION OF VACCINES.—

(1) IN GENERAL.—Section 4132(a)(1) of the Internal Revenue Code of 1986 (defining taxable vaccine) is amended by adding at the end the following new subparagraph:

“(L) Any conjugate vaccine against streptococcus pneumoniae.”.

(2) EFFECTIVE DATE.—

(A) SALES.—The amendment made by this subsection shall apply to vaccine sales after the date of the enactment of this Act, but shall not take effect if subsection (b) does not take effect.

(B) DELIVERIES.—For purposes of subparagraph (A), in the case of sales on or before the date described in such subparagraph for which delivery is made after such date, the delivery date shall be considered the sale date.

(b) VACCINE TAX AND TRUST FUND AMENDMENTS.—

(1) Sections 1503 and 1504 of the Vaccine Injury Compensation Program Modification Act (and the amendments made by such sections) are hereby repealed.

(2) Subparagraph (A) of section 9510(c)(1) of such Code is amended by striking “August 5, 1997” and inserting “December 31, 1999”.

(3) The amendments made by this subsection shall take effect as if included in the provisions of the Omnibus Consolidated and Emergency Supplemental Appropriations Act, 1999 to which they relate.

(c) REPORT.—Not later than January 31, 2000, the Comptroller General of the United States shall prepare and submit a report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate on the operation of the Vaccine Injury Compensation Trust Fund and on the adequacy of such Fund to meet future claims made under the Vaccine Injury Compensation Program.

SEC. 524. DELAY IN EFFECTIVE DATE OF REQUIREMENT FOR APPROVED DIESEL OR KEROSENE TERMINALS.

Paragraph (2) of section 1032(f) of the Taxpayer Relief Act of 1997 is amended by striking “July 1, 2000” and inserting “January 1, 2002”.

SEC. 525. PRODUCTION FLEXIBILITY CONTRACT PAYMENTS.

Any option to accelerate the receipt of any payment under a production flexibility contract which is payable under the Federal Agriculture Improvement and Reform Act of 1996 (7 U.S.C. 7200 et seq.), as in effect on the date of the enactment of this Act, shall be disregarded in determining the taxable year for which such payment is properly includible in gross income for purposes of the Internal Revenue Code of 1986.

Subtitle C—Revenue Offsets**PART I—GENERAL PROVISIONS****SEC. 531. MODIFICATION OF ESTIMATED TAX SAFE HARBOR.**

(a) *IN GENERAL.*—The table contained in clause (i) of section 6654(d)(1)(C) of the Internal Revenue Code of 1986 (relating to limitation on use of preceding year's tax) is amended by striking the items relating to 1999 and 2000 and inserting the following new items:

| | |
|-------------|-------|
| “1999 | 108.6 |
| 2000 | 110”. |

(b) *EFFECTIVE DATE.*—The amendment made by this section shall apply with respect to any installment payment for taxable years beginning after December 31, 1999.

SEC. 532. CLARIFICATION OF TAX TREATMENT OF INCOME AND LOSS ON DERIVATIVES.

(a) *IN GENERAL.*—Section 1221 of the Internal Revenue Code of 1986 (defining capital assets) is amended—

(1) by striking “For purposes” and inserting the following:

“(a) *IN GENERAL.*—For purposes”,

(2) by striking the period at the end of paragraph (5) and inserting a semicolon, and

(3) by adding at the end the following:

“(6) any commodities derivative financial instrument held by a commodities derivatives dealer, unless—

“(A) it is established to the satisfaction of the Secretary that such instrument has no connection to the activities of such dealer as a dealer, and

“(B) such instrument is clearly identified in such dealer's records as being described in subparagraph (A) before the close of the day on which it was acquired, originated, or entered into (or such other time as the Secretary may by regulations prescribe);

“(7) any hedging transaction which is clearly identified as such before the close of the day on which it was acquired, originated, or entered into (or such other time as the Secretary may by regulations prescribe); or

“(8) supplies of a type regularly used or consumed by the taxpayer in the ordinary course of a trade or business of the taxpayer.

“(b) *DEFINITIONS AND SPECIAL RULES.*—

“(1) *COMMODITIES DERIVATIVE FINANCIAL INSTRUMENTS.*—For purposes of subsection (a)(6)—

“(A) *COMMODITIES DERIVATIVES DEALER.*—The term ‘commodities derivatives dealer’ means a person which regularly offers to enter into, assume, offset, assign, or terminate positions in commodities derivative financial instruments with customers in the ordinary course of a trade or business.

“(B) *COMMODITIES DERIVATIVE FINANCIAL INSTRUMENT.*—

“(i) *IN GENERAL.*—The term ‘commodities derivative financial instrument’ means any contract or financial instrument with respect to commodities (other than a share of stock in a corporation, a beneficial interest in a partnership or trust, a note, bond, debenture, or other evidence of indebtedness, or a section 1256 contract (as defined in section 1256(b)), the value or settlement price of which is calculated by or determined by reference to a specified index.

“(ii) *SPECIFIED INDEX.*—The term ‘specified index’ means any one or more or any combination of—

“(I) a fixed rate, price, or amount, or

“(II) a variable rate, price, or amount,

which is based on any current, objectively determinable financial or economic information with respect to commodities which is not within the control of any of the parties to the contract or instrument and is not unique to any of the parties’ circumstances.

“(2) *HEDGING TRANSACTION.*—

“(A) *IN GENERAL.*—For purposes of this section, the term ‘hedging transaction’ means any transaction entered into by the taxpayer in the normal course of the taxpayer’s trade or business primarily—

“(i) to manage risk of price changes or currency fluctuations with respect to ordinary property which is held or to be held by the taxpayer,

“(ii) to manage risk of interest rate or price changes or currency fluctuations with respect to borrowings made or to be made, or ordinary obligations incurred or to be incurred, by the taxpayer, or

“(iii) to manage such other risks as the Secretary may prescribe in regulations.

“(B) *TREATMENT OF NONIDENTIFICATION OR IMPROPER IDENTIFICATION OF HEDGING TRANSACTIONS.*—Notwithstanding subsection (a)(7), the Secretary shall prescribe regulations to properly characterize any income, gain, expense, or loss arising from a transaction—

“(i) which is a hedging transaction but which was not identified as such in accordance with subsection (a)(7), or

“(ii) which was so identified but is not a hedging transaction.

“(3) *REGULATIONS.*—The Secretary shall prescribe such regulations as are appropriate to carry out the purposes of paragraph (6) and (7) of subsection (a) in the case of transactions involving related parties.”.

(b) *MANAGEMENT OF RISK.*—

(1) Section 475(c)(3) of such Code is amended by striking “reduces” and inserting “manages”.

(2) Section 871(h)(4)(C)(iv) of such Code is amended by striking “to reduce” and inserting “to manage”.

(3) Clauses (i) and (ii) of section 988(d)(2)(A) of such Code are each amended by striking “to reduce” and inserting “to manage”.

(4) Paragraph (2) of section 1256(e) of such Code is amended to read as follows:

“(2) DEFINITION OF HEDGING TRANSACTION.—For purposes of this subsection, the term ‘hedging transaction’ means any hedging transaction (as defined in section 1221(b)(2)(A)) if, before the close of the day on which such transaction was entered into (or such earlier time as the Secretary may prescribe by regulations), the taxpayer clearly identifies such transaction as being a hedging transaction.”

(c) CONFORMING AMENDMENTS.—

(1) Each of the following sections of such Code are amended by striking “section 1221” and inserting “section 1221(a)”:

- (A) Section 170(e)(3)(A).
- (B) Section 170(e)(4)(B).
- (C) Section 367(a)(3)(B)(i).
- (D) Section 818(c)(3).
- (E) Section 865(i)(1).
- (F) Section 1092(a)(3)(B)(ii)(II).
- (G) Subparagraphs (C) and (D) of section 1231(b)(1).
- (H) Section 1234(a)(3)(A).

(2) Each of the following sections of such Code are amended by striking “section 1221(1)” and inserting “section 1221(a)(1)”:

- (A) Section 198(c)(1)(A)(i).
- (B) Section 263A(b)(2)(A).
- (C) Clauses (i) and (iii) of section 267(f)(3)(B).
- (D) Section 341(d)(3).
- (E) Section 543(a)(1)(D)(i).
- (F) Section 751(d)(1).
- (G) Section 775(c).
- (H) Section 856(c)(2)(D).
- (I) Section 856(c)(3)(C).
- (J) Section 856(e)(1).
- (K) Section 856(j)(2)(B).
- (L) Section 857(b)(4)(B)(i).
- (M) Section 857(b)(6)(B)(iii).
- (N) Section 864(c)(4)(B)(iii).
- (O) Section 864(d)(3)(A).
- (P) Section 864(d)(6)(A).
- (Q) Section 954(c)(1)(B)(iii).
- (R) Section 995(b)(1)(C).
- (S) Section 1017(b)(3)(E)(i).
- (T) Section 1362(d)(3)(C)(ii).
- (U) Section 4662(c)(2)(C).
- (V) Section 7704(c)(3).
- (W) Section 7704(d)(1)(D).
- (X) Section 7704(d)(1)(G).
- (Y) Section 7704(d)(5).

(3) Section 818(b)(2) of such Code is amended by striking “section 1221(2)” and inserting “section 1221(a)(2)”.

(4) Section 1397B(e)(2) of such Code is amended by striking “section 1221(4)” and inserting “section 1221(a)(4)”.

(d) EFFECTIVE DATE.—The amendments made by this section shall apply to any instrument held, acquired, or entered into, any

transaction entered into, and supplies held or acquired on or after the date of the enactment of this Act.

SEC. 533. EXPANSION OF REPORTING OF CANCELLATION OF INDEBTEDNESS INCOME.

(a) *IN GENERAL.*—Paragraph (2) of section 6050P(c) of the Internal Revenue Code of 1986 (relating to definitions and special rules) is amended by striking “and” at the end of subparagraph (B), by striking the period at the end of subparagraph (C) and inserting “, and”, and by inserting after subparagraph (C) the following new subparagraph:

“(D) any organization a significant trade or business of which is the lending of money.”.

(b) *EFFECTIVE DATE.*—The amendment made by subsection (a) shall apply to discharges of indebtedness after December 31, 1999.

SEC. 534. LIMITATION ON CONVERSION OF CHARACTER OF INCOME FROM CONSTRUCTIVE OWNERSHIP TRANSACTIONS.

(a) *IN GENERAL.*—Part IV of subchapter P of chapter 1 of the Internal Revenue Code of 1986 (relating to special rules for determining capital gains and losses) is amended by inserting after section 1259 the following new section:

“SEC. 1260. GAINS FROM CONSTRUCTIVE OWNERSHIP TRANSACTIONS.

“(a) *IN GENERAL.*—If the taxpayer has gain from a constructive ownership transaction with respect to any financial asset and such gain would (without regard to this section) be treated as a long-term capital gain—

“(1) such gain shall be treated as ordinary income to the extent that such gain exceeds the net underlying long-term capital gain, and

“(2) to the extent such gain is treated as a long-term capital gain after the application of paragraph (1), the determination of the capital gain rate (or rates) applicable to such gain under section 1(h) shall be determined on the basis of the respective rate (or rates) that would have been applicable to the net underlying long-term capital gain.

“(b) *INTEREST CHARGE ON DEFERRAL OF GAIN RECOGNITION.*—

“(1) *IN GENERAL.*—If any gain is treated as ordinary income for any taxable year by reason of subsection (a)(1), the tax imposed by this chapter for such taxable year shall be increased by the amount of interest determined under paragraph (2) with respect to each prior taxable year during any portion of which the constructive ownership transaction was open. Any amount payable under this paragraph shall be taken into account in computing the amount of any deduction allowable to the taxpayer for interest paid or accrued during such taxable year.

“(2) *AMOUNT OF INTEREST.*—The amount of interest determined under this paragraph with respect to a prior taxable year is the amount of interest which would have been imposed under section 6601 on the underpayment of tax for such year which would have resulted if the gain (which is treated as ordinary income by reason of subsection (a)(1)) had been included in gross income in the taxable years in which it accrued (determined by treating the income as accruing at a constant rate equal to the applicable Federal rate as in effect on the day the

transaction closed). The period during which such interest shall accrue shall end on the due date (without extensions) for the return of tax imposed by this chapter for the taxable year in which such transaction closed.

“(3) *APPLICABLE FEDERAL RATE.*—For purposes of paragraph (2), the applicable Federal rate is the applicable Federal rate determined under section 1274(d) (compounded semiannually) which would apply to a debt instrument with a term equal to the period the transaction was open.

“(4) *NO CREDITS AGAINST INCREASE IN TAX.*—Any increase in tax under paragraph (1) shall not be treated as tax imposed by this chapter for purposes of determining—

“(A) the amount of any credit allowable under this chapter, or

“(B) the amount of the tax imposed by section 55.

“(c) *FINANCIAL ASSET.*—For purposes of this section—

“(1) *IN GENERAL.*—The term ‘financial asset’ means—

“(A) any equity interest in any pass-thru entity, and

“(B) to the extent provided in regulations—

“(i) any debt instrument, and

“(ii) any stock in a corporation which is not a pass-thru entity.

“(2) *PASS-THRU ENTITY.*—For purposes of paragraph (1), the term ‘pass-thru entity’ means—

“(A) a regulated investment company,

“(B) a real estate investment trust,

“(C) an S corporation,

“(D) a partnership,

“(E) a trust,

“(F) a common trust fund,

“(G) a passive foreign investment company (as defined in section 1297 without regard to subsection (e) thereof),

“(H) a foreign personal holding company,

“(I) a foreign investment company (as defined in section 1246(b)), and

“(J) a REMIC.

“(d) *CONSTRUCTIVE OWNERSHIP TRANSACTION.*—For purposes of this section—

“(1) *IN GENERAL.*—The taxpayer shall be treated as having entered into a constructive ownership transaction with respect to any financial asset if the taxpayer—

“(A) holds a long position under a notional principal contract with respect to the financial asset,

“(B) enters into a forward or futures contract to acquire the financial asset,

“(C) is the holder of a call option, and is the grantor of a put option, with respect to the financial asset and such options have substantially equal strike prices and substantially contemporaneous maturity dates, or

“(D) to the extent provided in regulations prescribed by the Secretary, enters into one or more other transactions (or acquires one or more positions) that have substantially the same effect as a transaction described in any of the preceding subparagraphs.

“(2) *EXCEPTION FOR POSITIONS WHICH ARE MARKED TO MARKET.*—This section shall not apply to any constructive ownership transaction if all of the positions which are part of such transaction are marked to market under any provision of this title or the regulations thereunder.

“(3) *LONG POSITION UNDER NOTIONAL PRINCIPAL CONTRACT.*—A person shall be treated as holding a long position under a notional principal contract with respect to any financial asset if such person—

“(A) has the right to be paid (or receive credit for) all or substantially all of the investment yield (including appreciation) on such financial asset for a specified period, and

“(B) is obligated to reimburse (or provide credit for) all or substantially all of any decline in the value of such financial asset.

“(4) *FORWARD CONTRACT.*—The term ‘forward contract’ means any contract to acquire in the future (or provide or receive credit for the future value of) any financial asset.

“(e) *NET UNDERLYING LONG-TERM CAPITAL GAIN.*—For purposes of this section, in the case of any constructive ownership transaction with respect to any financial asset, the term ‘net underlying long-term capital gain’ means the aggregate net capital gain that the taxpayer would have had if—

“(1) the financial asset had been acquired for fair market value on the date such transaction was opened and sold for fair market value on the date such transaction was closed, and

“(2) only gains and losses that would have resulted from the deemed ownership under paragraph (1) were taken into account.

The amount of the net underlying long-term capital gain with respect to any financial asset shall be treated as zero unless the amount thereof is established by clear and convincing evidence.

“(f) *SPECIAL RULE WHERE TAXPAYER TAKES DELIVERY.*—Except as provided in regulations prescribed by the Secretary, if a constructive ownership transaction is closed by reason of taking delivery, this section shall be applied as if the taxpayer had sold all the contracts, options, or other positions which are part of such transaction for fair market value on the closing date. The amount of gain recognized under the preceding sentence shall not exceed the amount of gain treated as ordinary income under subsection (a). Proper adjustments shall be made in the amount of any gain or loss subsequently realized for gain recognized and treated as ordinary income under this subsection.

“(g) *REGULATIONS.*—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this section, including regulations—

“(1) to permit taxpayers to mark to market constructive ownership transactions in lieu of applying this section, and

“(2) to exclude certain forward contracts which do not convey substantially all of the economic return with respect to a financial asset.”.

(b) **CLERICAL AMENDMENT.**—*The table of sections for part IV of subchapter P of chapter 1 of such Code is amended by adding at the end the following new item:*

“Sec. 1260. Gains from constructive ownership transactions.”.

(c) **EFFECTIVE DATE.**—*The amendments made by this section shall apply to transactions entered into after July 11, 1999.*

SEC. 535. TREATMENT OF EXCESS PENSION ASSETS USED FOR RETIREE HEALTH BENEFITS.

(a) **EXTENSION.**—

(1) **IN GENERAL.**—*Paragraph (5) of section 420(b) of the Internal Revenue Code of 1986 (relating to expiration) is amended by striking “in any taxable year beginning after December 31, 2000” and inserting “made after December 31, 2005”.*

(2) **CONFORMING AMENDMENTS.**—

(A) *Section 101(e)(3) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1021(e)(3)) is amended by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.*

(B) *Section 403(c)(1) of such Act (29 U.S.C. 1103(c)(1)) is amended by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.*

(C) *Paragraph (13) of section 408(b) of such Act (29 U.S.C. 1108(b)(13)) is amended—*

(i) by striking “in a taxable year beginning before January 1, 2001” and inserting “made before January 1, 2006”, and

(ii) by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.

(b) **APPLICATION OF MINIMUM COST REQUIREMENTS.**—

(1) **IN GENERAL.**—*Paragraph (3) of section 420(c) of the Internal Revenue Code of 1986 is amended to read as follows:*

“(3) MINIMUM COST REQUIREMENTS.—

“(A) IN GENERAL.—The requirements of this paragraph are met if each group health plan or arrangement under which applicable health benefits are provided provides that the applicable employer cost for each taxable year during the cost maintenance period shall not be less than the higher of the applicable employer costs for each of the 2 taxable years immediately preceding the taxable year of the qualified transfer.

“(B) APPLICABLE EMPLOYER COST.—For purposes of this paragraph, the term ‘applicable employer cost’ means, with respect to any taxable year, the amount determined by dividing—

“(i) the qualified current retiree health liabilities of the employer for such taxable year determined—

“(I) without regard to any reduction under subsection (e)(1)(B), and

“(II) in the case of a taxable year in which there was no qualified transfer, in the same man-

ner as if there had been such a transfer at the end of the taxable year, by

“(ii) the number of individuals to whom coverage for applicable health benefits was provided during such taxable year.

“(C) *ELECTION TO COMPUTE COST SEPARATELY.*—An employer may elect to have this paragraph applied separately with respect to individuals eligible for benefits under title XVIII of the Social Security Act at any time during the taxable year and with respect to individuals not so eligible.

“(D) *COST MAINTENANCE PERIOD.*—For purposes of this paragraph, the term ‘cost maintenance period’ means the period of 5 taxable years beginning with the taxable year in which the qualified transfer occurs. If a taxable year is in two or more overlapping cost maintenance periods, this paragraph shall be applied by taking into account the highest applicable employer cost required to be provided under subparagraph (A) for such taxable year.

“(E) *REGULATIONS.*—The Secretary shall prescribe such regulations as may be necessary to prevent an employer who significantly reduces retiree health coverage during the cost maintenance period from being treated as satisfying the minimum cost requirement of this subsection.”.

(2) *CONFORMING AMENDMENTS.*—

(A) Clause (iii) of section 420(b)(1)(C) of such Code is amended by striking “benefits” and inserting “cost”.

(B) Subparagraph (D) of section 420(e)(1) of such Code is amended by striking “and shall not be subject to the minimum benefit requirements of subsection (c)(3)” and inserting “or in calculating applicable employer cost under subsection (c)(3)(B)”.

(c) *EFFECTIVE DATES.*—

(1) *IN GENERAL.*—The amendments made by this section shall apply to qualified transfers occurring after the date of the enactment of this Act.

(2) *TRANSITION RULE.*—If the cost maintenance period for any qualified transfer after the date of the enactment of this Act includes any portion of a benefit maintenance period for any qualified transfer on or before such date, the amendments made by subsection (b) shall not apply to such portion of the cost maintenance period (and such portion shall be treated as a benefit maintenance period).

SEC. 536. MODIFICATION OF INSTALLMENT METHOD AND REPEAL OF INSTALLMENT METHOD FOR ACCRUAL METHOD TAXPAYERS.

(a) *REPEAL OF INSTALLMENT METHOD FOR ACCRUAL BASIS TAXPAYERS.*—

(1) *IN GENERAL.*—Subsection (a) of section 453 of the Internal Revenue Code of 1986 (relating to installment method) is amended to read as follows:

“(a) *USE OF INSTALLMENT METHOD.*—

“(1) *IN GENERAL.*—Except as otherwise provided in this section, income from an installment sale shall be taken into account for purposes of this title under the installment method.

“(2) **ACCRUAL METHOD TAXPAYER.**—The installment method shall not apply to income from an installment sale if such income would be reported under an accrual method of accounting without regard to this section. The preceding sentence shall not apply to a disposition described in subparagraph (A) or (B) of subsection (l)(2).”.

(2) **CONFORMING AMENDMENTS.**—Sections 453(d)(1), 453(i)(1), and 453(k) of such Code are each amended by striking “(a)” each place it appears and inserting “(a)(1)”.

(b) **MODIFICATION OF PLEDGE RULES.**—Paragraph (4) of section 453A(d) of such Code (relating to pledges, etc., of installment obligations) is amended by adding at the end the following: “A payment shall be treated as directly secured by an interest in an installment obligation to the extent an arrangement allows the taxpayer to satisfy all or a portion of the indebtedness with the installment obligation.”.

(c) **EFFECTIVE DATE.**—The amendments made by this section shall apply to sales or other dispositions occurring on or after the date of the enactment of this Act.

SEC. 537. DENIAL OF CHARITABLE CONTRIBUTION DEDUCTION FOR TRANSFERS ASSOCIATED WITH SPLIT-DOLLAR INSURANCE ARRANGEMENTS.

(a) **IN GENERAL.**—Subsection (f) of section 170 of the Internal Revenue Code of 1986 (relating to disallowance of deduction in certain cases and special rules) is amended by adding at the end the following new paragraph:

“(10) **SPLIT-DOLLAR LIFE INSURANCE, ANNUITY, AND ENDOWMENT CONTRACTS.**—

“(A) **IN GENERAL.**—Nothing in this section or in section 545(b)(2), 556(b)(2), 642(c), 2055, 2106(a)(2), or 2522 shall be construed to allow a deduction, and no deduction shall be allowed, for any transfer to or for the use of an organization described in subsection (c) if in connection with such transfer—

“(i) the organization directly or indirectly pays, or has previously paid, any premium on any personal benefit contract with respect to the transferor, or

“(ii) there is an understanding or expectation that any person will directly or indirectly pay any premium on any personal benefit contract with respect to the transferor.

“(B) **PERSONAL BENEFIT CONTRACT.**—For purposes of subparagraph (A), the term ‘personal benefit contract’ means, with respect to the transferor, any life insurance, annuity, or endowment contract if any direct or indirect beneficiary under such contract is the transferor, any member of the transferor’s family, or any other person (other than an organization described in subsection (c)) designated by the transferor.

“(C) **APPLICATION TO CHARITABLE REMAINDER TRUSTS.**—In the case of a transfer to a trust referred to in subparagraph (E), references in subparagraphs (A) and (F) to an organization described in subsection (c) shall be treated as a reference to such trust.

“(D) EXCEPTION FOR CERTAIN ANNUITY CONTRACTS.—If, in connection with a transfer to or for the use of an organization described in subsection (c), such organization incurs an obligation to pay a charitable gift annuity (as defined in section 501(m)) and such organization purchases any annuity contract to fund such obligation, persons receiving payments under the charitable gift annuity shall not be treated for purposes of subparagraph (B) as indirect beneficiaries under such contract if—

“(i) such organization possesses all of the incidents of ownership under such contract,

“(ii) such organization is entitled to all the payments under such contract, and

“(iii) the timing and amount of payments under such contract are substantially the same as the timing and amount of payments to each such person under such obligation (as such obligation is in effect at the time of such transfer).

“(E) EXCEPTION FOR CERTAIN CONTRACTS HELD BY CHARITABLE REMAINDER TRUSTS.—A person shall not be treated for purposes of subparagraph (B) as an indirect beneficiary under any life insurance, annuity, or endowment contract held by a charitable remainder annuity trust or a charitable remainder unitrust (as defined in section 664(d)) solely by reason of being entitled to any payment referred to in paragraph (1)(A) or (2)(A) of section 664(d) if—

“(i) such trust possesses all of the incidents of ownership under such contract, and

“(ii) such trust is entitled to all the payments under such contract.

“(F) EXCISE TAX ON PREMIUMS PAID.—

“(i) IN GENERAL.—There is hereby imposed on any organization described in subsection (c) an excise tax equal to the premiums paid by such organization on any life insurance, annuity, or endowment contract if the payment of premiums on such contract is in connection with a transfer for which a deduction is not allowable under subparagraph (A), determined without regard to when such transfer is made.

“(ii) PAYMENTS BY OTHER PERSONS.—For purposes of clause (i), payments made by any other person pursuant to an understanding or expectation referred to in subparagraph (A) shall be treated as made by the organization.

“(iii) REPORTING.—Any organization on which tax is imposed by clause (i) with respect to any premium shall file an annual return which includes—

“(I) the amount of such premiums paid during the year and the name and TIN of each beneficiary under the contract to which the premium relates, and

“(II) such other information as the Secretary may require.

The penalties applicable to returns required under section 6033 shall apply to returns required under this clause. Returns required under this clause shall be furnished at such time and in such manner as the Secretary shall by forms or regulations require.

“(iv) CERTAIN RULES TO APPLY.—The tax imposed by this subparagraph shall be treated as imposed by chapter 42 for purposes of this title other than subchapter B of chapter 42.

“(G) SPECIAL RULE WHERE STATE REQUIRES SPECIFICATION OF CHARITABLE GIFT ANNUITANT IN CONTRACT.—In the case of an obligation to pay a charitable gift annuity referred to in subparagraph (D) which is entered into under the laws of a State which requires, in order for the charitable gift annuity to be exempt from insurance regulation by such State, that each beneficiary under the charitable gift annuity be named as a beneficiary under an annuity contract issued by an insurance company authorized to transact business in such State, the requirements of clauses (i) and (ii) of subparagraph (D) shall be treated as met if—

“(i) such State law requirement was in effect on February 8, 1999,

“(ii) each such beneficiary under the charitable gift annuity is a bona fide resident of such State at the time the obligation to pay a charitable gift annuity is entered into, and

“(iii) the only persons entitled to payments under such contract are persons entitled to payments as beneficiaries under such obligation on the date such obligation is entered into.

“(H) MEMBER OF FAMILY.—For purposes of this paragraph, an individual’s family consists of the individual’s grandparents, the grandparents of such individual’s spouse, the lineal descendants of such grandparents, and any spouse of such a lineal descendant.

“(I) REGULATIONS.—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this paragraph, including regulations to prevent the avoidance of such purposes.”.

(b) EFFECTIVE DATES.—

(1) IN GENERAL.—Except as otherwise provided in this section, the amendment made by this section shall apply to transfers made after February 8, 1999.

(2) EXCISE TAX.—Except as provided in paragraph (3) of this subsection, section 170(f)(10)(F) of the Internal Revenue Code of 1986 (as added by this section) shall apply to premiums paid after the date of the enactment of this Act.

(3) REPORTING.—Clause (iii) of such section 170(f)(10)(F) shall apply to premiums paid after February 8, 1999 (determined as if the tax imposed by such section applies to premiums paid after such date).

SEC. 538. DISTRIBUTIONS BY A PARTNERSHIP TO A CORPORATE PARTNER OF STOCK IN ANOTHER CORPORATION.

(a) *IN GENERAL.*—Section 732 of the Internal Revenue Code of 1986 (relating to basis of distributed property other than money) is amended by adding at the end the following new subsection:

“(f) *CORRESPONDING ADJUSTMENT TO BASIS OF ASSETS OF A DISTRIBUTED CORPORATION CONTROLLED BY A CORPORATE PARTNER.*—

“(1) *IN GENERAL.*—If—

“(A) a corporation (hereafter in this subsection referred to as the ‘corporate partner’) receives a distribution from a partnership of stock in another corporation (hereafter in this subsection referred to as the ‘distributed corporation’),

“(B) the corporate partner has control of the distributed corporation immediately after the distribution or at any time thereafter, and

“(C) the partnership’s adjusted basis in such stock immediately before the distribution exceeded the corporate partner’s adjusted basis in such stock immediately after the distribution,

then an amount equal to such excess shall be applied to reduce (in accordance with subsection (c)) the basis of property held by the distributed corporation at such time (or, if the corporate partner does not control the distributed corporation at such time, at the time the corporate partner first has such control).

“(2) *EXCEPTION FOR CERTAIN DISTRIBUTIONS BEFORE CONTROL ACQUIRED.*—Paragraph (1) shall not apply to any distribution of stock in the distributed corporation if—

“(A) the corporate partner does not have control of such corporation immediately after such distribution, and

“(B) the corporate partner establishes to the satisfaction of the Secretary that such distribution was not part of a plan or arrangement to acquire control of the distributed corporation.

“(3) *LIMITATIONS ON BASIS REDUCTION.*—

“(A) *IN GENERAL.*—The amount of the reduction under paragraph (1) shall not exceed the amount by which the sum of the aggregate adjusted bases of the property and the amount of money of the distributed corporation exceeds the corporate partner’s adjusted basis in the stock of the distributed corporation.

“(B) *REDUCTION NOT TO EXCEED ADJUSTED BASIS OF PROPERTY.*—No reduction under paragraph (1) in the basis of any property shall exceed the adjusted basis of such property (determined without regard to such reduction).

“(4) *GAIN RECOGNITION WHERE REDUCTION LIMITED.*—If the amount of any reduction under paragraph (1) (determined after the application of paragraph (3)(A)) exceeds the aggregate adjusted bases of the property of the distributed corporation—

“(A) such excess shall be recognized by the corporate partner as long-term capital gain, and

“(B) the corporate partner’s adjusted basis in the stock of the distributed corporation shall be increased by such excess.

“(5) **CONTROL.**—For purposes of this subsection, the term ‘control’ means ownership of stock meeting the requirements of section 1504(a)(2).

“(6) **INDIRECT DISTRIBUTIONS.**—For purposes of paragraph (1), if a corporation acquires (other than in a distribution from a partnership) stock the basis of which is determined (by reason of being distributed from a partnership) in whole or in part by reference to subsection (a)(2) or (b), the corporation shall be treated as receiving a distribution of such stock from a partnership.

“(7) **SPECIAL RULE FOR STOCK IN CONTROLLED CORPORATION.**—If the property held by a distributed corporation is stock in a corporation which the distributed corporation controls, this subsection shall be applied to reduce the basis of the property of such controlled corporation. This subsection shall be re-applied to any property of any controlled corporation which is stock in a corporation which it controls.

“(8) **REGULATIONS.**—The Secretary shall prescribe such regulations as may be necessary to carry out the purposes of this subsection, including regulations to avoid double counting and to prevent the abuse of such purposes.”

(b) **EFFECTIVE DATES.**—

(1) **IN GENERAL.**—Except as provided in paragraph (2), the amendment made by this section shall apply to distributions made after July 14, 1999.

(2) **PARTNERSHIPS IN EXISTENCE ON JULY 14, 1999.**—In the case of a corporation which is a partner in a partnership as of July 14, 1999, the amendment made by this section shall apply to any distribution made (or treated as made) to such partner from such partnership after June 30, 2001, except that this paragraph shall not apply to any distribution after the date of the enactment of this Act unless the partner makes an election to have this paragraph apply to such distribution on the partner’s return of Federal income tax for the taxable year in which such distribution occurs.

PART II—PROVISIONS RELATING TO REAL ESTATE INVESTMENT TRUSTS

Subpart A—Treatment of Income and Services Provided by Taxable REIT Subsidiaries

SEC. 541. MODIFICATIONS TO ASSET DIVERSIFICATION TEST.

(a) **IN GENERAL.**—Subparagraph (B) of section 856(c)(4) of the Internal Revenue Code of 1986 is amended to read as follows:

“(B)(i) not more than 25 percent of the value of its total assets is represented by securities (other than those includible under subparagraph (A)),

“(ii) not more than 20 percent of the value of its total assets is represented by securities of 1 or more taxable REIT subsidiaries, and

“(iii) except with respect to a taxable REIT subsidiary and securities includible under subparagraph (A)—

“(I) not more than 5 percent of the value of its total assets is represented by securities of any one issuer,

“(II) the trust does not hold securities possessing more than 10 percent of the total voting power of the outstanding securities of any one issuer, and

“(III) the trust does not hold securities having a value of more than 10 percent of the total value of the outstanding securities of any one issuer.”.

(b) **EXCEPTION FOR STRAIGHT DEBT SECURITIES.**—Subsection (c) of section 856 of such Code is amended by adding at the end the following new paragraph:

“(7) **STRAIGHT DEBT SAFE HARBOR IN APPLYING PARAGRAPH (4).**—Securities of an issuer which are straight debt (as defined in section 1361(c)(5) without regard to subparagraph (B)(iii) thereof) shall not be taken into account in applying paragraph (4)(B)(ii)(III) if—

“(A) the issuer is an individual, or

“(B) the only securities of such issuer which are held by the trust or a taxable REIT subsidiary of the trust are straight debt (as so defined), or

“(C) the issuer is a partnership and the trust holds at least a 20 percent profits interest in the partnership.”.

SEC. 542. TREATMENT OF INCOME AND SERVICES PROVIDED BY TAXABLE REIT SUBSIDIARIES.

(a) **INCOME FROM TAXABLE REIT SUBSIDIARIES NOT TREATED AS IMPERMISSIBLE TENANT SERVICE INCOME.**—Clause (i) of section 856(d)(7)(C) of the Internal Revenue Code of 1986 (relating to exceptions to impermissible tenant service income) is amended by inserting “or through a taxable REIT subsidiary of such trust” after “income”.

(b) **CERTAIN INCOME FROM TAXABLE REIT SUBSIDIARIES NOT EXCLUDED FROM RENTS FROM REAL PROPERTY.**—

(1) **IN GENERAL.**—Subsection (d) of section 856 of such Code (relating to rents from real property defined) is amended by adding at the end the following new paragraphs:

“(8) **SPECIAL RULE FOR TAXABLE REIT SUBSIDIARIES.**—For purposes of this subsection, amounts paid to a real estate investment trust by a taxable REIT subsidiary of such trust shall not be excluded from rents from real property by reason of paragraph (2)(B) if the requirements of either of the following subparagraphs are met:

“(A) **LIMITED RENTAL EXCEPTION.**—The requirements of this subparagraph are met with respect to any property if at least 90 percent of the leased space of the property is rented to persons other than taxable REIT subsidiaries of such trust and other than persons described in section 856(d)(2)(B). The preceding sentence shall apply only to the extent that the amounts paid to the trust as rents from real property (as defined in paragraph (1) without regard to paragraph (2)(B)) from such property are substantially comparable to such rents made by the other tenants of the trust’s property for comparable space.

“(B) **EXCEPTION FOR CERTAIN LODGING FACILITIES.**—The requirements of this subparagraph are met with re-

spect to an interest in real property which is a qualified lodging facility leased by the trust to a taxable REIT subsidiary of the trust if the property is operated on behalf of such subsidiary by a person who is an eligible independent contractor.

“(9) *ELIGIBLE INDEPENDENT CONTRACTOR.*—For purposes of paragraph (8)(B)—

“(A) *IN GENERAL.*—The term ‘eligible independent contractor’ means, with respect to any qualified lodging facility, any independent contractor if, at the time such contractor enters into a management agreement or other similar service contract with the taxable REIT subsidiary to operate the facility, such contractor (or any related person) is actively engaged in the trade or business of operating qualified lodging facilities for any person who is not a related person with respect to the real estate investment trust or the taxable REIT subsidiary.

“(B) *SPECIAL RULES.*—Solely for purposes of this paragraph and paragraph (8)(B), a person shall not fail to be treated as an independent contractor with respect to any qualified lodging facility by reason of any of the following:

“(i) The taxable REIT subsidiary bears the expenses for the operation of the facility pursuant to the management agreement or other similar service contract.

“(ii) The taxable REIT subsidiary receives the revenues from the operation of such facility, net of expenses for such operation and fees payable to the operator pursuant to such agreement or contract.

“(iii) The real estate investment trust receives income from such person with respect to another property that is attributable to a lease of such other property to such person that was in effect as of the later of—

“(I) January 1, 1999, or

“(II) the earliest date that any taxable REIT subsidiary of such trust entered into a management agreement or other similar service contract with such person with respect to such qualified lodging facility.

“(C) *RENEWALS, ETC., OF EXISTING LEASES.*—For purposes of subparagraph (B)(iii)—

“(i) a lease shall be treated as in effect on January 1, 1999, without regard to its renewal after such date, so long as such renewal is pursuant to the terms of such lease as in effect on whichever of the dates under subparagraph (B)(iii) is the latest, and

“(ii) a lease of a property entered into after whichever of the dates under subparagraph (B)(iii) is the latest shall be treated as in effect on such date if—

“(I) on such date, a lease of such property from the trust was in effect, and

“(II) under the terms of the new lease, such trust receives a substantially similar or lesser ben-

efit in comparison to the lease referred to in subclause (I).

“(D) **QUALIFIED LODGING FACILITY.**—For purposes of this paragraph—

“(i) **IN GENERAL.**—The term ‘qualified lodging facility’ means any lodging facility unless wagering activities are conducted at or in connection with such facility by any person who is engaged in the business of accepting wagers and who is legally authorized to engage in such business at or in connection with such facility.

“(ii) **LODGING FACILITY.**—The term ‘lodging facility’ means a hotel, motel, or other establishment more than one-half of the dwelling units in which are used on a transient basis.

“(iii) **CUSTOMARY AMENITIES AND FACILITIES.**—The term ‘lodging facility’ includes customary amenities and facilities operated as part of, or associated with, the lodging facility so long as such amenities and facilities are customary for other properties of a comparable size and class owned by other owners unrelated to such real estate investment trust.

“(E) **OPERATE INCLUDES MANAGE.**—References in this paragraph to operating a property shall be treated as including a reference to managing the property.

“(F) **RELATED PERSON.**—Persons shall be treated as related to each other if such persons are treated as a single employer under subsection (a) or (b) of section 52.”.

(2) **CONFORMING AMENDMENT.**—Subparagraph (B) of section 856(d)(2) of such Code is amended by inserting “except as provided in paragraph (8),” after “(B)”.

(3) **DETERMINING RENTS FROM REAL PROPERTY.**—

(A)(i) Paragraph (1) of section 856(d) of such Code is amended by striking “adjusted bases” each place it occurs and inserting “fair market values”.

(ii) The amendment made by this subparagraph shall apply to taxable years beginning after December 31, 2000.

(B)(i) Clause (i) of section 856(d)(2)(B) of such Code is amended by striking “number” and inserting “value”.

(ii) The amendment made by this subparagraph shall apply to amounts received or accrued in taxable years beginning after December 31, 2000, except for amounts paid pursuant to leases in effect on July 12, 1999, or pursuant to a binding contract in effect on such date and at all times thereafter.

SEC. 543. TAXABLE REIT SUBSIDIARY.

(a) **IN GENERAL.**—Section 856 of the Internal Revenue Code of 1986 is amended by adding at the end the following new subsection:

“(l) **TAXABLE REIT SUBSIDIARY.**—For purposes of this part—

“(1) **IN GENERAL.**—The term ‘taxable REIT subsidiary’ means, with respect to a real estate investment trust, a corporation (other than a real estate investment trust) if—

“(A) such trust directly or indirectly owns stock in such corporation, and

“(B) such trust and such corporation jointly elect that such corporation shall be treated as a taxable REIT subsidiary of such trust for purposes of this part. Such an election, once made, shall be irrevocable unless both such trust and corporation consent to its revocation. Such election, and any revocation thereof, may be made without the consent of the Secretary.

“(2) 35 PERCENT OWNERSHIP IN ANOTHER TAXABLE REIT SUBSIDIARY.—The term ‘taxable REIT subsidiary’ includes, with respect to any real estate investment trust, any corporation (other than a real estate investment trust) with respect to which a taxable REIT subsidiary of such trust owns directly or indirectly—

“(A) securities possessing more than 35 percent of the total voting power of the outstanding securities of such corporation, or

“(B) securities having a value of more than 35 percent of the total value of the outstanding securities of such corporation.

The preceding sentence shall not apply to a qualified REIT subsidiary (as defined in subsection (i)(2)). The rule of section 856(c)(7) shall apply for purposes of subparagraph (B).

“(3) EXCEPTIONS.—The term ‘taxable REIT subsidiary’ shall not include—

“(A) any corporation which directly or indirectly operates or manages a lodging facility or a health care facility, and

“(B) any corporation which directly or indirectly provides to any other person (under a franchise, license, or otherwise) rights to any brand name under which any lodging facility or health care facility is operated.

Subparagraph (B) shall not apply to rights provided to an eligible independent contractor to operate or manage a lodging facility if such rights are held by such corporation as a franchisee, licensee, or in a similar capacity and such lodging facility is either owned by such corporation or is leased to such corporation from the real estate investment trust.

“(4) DEFINITIONS.—For purposes of paragraph (3)—

“(A) LODGING FACILITY.—The term ‘lodging facility’ has the meaning given to such term by paragraph (9)(D)(ii).

“(B) HEALTH CARE FACILITY.—The term ‘health care facility’ has the meaning given to such term by subsection (e)(6)(D)(ii).”.

(b) CONFORMING AMENDMENT.—Paragraph (2) of section 856(i) of such Code is amended by adding at the end the following new sentence: “Such term shall not include a taxable REIT subsidiary.”.

SEC. 544. LIMITATION ON EARNINGS STRIPPING.

Paragraph (3) of section 163(j) of the Internal Revenue Code of 1986 (relating to limitation on deduction for interest on certain indebtedness) is amended by striking “and” at the end of subparagraph (A), by striking the period at the end of subparagraph (B) and inserting “, and”, and by adding at the end the following new subparagraph:

“(C) any interest paid or accrued (directly or indirectly) by a taxable REIT subsidiary (as defined in section 856(l)) of a real estate investment trust to such trust.”.

SEC. 545. 100 PERCENT TAX ON IMPROPERLY ALLOCATED AMOUNTS.

(a) *IN GENERAL.*—Subsection (b) of section 857 of the Internal Revenue Code of 1986 (relating to method of taxation of real estate investment trusts and holders of shares or certificates of beneficial interest) is amended by redesignating paragraphs (7) and (8) as paragraphs (8) and (9), respectively, and by inserting after paragraph (6) the following new paragraph:

“(7) *INCOME FROM REDETERMINED RENTS, REDETERMINED DEDUCTIONS, AND EXCESS INTEREST.*—

“(A) *IMPOSITION OF TAX.*—There is hereby imposed for each taxable year of the real estate investment trust a tax equal to 100 percent of redetermined rents, redetermined deductions, and excess interest.

“(B) *REDETERMINED RENTS.*—

“(i) *IN GENERAL.*—The term ‘redetermined rents’ means rents from real property (as defined in subsection 856(d)) the amount of which would (but for subparagraph (E)) be reduced on distribution, apportionment, or allocation under section 482 to clearly reflect income as a result of services furnished or rendered by a taxable REIT subsidiary of the real estate investment trust to a tenant of such trust.

“(ii) *EXCEPTION FOR CERTAIN SERVICES.*—Clause (i) shall not apply to amounts received directly or indirectly by a real estate investment trust for services described in paragraph (1)(B) or (7)(C)(i) of section 856(d).

“(iii) *EXCEPTION FOR DE MINIMIS AMOUNTS.*—Clause (i) shall not apply to amounts described in section 856(d)(7)(A) with respect to a property to the extent such amounts do not exceed the one percent threshold described in section 856(d)(7)(B) with respect to such property.

“(iv) *EXCEPTION FOR COMPARABLY PRICED SERVICES.*—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if—

“(I) such subsidiary renders a significant amount of similar services to persons other than such trust and tenants of such trust who are unrelated (within the meaning of section 856(d)(8)(F)) to such subsidiary, trust, and tenants, but

“(II) only to the extent the charge for such service so rendered is substantially comparable to the charge for the similar services rendered to persons referred to in subclause (I).

“(v) *EXCEPTION FOR CERTAIN SEPARATELY CHARGED SERVICES.*—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if—

“(I) the rents paid to the trust by tenants (leasing at least 25 percent of the net leasable space in the trust’s property) who are not receiving such service from such subsidiary are substantially comparable to the rents paid by tenants leasing comparable space who are receiving such service from such subsidiary, and

“(II) the charge for such service from such subsidiary is separately stated.

“(vi) EXCEPTION FOR CERTAIN SERVICES BASED ON SUBSIDIARY’S INCOME FROM THE SERVICES.—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if the gross income of such subsidiary from such service is not less than 150 percent of such subsidiary’s direct cost in furnishing or rendering the service.

“(vii) EXCEPTIONS GRANTED BY SECRETARY.—The Secretary may waive the tax otherwise imposed by subparagraph (A) if the trust establishes to the satisfaction of the Secretary that rents charged to tenants were established on an arms’ length basis even though a taxable REIT subsidiary of the trust provided services to such tenants.

“(C) REDETERMINED DEDUCTIONS.—The term ‘redetermined deductions’ means deductions (other than redetermined rents) of a taxable REIT subsidiary of a real estate investment trust if the amount of such deductions would (but for subparagraph (E)) be decreased on distribution, apportionment, or allocation under section 482 to clearly reflect income as between such subsidiary and such trust.

“(D) EXCESS INTEREST.—The term ‘excess interest’ means any deductions for interest payments by a taxable REIT subsidiary of a real estate investment trust to such trust to the extent that the interest payments are in excess of a rate that is commercially reasonable.

“(E) COORDINATION WITH SECTION 482.—The imposition of tax under subparagraph (A) shall be in lieu of any distribution, apportionment, or allocation under section 482.

“(F) REGULATORY AUTHORITY.—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this paragraph. Until the Secretary prescribes such regulations, real estate investment trusts and their taxable REIT subsidiaries may base their allocations on any reasonable method.”.

(b) AMOUNT SUBJECT TO TAX NOT REQUIRED TO BE DISTRIBUTED.—Subparagraph (E) of section 857(b)(2) of such Code (relating to real estate investment trust taxable income) is amended by striking “paragraph (5)” and inserting “paragraphs (5) and (7)”.

SEC. 546. EFFECTIVE DATE.

(a) IN GENERAL.—The amendments made by this subpart shall apply to taxable years beginning after December 31, 2000.

(b) TRANSITIONAL RULES RELATED TO SECTION 541.—

(1) EXISTING ARRANGEMENTS.—

(A) *IN GENERAL.*—*Except as otherwise provided in this paragraph, the amendment made by section 541 shall not apply to a real estate investment trust with respect to—*

(i) *securities of a corporation held directly or indirectly by such trust on July 12, 1999,*

(ii) *securities of a corporation held by an entity on July 12, 1999, if such trust acquires control of such entity pursuant to a written binding contract in effect on such date and at all times thereafter before such acquisition,*

(iii) *securities received by such trust (or a successor) in exchange for, or with respect to, securities described in clause (i) or (ii) in a transaction in which gain or loss is not recognized, and*

(iv) *securities acquired directly or indirectly by such trust as part of a reorganization (as defined in section 368(a)(1) of the Internal Revenue Code of 1986) with respect to such trust if such securities are described in clause (i), (ii), or (iii) with respect to any other real estate investment trust.*

(B) *NEW TRADE OR BUSINESS OR SUBSTANTIAL NEW ASSETS.*—*Subparagraph (A) shall cease to apply to securities of a corporation as of the first day after July 12, 1999, on which such corporation engages in a substantial new line of business, or acquires any substantial asset, other than—*

(i) *pursuant to a binding contract in effect on such date and at all times thereafter before the acquisition of such asset,*

(ii) *in a transaction in which gain or loss is not recognized by reason of section 1031 or 1033 of the Internal Revenue Code of 1986, or*

(iii) *in a reorganization (as so defined) with another corporation the securities of which are described in paragraph (1)(A) of this subsection.*

(C) *LIMITATION ON TRANSITION RULES.*—*Subparagraph (A) shall cease to apply to securities of a corporation held, acquired, or received, directly or indirectly, by a real estate investment trust as of the first day after July 12, 1999, on which such trust acquires any additional securities of such corporation other than—*

(i) *pursuant to a binding contract in effect on July 12, 1999, and at all times thereafter, or*

(ii) *in a reorganization (as so defined) with another corporation the securities of which are described in paragraph (1)(A) of this subsection.*

(2) *TAX-FREE CONVERSION.*—*If—*

(A) *at the time of an election for a corporation to become a taxable REIT subsidiary, the amendment made by section 541 does not apply to such corporation by reason of paragraph (1), and*

(B) *such election first takes effect before January 1, 2004,*
such election shall be treated as a reorganization qualifying under section 368(a)(1)(A) of such Code.

SEC. 547. STUDY RELATING TO TAXABLE REIT SUBSIDIARIES.

The Secretary of the Treasury shall conduct a study to determine how many taxable REIT subsidiaries are in existence and the aggregate amount of taxes paid by such subsidiaries. The Secretary shall submit a report to the Congress describing the results of such study.

Subpart B—Health Care REITs**SEC. 551. HEALTH CARE REITS.**

(a) **SPECIAL FORECLOSURE RULE FOR HEALTH CARE PROPERTIES.**—Subsection (e) of section 856 of the Internal Revenue Code of 1986 (relating to special rules for foreclosure property) is amended by adding at the end the following new paragraph:

“(6) **SPECIAL RULE FOR QUALIFIED HEALTH CARE PROPERTIES.**—For purposes of this subsection—

“(A) **ACQUISITION AT EXPIRATION OF LEASE.**—The term ‘foreclosure property’ shall include any qualified health care property acquired by a real estate investment trust as the result of the termination of a lease of such property (other than a termination by reason of a default, or the imminence of a default, on the lease).

“(B) **GRACE PERIOD.**—In the case of a qualified health care property which is foreclosure property solely by reason of subparagraph (A), in lieu of applying paragraphs (2) and (3)—

“(i) the qualified health care property shall cease to be foreclosure property as of the close of the second taxable year after the taxable year in which such trust acquired such property, and

“(ii) if the real estate investment trust establishes to the satisfaction of the Secretary that an extension of the grace period in clause (i) is necessary to the orderly leasing or liquidation of the trust’s interest in such qualified health care property, the Secretary may grant one or more extensions of the grace period for such qualified health care property.

Any such extension shall not extend the grace period beyond the close of the 6th year after the taxable year in which such trust acquired such qualified health care property.

“(C) **INCOME FROM INDEPENDENT CONTRACTORS.**—For purposes of applying paragraph (4)(C) with respect to qualified health care property which is foreclosure property by reason of subparagraph (A) or paragraph (1), income derived or received by the trust from an independent contractor shall be disregarded to the extent such income is attributable to—

“(i) any lease of property in effect on the date the real estate investment trust acquired the qualified health care property (without regard to its renewal after such date so long as such renewal is pursuant to the terms of such lease as in effect on such date), or

“(ii) any lease of property entered into after such date if—

“(I) on such date, a lease of such property from the trust was in effect, and

“(II) under the terms of the new lease, such trust receives a substantially similar or lesser benefit in comparison to the lease referred to in subclause (I).

“(D) QUALIFIED HEALTH CARE PROPERTY.—

“(i) IN GENERAL.—The term ‘qualified health care property’ means any real property (including interests therein), and any personal property incident to such real property, which—

“(I) is a health care facility, or

“(II) is necessary or incidental to the use of a health care facility.

“(ii) HEALTH CARE FACILITY.—For purposes of clause (i), the term ‘health care facility’ means a hospital, nursing facility, assisted living facility, congregate care facility, qualified continuing care facility (as defined in section 7872(g)(4)), or other licensed facility which extends medical or nursing or ancillary services to patients and which, immediately before the termination, expiration, default, or breach of the lease of or mortgage secured by such facility, was operated by a provider of such services which was eligible for participation in the medicare program under title XVIII of the Social Security Act with respect to such facility.”.

(b) EFFECTIVE DATE.—The amendment made by this section shall apply to taxable years beginning after December 31, 2000.

Subpart C—Conformity With Regulated Investment Company Rules

SEC. 556. CONFORMITY WITH REGULATED INVESTMENT COMPANY RULES.

(a) DISTRIBUTION REQUIREMENT.—Clauses (i) and (ii) of section 857(a)(1)(A) of the Internal Revenue Code of 1986 (relating to requirements applicable to real estate investment trusts) are each amended by striking “95 percent (90 percent for taxable years beginning before January 1, 1980)” and inserting “90 percent”.

(b) IMPOSITION OF TAX.—Clause (i) of section 857(b)(5)(A) of such Code (relating to imposition of tax in case of failure to meet certain requirements) is amended by striking “95 percent (90 percent in the case of taxable years beginning before January 1, 1980)” and inserting “90 percent”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2000.

**Subpart D—Clarification of Exception From
Impermissible Tenant Service Income**

SEC. 561. CLARIFICATION OF EXCEPTION FOR INDEPENDENT OPERATORS.

(a) *IN GENERAL.*—Paragraph (3) of section 856(d) of the Internal Revenue Code of 1986 (relating to independent contractor defined) is amended by adding at the end the following flush sentence: “In the event that any class of stock of either the real estate investment trust or such person is regularly traded on an established securities market, only persons who own, directly or indirectly, more than 5 percent of such class of stock shall be taken into account as owning any of the stock of such class for purposes of applying the 35 percent limitation set forth in subparagraph (B) (but all of the outstanding stock of such class shall be considered outstanding in order to compute the denominator for purpose of determining the applicable percentage of ownership).”.

(b) *EFFECTIVE DATE.*—The amendment made by this section shall apply to taxable years beginning after December 31, 2000.

**Subpart E—Modification of Earnings and Profits
Rules**

SEC. 566. MODIFICATION OF EARNINGS AND PROFITS RULES.

(a) *RULES FOR DETERMINING WHETHER REGULATED INVESTMENT COMPANY HAS EARNINGS AND PROFITS FROM NON-RIC YEAR.*—

(1) *IN GENERAL.*—Subsection (c) of section 852 of the Internal Revenue Code of 1986 is amended by adding at the end the following new paragraph:

“(3) *DISTRIBUTIONS TO MEET REQUIREMENTS OF SUBSECTION (a)(2)(B).*—Any distribution which is made in order to comply with the requirements of subsection (a)(2)(B)—

“(A) shall be treated for purposes of this subsection and subsection (a)(2)(B) as made from earnings and profits which, but for the distribution, would result in a failure to meet such requirements (and allocated to such earnings on a first-in, first-out basis), and

“(B) to the extent treated under subparagraph (A) as made from accumulated earnings and profits, shall not be treated as a distribution for purposes of subsection (b)(2)(D) and section 855.”.

(2) *CONFORMING AMENDMENT.*—Subparagraph (A) of section 857(d)(3) of such Code is amended to read as follows:

“(A) shall be treated for purposes of this subsection and subsection (a)(2)(B) as made from earnings and profits which, but for the distribution, would result in a failure to meet such requirements (and allocated to such earnings on a first-in, first-out basis), and”.

(b) *CLARIFICATION OF APPLICATION OF REIT SPILLOVER DIVIDEND RULES TO DISTRIBUTIONS TO MEET QUALIFICATION REQUIRE-*

MENT.—Subparagraph (B) of section 857(d)(3) of such Code is amended by inserting before the period “and section 858”.

(c) APPLICATION OF DEFICIENCY DIVIDEND PROCEDURES.—Paragraph (1) of section 852(e) of such Code is amended by adding at the end the following new sentence: “If the determination under subparagraph (A) is solely as a result of the failure to meet the requirements of subsection (a)(2), the preceding sentence shall also apply for purposes of applying subsection (a)(2) to the non-RIC year and the amount referred to in paragraph (2)(A)(i) shall be the portion of the accumulated earnings and profits which resulted in such failure.”

(d) EFFECTIVE DATE.—The amendments made by this section shall apply to distributions after December 31, 2000.

Subpart F—Modification of Estimated Tax Rules

SEC. 571. MODIFICATION OF ESTIMATED TAX RULES FOR CLOSELY HELD REAL ESTATE INVESTMENT TRUSTS.

(a) IN GENERAL.—Subsection (e) of section 6655 of the Internal Revenue Code of 1986 (relating to estimated tax by corporations) is amended by adding at the end the following new paragraph:

“(5) TREATMENT OF CERTAIN REIT DIVIDENDS.—

“(A) IN GENERAL.—Any dividend received from a closely held real estate investment trust by any person which owns (after application of subsections (d)(5) and (l)(3)(B) of section 856) 10 percent or more (by vote or value) of the stock or beneficial interests in the trust shall be taken into account in computing annualized income installments under paragraph (2) in a manner similar to the manner under which partnership income inclusions are taken into account.

“(B) CLOSELY HELD REIT.—For purposes of subparagraph (A), the term ‘closely held real estate investment trust’ means a real estate investment trust with respect to which 5 or fewer persons own (after application of subsections (d)(5) and (l)(3)(B) of section 856) 50 percent or more (by vote or value) of the stock or beneficial interests in the trust.”

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to estimated tax payments due on or after December 15, 1999.

And the Senate agree to the same.

BILL ARCHER,
TOM BLILEY,
DICK ARMEY,
Managers on the Part of the House.

W.V. ROTH, Jr.,
TRENT LOTT,
Managers on the Part of the Senate.

JOINT EXPLANATION STATEMENT OF THE COMMITTEE OF
CONFERENCE

The managers on the part of the House and the Senate at the conference on the disagreeing votes of the two Houses on the amendment of the Senate to the bill (H.R. 1180) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes, submit the following joint statement to the House and the Senate in explanation of the effect of the action agreed upon by the managers and recommended in the accompanying conference report:

The Senate amendment struck all of the House bill after the enacting clause and inserted a substitute text.

The House recedes from its disagreement to the amendment of the Senate with an amendment that is a substitute for the House bill and the Senate amendment. The differences between the House bill, the Senate amendment, and the substitute agreed to in conference are noted below, except for clerical corrections, conforming changes made necessary by agreements reached by the conferees, and minor drafting and clerical changes.

**THE TICKET TO WORK AND WORK INCENTIVES
IMPROVEMENT ACT OF 1999**

EXPLANATION OF THE CONFERENCE AGREEMENT

Short Title

Present law

No provision.

House bill

The "Ticket to Work and Work Incentives Improvement Act of 1999".

Senate amendment

The "Work Incentives Improvement Act of 1999".

Conference agreement

The Senate recedes to the House.

Long Title

Present law

No provision.

House bill

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Findings and Purposes

Present law

No provision.

House bill

No provision.

Senate amendment

Makes a number of findings related to the importance of health care especially for individuals with disabilities, the difficulties they often experience in obtaining proper health care coverage under current program rules, the resulting limited departures from benefit rolls due to recipients' fears of losing coverage, and the potential program savings from providing them better access to coverage if they return to work.

The Senate amendment describes as its purposes to provide individuals with disabilities: (1) health care and employment preparation and placement services to reduce their dependency on cash benefits; (2) Medicaid coverage (through incentives to States to allow them to purchase it) needed to maintain employment; (3) the option of maintaining Medicare coverage while working; and (4) return to work tickets allowing them access to services needed to obtain and retain employment and reduce dependence on cash benefits.

Conference agreement

The House recedes to the Senate with the modification that additional findings are added that address employment opportunities and financial disincentives.

Title I. Ticket to Work and Self-Sufficiency and Related Provisions

Establishment of the Ticket to Work and Self-Sufficiency Program

1. Ticket System

Present law

The Commissioner is required to promptly refer individuals applying for Social Security disability insurance (SSDI) or Supplemental Security Income (SSI) benefits for necessary vocational rehabilitation (VR) services to State vocational rehabilitation (VR) agencies. State VR agencies are established pursuant to Title I of the Rehabilitation Act of 1973, as amended. A State VR agency is reimbursed for the costs of VR services to SSDI and SSI beneficiaries with a single payment after the beneficiary performs “substantial gainful activity” (i.e., had earnings in excess of \$700 per month) for a continuous period of at least nine months. The Social Security Administration (SSA) has also established an “alternate participant program” in regulation where private or other public agencies are eligible to receive reimbursement from SSA for providing VR and related services to SSDI and SSI beneficiaries. To participate in the alternate participant program, a beneficiary must first be referred to, and declined by, a State VR agency. Such private and public agencies are reimbursed according to the same procedures as State VR agencies.

House bill

The House bill creates a Ticket to Work and Self-Sufficiency program. Under the program, the Commissioner of Social Security is authorized to provide SSDI and disabled SSI beneficiaries with a “ticket” which they may use to obtain employment services, VR services, and other support services (e.g., assistive technology) from an employment network (that is, provider of services) of their choice to enable them to enter the workforce.

Employment networks may include both State VR agencies and private and other public providers. Employment networks would be prohibited from seeking additional compensation from beneficiaries. The bill provides State VR agencies with the option of participating in the program as an employment network or remaining in the current law reimbursement system, including the option to elect either payment method on a case-by-case basis. Services provided by State VR agencies participating in the program would be governed by plans for VR services approved under Title I of the Rehabilitation Act. The Commissioner would issue regulations regarding the relationship between State VR agencies and other employment networks. It is intended that the agreements would be broad-based, rather than case-by-case agreements. The Commissioner is also required to issue regulations to address other implementation issues, including distribution of tickets to beneficiaries.

The bill requires the program to be phased in at sites selected by the Commissioner beginning no later than 1 year after enact-

ment. The program would be fully implemented as soon as practicable, but not later than 3 years after the program begins.

Senate amendment

Similar provision, except adds a section on special requirements applicable to cross-referral of ticket holders to certain State agencies.

Conference agreement

The Senate recesses to the House.

2. Program Managers

Present law

No provision. (See description of present law under "1. Ticket System" above.)

House bill

The Commissioner is required to contract with "program managers," i.e., one or more organizations in the private or public sector with expertise and experience in the field of vocational rehabilitation or employment services through a competitive bidding process, to assist the Social Security Administration to administer the program. Agreements between SSA and program managers shall include performance standards, including measures of access of beneficiaries to services. Program managers would be precluded from providing services in their own service area.

Program managers would recruit and recommend employment networks to the Commissioner, ensure adequate availability of services to beneficiaries and provide assurances to SSA that employment networks are complying with terms of their agreement. In addition, program managers would provide for changes in employment networks by beneficiaries.

Senate amendment

Similar provision, except the Senate amendment places an additional restriction on changes in employment networks by specifying that ticket holders may elect such changes only "for good cause, as determined by the Commissioner." In addition, the Senate amendment does not specify that when changes in employment networks occur the program manager is to (1) reassign the ticket based on the choice of the beneficiary and (2) make a determination regarding the allocation of payments to each employment network.

Conference agreement

The Senate recesses to the House.

3. Employment Networks

Present law

No provision. (See description of present law under "1. Ticket System" above.)

House bill

Employment networks consist of a single provider (public or private) or an association of providers which would assume responsibility for the coordination and delivery of services. Employment networks may include a one-stop delivery system established under Title I of the Workforce Investment Act of 1998. Employment networks are required to demonstrate specific expertise and experience and provide an array of services under the program. The Commissioner would select and enter into agreements with employment networks, provide periodic quality assurance reviews of employment networks, and establish a method for resolving disputes between beneficiaries and employment networks. Employment networks would meet financial reporting requirements as prescribed by the Commissioner, and prepare periodic performance reports which would be provided to beneficiaries holding a ticket and made available to the public.

Employment networks and beneficiaries would together develop an individual employment plan for each beneficiary that provides for informed choice in selecting an employment goal and specific services needed to achieve that goal. A beneficiary's written plan would take effect upon written approval by the beneficiary or beneficiary's representative.

Senate amendment

Identical provision regarding qualification, requirements, and reporting involving employment networks. Similar provision regarding individual employment plans, except that the Senate amendment does not require the statement of vocational goals to include "as appropriate, goals for earnings and job advancement."

Conference agreement

The Senate recedes to the House.

4. Payment to Employment Networks

Present law

No provision. (See description of present law under "1. Ticket System" above.)

House bill

The bill authorizes payment to employment networks for outcomes and long-term results through one of two payment systems, each designed to encourage maximum participation by providers to serve beneficiaries:

The outcome payment system would provide payment to employment networks up to 40 percent of the average monthly disability benefit for each month benefits are not be payable to the beneficiary due to work, not to exceed 60 months.

The outcome-milestone payment system is similar to the outcome payment system, except it would provide for early payment(s) based on the achievement of one or more milestones directed towards the goal of permanent employment. To ensure the cost-effectiveness of the program, the total amount payable to a service provider under the outcome-milestone payment system must be less

than the total amount that would have been payable under the outcome payment system.

The Commissioner is required to periodically review both payment systems and may alter the percentages, milestones, or payment periods to ensure that employment networks have adequate incentive to assist beneficiaries in entering the workforce. In addition, the Commissioner is required to submit a report to Congress with recommendations for methods to adjust payment rates to ensure adequate incentives for the provision of services to individuals with special needs.

The bill requires the Commissioner to report to Congress within 3 years on the adequacy of program incentives for employment networks to provide services to “high risk” beneficiaries.

The bill authorizes transfers from the Social Security Trust Funds to carry out these provisions for Social Security beneficiaries, and authorizes appropriations to the Social Security Administration to carry out these provisions for SSI recipients.

Senate amendment

Similar provision, except that the Senate amendment:

Does not require the Commissioner to report to Congress within 3 years on the adequacy of program incentives for employment networks to provide services to “high risk” beneficiaries;

Provides for “Allocation of Costs” to employment networks from the Trust Funds for services rendered (rather than authorizing such amounts be transferred as in the House bill); and

Provides for specific treatment of the costs associated with dually-entitled individuals (that is, individuals receiving both SSI and SSDI benefits).

Conference agreement

The Senate recesses to the House.

5. Evaluation

Present law

No provision. (See description of present law under “1. Ticket System” above.)

House bill

The Commissioner is required to design and conduct a series of evaluations to assess the cost-effectiveness and outcomes of the program. The Commissioner is required to periodically provide to the Congress a detailed report of the program’s progress, success, and any modifications needed.

Senate amendment

Similar provision, except the Senate amendment does not require evaluations to address the characteristics of ticket holders who are not accepted for services and reasons they were not accepted.

Conference agreement

The conference agreement follows the House bill and the Senate amendment with the modification that the Commissioner is required to provide for independent evaluations of program effectiveness.

6. Advisory Panel

Present law

No provision. (See description of present law under “1. Ticket System” above.)

House bill

The bill establishes a Ticket to Work and Work Incentives Advisory Panel consisting of experts representing consumers, providers of services, employers, and employees, at least one-half of whom are individuals with disabilities or representatives of individuals with disabilities. The Advisory Panel is to be composed of twelve members appointed as follows:

Four by the President, not more than two of whom may be of the same political party;

Two by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means;

Two by the Minority Leader of the House of Representatives, in consultation with ranking minority member of the Committee on Ways and Means;

Two by the Majority Leader of the Senate, in consultation with the Chairman of the Committee on Finance; and

Two members would be appointed by the Minority Leader of the Senate, in consultation with the ranking minority member of the Committee on Finance.

The Panel is to advise the Commissioner and report to the Congress on program implementation including such issues as the establishment of pilot sites, refinements to the program, and the design of program evaluations.

Senate amendment

Similar provision, except the Senate amendment:

Names the panel the Work Incentives Advisory Panel;

Does not specify that, of the 4 members of the panel appointed by the President, “not more than 2 . . . may be of the same political party”;

Provides that the Commissioner, as opposed to the President under the House bill, is to designate whether panel members’ initial terms will be 2 or 4 years;

Specifies that “all members appointed to the panel shall have experience or expert knowledge of” several work and disability-related fields, whereas the House bill requires that “at least 8” shall have such experience or knowledge, with at least 2 “representing the interests of” each of the following groups: service recipients, service providers, employers, and employees;

Provides that the Director of the Advisory Panel is to be appointed by the Commissioner in the Senate amendment (compared with by the Advisory Panel in the House bill); and

Provides that the costs of the Panel “shall be paid from amounts made available” for administration of the Title II and Title XVI programs under the Senate amendment (compared with the House bill, which authorizes such amounts from the OASI and DI trust funds and from the general fund of the Treasury for this purpose.

Conference agreement

The conference agreement follows the House bill, except that all 12 Panel members would be required to have experience or expert knowledge as a recipient, provider, employer, or employee. The agreement is based on the expectation that individuals with disabilities, as opposed to representatives of individuals with disabilities, would be appointed as Panel members whenever possible. In addition, the terms of initial appointment would be set by the individual making the appointment, with each individual making appointments designating one-half of appointees for a term of 4 years and the other half for a term of 2 years. The conference agreement also provides that the Director of the Panel would be appointed by the Chairperson of the Advisory Panel.

Work Activity Standard as a Basis for Review of an Individual’s Disabled Status

Present law

Eligibility for Social Security disability insurance (SSDI) cash benefits requires an applicant to meet certain criteria, including the presence of a disability that renders the individual unable to engage in substantial gainful activity. Substantial gainful activity is defined as work that results in earnings exceeding an amount set in regulations (\$700 per month, as of July 1, 1999). Continuing disability reviews (CDRs) are conducted by the Social Security Administration (SSA) to determine whether an individual remains disabled and thus eligible for continued benefits. CDRs may be triggered by evidence of recovery from disability, including return to work. SSA is also required to conduct periodic CDRs every 3 years for beneficiaries with a nonpermanent disability, and at times determined by the Commissioner for beneficiaries with a permanent disability.

House bill

The bill establishes the standard that CDRs for long-term SSDI beneficiaries (i.e., those receiving disability benefits for at least 24 months) be limited to periodic CDRs. SSA would continue to evaluate work activity to determine whether eligibility for cash benefits continued, but a return to work would not trigger a review of the beneficiary’s impairment to determine whether it continued to be disabling. This provision is effective January 1, 2003.

Senate amendment

Similar provision, except Senate amendment is effective upon enactment.

Conference agreement

The conference agreement follows the House bill and the Senate amendment, except that the provision would be effective January 1, 2002.

Expedited Reinstatement of Disability Benefits*Present law*

Individuals entitled to Social Security disability insurance (SSDI) benefits may receive expedited reinstatement of benefits following termination of benefits because of work activity any time during a 36-month extended period of eligibility. That is, benefits may be reinstated without the need for a new application and disability determination. Otherwise, the Commissioner of Social Security must make a new determination of disability before a claimant can reestablish entitlement to disability benefits.

House bill

The bill establishes that an individual: (1) whose entitlement to SSDI benefits had been terminated on the basis of work activity following completion of an extended period of eligibility; or (2) whose eligibility for SSI benefits (including special SSI eligibility status under section 1619(b) of the Social Security Act) had been terminated following suspension of those benefits for 12 consecutive months on account of excess income resulting from work activity, may request reinstatement of those benefits without filing a new application. The individual must have become unable to continue working due to his or her medical condition and must file a reinstatement request within the 60-month period following the month of such termination.

While the Commissioner is making a determination pertaining to a reinstatement request, the individual would be eligible for provisional benefits (cash benefits and Medicare or Medicaid, as appropriate) for a period of not more than 6 months. If the Commissioner makes a favorable determination, such individual's prior entitlement to benefits would be reinstated, as would be the prior benefits of his or her dependents who continue to meet the entitlement criteria. If the Commissioner makes an unfavorable determination, provisional benefits would end, but the provisional benefits already paid would not be considered an overpayment. This provision is effective one year after enactment.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Work Incentives Outreach Program

Present law

The Social Security Administration prepares and distributes educational materials on work incentives for individuals receiving Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) benefits, including on the Internet. Social Security personnel in its 1,300 field offices are available to answer questions about work incentives. Work incentives currently include: exclusions for impairment-related work expenses; trial work periods during which an individual may continue to receive cash benefits; a 36-month extended period of eligibility during which cash benefits can be reinstated at any time; continued eligibility for Medicaid and/or Medicare; continued payment of benefits while a beneficiary is enrolled in a vocational rehabilitation program; and plans for achieving self-support (PASS).

House bill

The Commissioner of Social Security is required to establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to individuals on work incentives. Under this program, the Commissioner is required to:

Establish a program of grants, cooperative agreements, or contracts to provide benefits planning and assistance (including protection and advocacy services) to individuals with disabilities and outreach to individuals with disabilities who are potentially eligible for work incentive programs; and

Establish a corps of work incentive specialists located within the Social Security Administration.

The Commissioner is required to determine the qualifications of agencies eligible for grants, cooperative agreements, or contracts. Social Security Administration field offices and State Medicaid agencies are deemed ineligible. Eligible organizations may include Centers for Independent Living, protection and advocacy organizations, and client assistance programs (established in accordance with the Rehabilitation Act of 1973, as amended); State Developmental Disabilities Councils (established in accordance with the Developmental Disabilities Assistance and Bill of Rights Act); and State welfare agencies (funded under Title IV–A of the Social Security Act).

Annual appropriations would not exceed \$23 million for fiscal years 2000–2004. The provision would be effective on enactment. The grant amount in each State would be based on the number of beneficiaries in the State, subject to certain limits.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

State Grants for Work Incentives Assistance to Disabled Beneficiaries

Present law

Grants to States to provide assistance to individuals with disabilities are authorized under the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.). Such assistance includes information on and referral to programs and services and legal, administrative, and other appropriate remedies to ensure access to services.

House bill

The Commissioner of Social Security is authorized to make grants to existing protection and advocacy programs authorized by the States under the Developmental Disabilities Assistance and Bill of Rights Act. Services would include information and advice about obtaining vocational rehabilitation, employment services, advocacy, and other services a Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) beneficiary may need to secure or regain gainful employment, including applying for and receiving work incentives.

Appropriation would not exceed \$7 million for each of the fiscal years 2000–2004. The provision would be effective upon enactment.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Title II. Expanded Availability of Health Care Services

Expanding State Options Under the Medicaid Program for Workers with Disabilities

Present law

Most States are required to provide Medicaid coverage for disabled individuals who are eligible for Supplemental Security Income (SSI). Individuals are considered disabled if they are unable to engage in substantial gainful activity (defined in Federal regulations as earnings of \$700 per month) due to a medically determinable physical or mental impairment which is expected to result in death, or which has lasted or can be expected to last for at least 12 months. Eleven States link Medicaid eligibility to disability definitions which may be more restrictive than SSI criteria.

Eligibility for SSI is determined by certain federally-established income and resource standards. Individuals are eligible for SSI if their “countable” income falls below the Federal maximum monthly SSI benefit (\$500 for an individual, and \$751 for couples in 1999). Not all income is counted for SSI purposes. Excluded from income are the first \$20 of any monthly income (i.e., either unearned, such as social security and other pension benefits, or earned) and the first \$65 of monthly earned income plus one-half of the remaining earnings. The Federal limit on resources is \$2,000

for an individual, and \$3,000 for couples. Certain resources are not counted, including an individual's home, and the first \$4,500 of the current market value of an automobile.

In addition, States must provide Medicaid coverage for certain individuals under 65 who are working. These persons are referred to as "qualified severely impaired individuals" under age 65. These are disabled and blind individuals whose earnings reach or exceed the basic SSI benefit standard, with disregards as determined by the States. (The current threshold for earnings is \$1,085 per month.) This special eligibility status applies as long as the individual:

- Continues to be blind or have a disabling impairment;
- Except for earnings, continues to meet all the other requirements for SSI eligibility;
- Would be seriously inhibited from continuing or obtaining employment if Medicaid eligibility were to end; and
- Has earnings that are not sufficient to provide a reasonable equivalent of benefits from SSI, State supplemental payments (if provided by the State), Medicaid, and publicly funded attendant care that would have been available in the absence of those earnings.

A recent change in law allowed States to increase the income limit for Medicaid coverage of disabled individuals. The Balanced Budget Act of 1997 (P.L.105-33) allowed States to elect to provide Medicaid coverage to disabled persons who otherwise meet SSI eligibility criteria but have income up to 250 percent of the Federal poverty guidelines. Beneficiaries under the more liberal income limit may "buy into" Medicaid by paying premium costs. Premiums are set on a sliding scale based on an individual's income, as established by the State.

House bill

The bill allows States to establish one new optional Medicaid eligibility category: they may provide coverage to individuals with disabilities, aged 16 through 64, who are employed, and who cease to be eligible for Medicaid because their medical condition has improved, and are therefore determined to no longer be eligible for SSI and/or SSDI, but who continue to have a severe medically determinable impairment as defined by regulations of the Secretary of HHS. In addition, States could establish limits on assets, resources, and earned or unearned income for this group that differ from the federal requirements. In order to opt to cover this group, states must provide Medicaid coverage to individuals with disabilities whose income is no more than 250 percent of the federal poverty level, and who would be eligible for SSI, except for earnings.

Individuals would be considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, or are engaged in work that meets criteria for work hours, wages, or other measures established by the State and approved by the Secretary of Health and Human Services (HHS).

Individuals covered under this new option could "buy into" Medicaid coverage by paying premiums or other cost-sharing charges on a sliding fee scale based on their income, as established by the State.

The bill requires that in order to receive federal funds, States must maintain the level of expenditures they expended in the most recent fiscal year prior to enactment of this provision to enable working individuals with disabilities to work.

Senate amendment

Allows States to establish one or two new optional Medicaid eligibility categories:

States would have the option to cover individuals with disabilities (aged 16–64) who, except for earnings, would be eligible for SSI. In addition, States could establish limits on assets, resources and earned or unearned income that differ from the federal requirements.

If States provide Medicaid coverage to individuals described in (1) above, they may also provide coverage to the following: Employed persons with disabilities whose medical condition has improved, as described above in the House bill.

Individuals covered under these options could “buy in” to Medicaid coverage by paying premiums or other cost-sharing charges on a sliding-fee scale based on income. The State would be required to make premium or other cost-sharing charges the same for both these two new eligibility groups. States may require individuals with incomes above 250 percent of the federal poverty level to pay the full premium cost. In the case of individuals with incomes between 250 percent and 450 percent of the poverty level, premiums may not exceed 7.5 percent of income. States must require individuals with incomes above \$75,000 per year to pay all of the premium costs. States may choose to subsidize premium costs for such individuals, but they may not use federal matching funds to do so.

Conference agreement

House recedes to Senate to include the Senate-passed Medicaid buy-in option, allowing States to permit working individuals with incomes above 250 percent of the Federal poverty level to buy-in to the Medicaid program. The conference agreement provides for an effective date of October 1, 2000.

Extending Medicare Coverage for OASDI Disability Benefit Recipients

Present law

Social Security Disability Insurance (SSDI) beneficiaries are allowed to test their ability to work for at least nine months without affecting their disability or Medicare benefits. Disability payments stop when a beneficiary has monthly earnings at or above the substantial gainful activity level (\$700) after the 9-month period. If the beneficiary remains disabled but continues working, Medicare can continue for an additional 39 months, for a total of 48 months of coverage.

House bill

Effective October 1, 2000, the bill provides for continued Medicare Part A coverage for 6 years beyond the current limit.

The bill requires the General Accounting Office (GAO) to submit a report to Congress (no later than 5 years after enactment) that examines the effectiveness and cost of extending Medicare Part A coverage to working disabled persons without charging them a premium; the necessity and effectiveness of providing the continuation of Medicare coverage to disabled individuals with incomes above the Social Security taxable wage base (\$72,600); the use of a sliding-scale premium for high-income disabled individuals; the viability of an employer buy-in to Medicare; the interrelation between the use of continuation of Medicare coverage and private health insurance coverage; and that recommends whether the Medicare coverage extension should continue beyond the extended period provided under the bill.

Senate amendment

The amendment provides that during the 6-year period following enactment of the bill, disabled Social Security beneficiaries who engage in substantial gainful activity would be eligible for Medicare Part A coverage. Medicare Part A coverage could continue indefinitely after the termination of the 6-year period following enactment of the bill for any individual who is enrolled in the Medicare Part A program for the month that ends the 6-year period, without requiring the beneficiaries to pay premiums. It also provides for conforming amendments to facilitate this change.

The Senate amendment does not require GAO to examine the viability of an employer buy-in to Medicare.

Conference agreement

The Senate recedes to the House, but instead of the 6-year extension beyond current law in the House bill, the agreement includes a 4½ year extension.

Grants to Develop and Establish State Infrastructures to Support Working Individuals with Disabilities

Present law

No provision.

House bill

The bill requires the Secretary of HHS to award grants to States to design, establish and operate infrastructures that provide items and services to support working individuals with disabilities, and to conduct outreach campaigns to inform them about the infrastructures. States would be eligible for these grants under the following conditions:

They must provide Medicaid coverage to employed individuals with disabilities whose income does not exceed 250 percent of the Federal poverty level and who would be eligible for Supplemental Security Income (SSI), except for earnings; and

They must provide personal assistance services to assist individuals eligible under the bill to remain employed (that is, earn at least the Federal minimum wage and work at least 40 hours per month, or engage in work that meets criteria for

work hours, wages, or other measures established by the State and approved by the Secretary of HHS).

Personal assistance services refers to a range of services provided by one or more persons to assist individuals with disabilities to perform daily activities on and off the job. These services would be designed to increase individuals' control in life.

The Secretary of HHS is required to develop a formula for the award of infrastructure grants. The formula must provide special consideration to States that extend Medicaid coverage to persons who cease to be eligible for SSDI and SSI because of an improvement in their medical condition, but who still have a severe medically determinable impairment and are employed.

Grant amounts to States must be a minimum of \$500,000 per year, and may be up to a maximum of 15 percent of Federal and State Medicaid expenditures for individuals with disabilities whose income does not exceed 250 percent of the Federal poverty level and who would be eligible for SSI, except for earnings; and for individuals who cease to be eligible for Medicaid because of medical improvement.

States would be required to submit an annual report to the Secretary on the use of grant funds. In addition, the report must indicate the percent increase in the number of SSDI and SSI beneficiaries who return to work.

For developing State infrastructure grants, the bill authorizes the following amount for: FY2000, \$20 million; FY2001, \$25 million; FY2002, \$30 million; FY2003, \$35 million; FY2004, \$40 million; and FY2005–10, the amount of appropriations for the preceding fiscal year plus the percent increase in the CPI for All Urban Consumers for the preceding fiscal year. The bill stipulates budget authority in advance of appropriations.

The Secretary of HHS, in consultation with the Ticket to Work and Work Incentives Advisory Panel established by the bill, is required to make a recommendation by October 1, 2009, to the Committee on Commerce in the House and the Committee on Finance in the Senate regarding whether the grant program should be continued after FY 2010.

Senate amendment

Similar provision, except for the following:

States would be eligible for infrastructure grants if they provide Medicaid coverage to individuals with disabilities whose income except for earnings, would make them eligible for SSI, and who meet State-established limits on assets, resources and earned or unearned income;

Special consideration for developing the formula for distribution of infrastructure grants is to be given to States that provide Medicaid benefits to individuals who cease to be eligible for SSDI and SSI because of an improvement in their medical condition, but who have a severe medically determinable impairment and are employed; and The name of the advisory panel is the Work Incentives Advisory Panel.

Conference agreement

State participation in the grant programs would be de-linked from adoption of Medicaid optional eligibility categories. Furthermore, the maximum award section would be amended to reflect that delinking. States that do not choose to take up the optional Medicaid eligibility category permitting expansion to individuals with disabilities with incomes up to 250 percent of poverty would be subject to a maximum grant award established by a methodology developed by the Secretary consistent with the limit applied to states that do take up the option. For those states who do take up the option, the maximum will be 10 percent, rather than the 15 percent included in the House and Senate passed bills. These provisions would be effective October 1, 2000, with funding of: FY2001, \$20 million; FY2002, \$25 million; FY2003, \$30 million; FY2004, \$35 million; FY2005, \$40 million; and FY2006–11, the amount of appropriations for the preceding fiscal year plus the percent increase in the CPI for All Urban Consumers for the preceding fiscal year.

The conferees encourage states to exercise the option to permit disabled workers to buy into Medicaid. Providing a Medicaid buy-in option will encourage disabled individuals to return to work without fear of losing their existing health coverage. While election of the Medicaid buy-in option is not a condition of eligibility for infrastructure grants under this section, the conferees urge the Secretary to award such grants with preference for states exercising the buy-in option. Such grants may be used to help finance other State programs facilitating a return to work by disabled individuals, thereby supplementing the Medicaid buy-in benefit as well as other work incentives provided by this Act.

Demonstration of Coverage under the Medicaid Program of Workers with Potentially Severe Disabilities

Present law

No provision.

House bill

The Secretary of HHS is required to approve applications from States to establish demonstration programs that would provide medical assistance equal to that provided under Medicaid for disabled persons age 16–64 who are “workers with a potentially severe disability.” These are individuals who meet a State’s definition of physical or mental impairment, who are employed, and who are reasonably expected to meet SSI’s definition of blindness or disability if they did not receive Medicaid services.

The Secretary is required to approve demonstration programs if the State meets the following requirements:

The State has elected to provide Medicaid coverage to individuals with disabilities whose income does not exceed 250 percent of the Federal poverty level and who would be eligible for SSI, except for their earnings;

Federal funds are used to supplement State funds used for workers with potentially severe disabilities at the time the demonstration is approved; and

The State conducts an independent evaluation of the demonstration program.

The bill allows the Secretary to approve demonstration programs that operate on a sub-State basis.

For purposes of the demonstration, individuals would be considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, or are engaged in work that meets threshold criteria for work hours, wages, or other measures as defined by the demonstration project and approved by the Secretary.

The bill authorizes \$56 million for the 5-year period beginning FY2000. The bill prohibits any further payments to States beginning in FY2006.

Unexpended funds from previous years may be spent in subsequent years, but only through FY2005. The Secretary is required to allocate funds to States based on their applications and the availability of funds. Funds awarded to States would equal their Federal medical assistance percentage (FMAP) of expenditures for medical assistance to workers with a potentially severe disability.

The Secretary of HHS is required to make a recommendation by October 1, 2002, to the Committee on Commerce in the House and the Committee on Finance in the Senate regarding whether the grant program should be continued after FY2003.

Senate amendment

Similar provision, except for the following:

requires States to provide Medicaid coverage to individuals with disabilities whose income except for earnings, would make them eligible for SSI, and who meet State-established limits on assets, resources and earned or unearned income;

authorizes \$72 million for FY 2000, \$74 million for FY 2001, \$78 million for FY2002, and \$81 million for FY 2003;

limits payments to States to no more than \$300 million and prohibits payments beginning in FY2006;

requires States with an approved demonstration to submit an annual report to the Secretary, including data on the total number of persons served by the project, and the number who are "workers with a potentially severe disability." The aggregate amount of payments to States for administrative expenses related to annual reports may not exceed \$5 million.

Conference agreement

The conference agreement would authorize the demonstration at \$250 million over 6 years, and eligibility for demonstration funds would be delinked from adoption of Medicaid optional eligibility categories. These provisions would be effective October 1, 2000. In addition, the House recedes to the Senate on the inclusion on the annual report. The limitation on administrative expenses is reduced to \$2 million. States' definitions of workers with potentially severe disabilities can include individuals with a potentially severe disability that can be traced to congenital birth defects as well as diseases or injuries developed or incurred through illness or accident in childhood or adulthood.

Election by Disabled Beneficiaries to Suspend Medigap Insurance when Covered under a Group Health Plan

Present law

No provision.

House bill

The bill requires Medigap supplemental insurance plans to provide that benefits and premiums of such plans be suspended at the policyholder's request if the policyholder is entitled to Medicare Part A benefits as a disabled individual and is covered under a group health plan (offered by an employer with 20 or more employees). If suspension occurs and the policyholder loses coverage under the group health plan, the Medigap policy is required to be automatically reinstated (as of the date of loss of group coverage) if the policyholder provides notice of the loss of such coverage within 90 days of the date of losing group coverage.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Title III. Demonstration Projects and Studies

Extension of Disability Insurance Program Demonstration Project Authority

Present law

Section 505 of the Social Security Disability Amendments of 1980, as amended, (42 U.S.C. 1310) provides the Commissioner of Social Security authority to conduct certain demonstration projects. The Commissioner may initiate experiments and demonstration projects to test ways to encourage Social Security Disability Insurance (SSDI) beneficiaries to return to work, and may waive compliance with certain benefit requirements in connection with these projects. This demonstration authority expired on June 9, 1996.

House bill

Effective as of the date of enactment, the bill extends the demonstration authority for 5 years, and includes authority for demonstration projects involving applicants as well as beneficiaries.

Senate amendment

The Senate amendment provides for permanent demonstration authority.

Conference agreement

The Senate recedes to the House.

Demonstration Projects Providing for Reductions in Disability Insurance Benefits Based on Earnings*Present law*

No provision.

House bill

The bill would require the Commissioner of Social Security to conduct a demonstration project under which payments to Social Security disability insurance (SSDI) beneficiaries would be reduced \$1 for every \$2 of beneficiary earnings. The Commissioner would be required to annually report to the Congress on the progress of this demonstration project.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Studies and Reports*Present law*

No provision.

House bill

1. GAO Report of Existing Disability-Related Employment Incentives

The bill would direct the General Accounting Office (GAO) to assess the value of existing tax credits and disability-related employment initiatives under the Americans with Disabilities Act and other Federal laws. The report is to be submitted within 3 years to the Senate Committee on Finance and the House Committee on Ways & Means.

2. GAO Report of Existing Coordination of the DI and SSI Programs as They Relate to Individuals Entering or Leaving Concurrent Entitlement

The bill would direct the General Accounting Office (GAO) to evaluate the coordination under current law of work incentives for individuals eligible for both Social Security disability insurance (SSDI) and Supplemental Security Income (SSI). The report is to be submitted within 3 years to the Senate Committee on Finance and the House Committee on Ways & Means.

3. GAO Report on the Impact of the Substantial Gainful Activity Limit on Return to Work

The bill would direct the General Accounting Office (GAO) to examine substantial gainful activity limit as a disincentive for return to work. The report is to be submitted within 2 years to the Senate Committee on Finance and the House Committee on Ways & Means.

4. Report on Disregards Under the DI and SSI Programs

The bill would direct the Commissioner of Social Security to identify all income disregards under the Social Security disability insurance (SSDI) and Supplemental Security Income (SSI) programs; to specify the most recent statutory or regulatory change in each disregard; the current value of any disregard if the disregard had been indexed for inflation; recommend any further changes; and to report certain additional information and recommendations on disregards related to grants, scholarships, or fellowships used in attending any educational institution. The report is to be submitted within 90 days to the Senate Committee on Finance and the House Committee on Ways & Means.

5. GAO Report on SSA's Demonstration Authority

The bill would direct GAO to assess the Social Security Administration's (SSA) efforts to conduct disability demonstrations and to make a recommendation as to whether SSA's disability demonstration authority should be made permanent. The report is to be submitted within 5 years to the Senate Committee on Finance and the House Committee on Ways and Means.

Senate amendment

Similar provision, but does not include the GAO report on SSA's demonstration authority.

Conference agreement

The Senate recesses to the House.

Title IV. Miscellaneous and Technical Amendments

Technical Amendments Relating to Drug Addicts and Alcoholics

Present law

Public Law 104–121 included amendments to the SSDI and SSI disability programs providing that no individual could be considered to be disabled if alcoholism or drug addiction would otherwise be a contributing factor material to the determination of disability. The effective date for all new and pending applications was the date of enactment (March 29, 1996). For those whose claim had been finally adjudicated before the date of enactment, the amendments would apply commencing with benefits for months beginning on or after January 1, 1997. Individuals receiving benefits due to drug addiction or alcoholism can reapply for benefits based on another impairment. If the individual applied within 120 days after the date of enactment, the Commissioner is required to complete the entitlement redetermination by January 1, 1997.

Public Law 104–121 provided for the appointment of representative payees for recipients allowed benefits due to another impairment who also have drug addiction or alcoholism conditions, and the referral of those individuals for treatment.

House bill

The bill clarifies that the meaning of the term “final adjudication” includes a pending request for administrative or judicial review or a pending readjudication pursuant to class action or court remand. The bill also clarifies that if the Commissioner does not perform the entitlement redetermination before January 1, 1997, that entitlement redetermination must be performed in lieu of a continuing disability review.

The provision also corrects an anomaly that currently excludes all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, from the requirement that a representative payee be appointed and that the beneficiary be referred for treatment.

The amendments are effective as though they had been included in the enactment of Section 105 of Public Law 104–121 on March 29, 1996.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Treatment of Prisoners**1. Implementation of Prohibition Against Payment of Title II Benefits to Prisoners***Present law*

Current law prohibits prisoners from receiving Old Age, Survivors and Disability (OASDI) benefits while incarcerated if they are convicted of any crime punishable by imprisonment of more than 1 year. Federal, State, county or local prisons are required to make available, upon written request, the name and Social Security account number of any individual so convicted who is confined in a penal institution or correctional facility.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, commonly referred to as the welfare reform law, requires the Commissioner to make agreements with any interested State or local institution to provide monthly the names, Social Security account numbers, confinement dates, dates of birth, and other identifying information of residents who are SSI recipients. The Commissioner is required to pay the institution \$400 for each SSI recipient who becomes ineligible as a result if the information is provided within 30 days of incarceration, and \$200 if the information is furnished after 30 days but within 90 days. P.L. 104–193 requires the Commissioner to study the desirability, feasibility, and cost of establishing a system for courts to directly furnish SSA with information regarding court orders affecting SSI recipients, and requiring that State and local jails, prisons, and other institutions that enter into contracts with the Commissioner to furnish the information by means of an electronic or similar data exchange system.

The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to these agreements to any Federal or federally-assisted cash, food, or medical assistance program for the purpose of determining program eligibility.

House bill

The House bill amends prisoner provisions in the welfare reform law to include recipients of OASDI benefits in the prisoner reporting system.

The bill requires the Commissioner to enter into an agreement with any interested State or local correctional institution to provide monthly the names, Social Security account numbers, confinement dates, dates of birth, and other identifying information regarding prisoners who receive OASDI benefits. Certain requirements for computer matching agreements would not apply. For each eligible individual who becomes ineligible as a result, the Commissioner would pay the institution an amount up to \$400 if the information is provided within 30 days of incarceration, and up to \$200 if provided after 30 days but within 90 days.

Payments to correctional institutions would be reduced by 50 percent for multiple reports on the same individual who receives both SSI and OASDI benefits. Payments made to the correctional institution would be made from OASI or DI Trust Funds, as appropriate.

The Commissioner is required to provide on a reimbursable basis information obtained pursuant to these agreements to any Federal or federally-assisted cash, food, or medical assistance program for the purpose of determining program eligibility.

These amendments are effective for prisoners whose confinement begins on or after the first day of the fourth month after the month of enactment.

Senate amendment

Similar provision, except the Senate amendment:

Authorizes, rather than requires, the Commissioner to provide information obtained under this provision to be shared with other Federal and federally-assisted agencies;

Limits the uses of this information to "eligibility purposes" not including "other administrative purposes" as provided in the House bill; and

Does not include conforming amendments.

Conference agreement

The Senate recedes to the House.

2. Elimination of Title II Requirement That Confinement Stem From Crime Punishable by Imprisonment For More Than 1 Year

Present law

The Social Security Act bars payment of OASDI benefits to prisoners convicted of any crime punishable by imprisonment of more than one year and to those who are institutionalized because they are found guilty but insane. In addition, the law stipulates

that no monthly benefits shall be paid to any person for any month during which the person is an inmate.

House bill

This House bill broadens the prohibition of OASDI benefits to prisoners to be identical to those that apply to SSI benefits. In addition, it replaces “an offense punishable by imprisonment for more than 1 year” with “a criminal offense,” and includes benefits payable to persons confined to: (1) a penal institution; or (2) other institution if found guilty but insane, regardless of the total duration of the confinement. An exception would be made for prisoners incarcerated for less than 30 days. The provision is effective for prisoners whose confinement begins on or after the first day of the fourth month after the month of enactment.

Senate amendment

Similar provision, except restrictions would apply during months throughout which the criminal was incarcerated, rather than in any month during which the criminal was incarcerated as in the House bill. In addition, does not exempt prisoners convicted of crimes punishable by imprisonment of less 30 days.

Conference agreement

The Senate recedes to the House.

3. Conforming Title XVI Amendments

Present law

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 required the Commissioner of Social Security to enter into an agreement with any interested State or local institution (defined as a jail, prison, other correctional facility, or institution where the individual is confined due to a court order) under which the institution shall provide monthly the names, Social Security numbers, dates of birth, confinement dates, and other identifying information of prisoners. The Commissioner must pay to the institution for each eligible individual who becomes ineligible for SSI \$400 if the information is provided within 30 days of the individual’s becoming an inmate. The payment is \$200 if the information is furnished after 30 days but within 90 days.

House bill

The amendment is designed to clarify the provision in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 that, in cases in which an inmate receives benefits under both the SSI and Social Security programs, payments to correctional facilities would be restricted to \$400 or \$200, depending on when the report is furnished. The amendment also expands the categories of institutions eligible to report incarceration of prisoners. This provision is effective as of the enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 on August 22, 1996.

Senate amendment

Similar provision, but limits the uses of this information to “eligibility purposes” not including “other administrative purposes” as provided in the House bill.

Conference agreement

The Senate recedes to the House.

4. Continued Denial of Benefits to Sex Offenders Remaining Confined to Public Institutions Upon Completion of Prison Terms

Present Law

No provision.

House bill

The bill prohibits OASDI payments to sex offenders who, on completion of a prison term, remain confined in a public institution pursuant to a court finding that they continue to be sexually dangerous to others. The provision applies to benefits for months ending after the date of enactment.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Revocation by Members of the Clergy of Exemption From Social Security Coverage

Present law

Practicing members of the clergy are automatically covered by Social Security as self-employed workers unless they file for an exemption from Social Security coverage within a period ending with the due date of the tax return for the second taxable year (not necessarily consecutive) in which they begin performing their ministerial services. Members of the clergy seeking the exemption must file statements with their church, order, or licensing or ordaining body stating their opposition to the acceptance of Social Security benefits on religious principles. If elected, this exemption is irrevocable.

House bill

The House bill provides a 2-year “open season,” beginning January 1, 2000, for members of the clergy who want to revoke their exemption from Social Security. This decision to join Social Security would be irrevocable. A member of the clergy choosing such coverage would become subject to self-employment taxes and his or her subsequent earnings would be credited for Social Security (and Medicare) benefit purposes. The provision is effective January 1, 2000, for a period of 2 years.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Additional Technical Amendment Relating to Cooperative Research or Demonstration Projects Under Titles II and XVI

Present law

Current law authorizes Title XVI funding for making grants to States and public and other organizations for paying part of the cost of cooperative research or demonstration projects.

House bill

The provision clarifies current law to include agreements or grants concerning Title II of the Social Security Act and is effective as of August 15, 1994.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Authorization for States to Permit Annual Wage Reports

Present law

The Social Security Domestic Employment Reform Act of 1994 (P.L. 103–387) changed certain Social Security and Medicare tax rules. Specifically, the Act provided that domestic service employers (that is, individuals employing maids, gardeners, babysitters, and the like) would no longer owe taxes for any domestic employee who earned less than \$1,000 per year from the employer. In addition, the Act simplified certain reporting requirements. Domestic employers were no longer required to file quarterly returns regarding Social Security and Medicare taxes, nor the annual Federal Unemployment Tax Act (FUTA) return. Instead, all Federal reporting was consolidated on an annual Schedule H filed at the same time as the employer’s personal income tax return.

House bill

The provision allows States the option of permitting domestic service employers to file annual rather than quarterly wage reports pursuant to section 1137 of the Social Security Act, which provides for an income and eligibility verification system (IEVS) for certain public benefits. This provision is effective as of the date of enactment.

Senate amendment

Identical provision.

Conference agreement

The conference agreement follows the House bill and the Senate amendment.

Assessment on Attorneys Who Receive Fees Via the Social Security Administration*Present law*

The Commissioner of Social Security, using one of two processes, authorizes the fee that may be charged by an attorney or non-attorney to represent a claimant in administrative proceedings for Social Security, SSI, or Part B Black Lung benefits.

Under the fee agreement process, the representative and claimant submit a signed agreement reflecting the amount of the fee before the date of a favorable decision, and the agreement usually will be approved by the Commissioner if the specified fee does not exceed the lesser of 25 percent of the claimant's past-due benefits or \$4,000. The Commissioner then issues a notice of the maximum fee the representative can charge based on the approved agreement.

Under the fee petition process, the representative submits an itemized list of services and fees after a decision has been issued. The Commissioner will issue a notice of the fees that are approved or disapproved after reviewing the extent and types of services performed, the complexity of the case, and the amount of time spent by the representative on the case.

The Social Security Act and Social Security regulations provide that a representative may not charge or collect, directly or indirectly, a fee in any amount not approved by the Social Security Administration (SSA) or a Federal court. The statute and regulations further provide that SSA may suspend or disqualify from further practice before SSA a representative who breaks the rules governing representatives.

Under programs authorized under title II of the Social Security Act, in favorable decisions in which the claimant is represented by an attorney, the Commissioner must withhold and certify direct payment to the attorney, out of the claimant's past-due benefits, an amount equal to the smaller of: (1) 25 percent of the past-due benefits, or (2) the fee authorized by the Commissioner under either the fee petition or fee agreement process. This payment provision does not apply to SSI benefits and an attorney must look to the SSI beneficiary for payment of the fee. In addition, it does not apply to fees requested by non-attorney representatives.

The costs associated with approving, determining, processing, withholding, and certifying direct payment of attorney fees are currently absorbed in SSA's administrative budget.

House bill

The bill requires the Commissioner of Social Security to recover from attorneys' fees the cost of administering the process used to certify payment of attorneys fees. The assessment would be withheld from the amount payable to the attorney and the attorney would be prohibited from recovering the assessment from the beneficiary. The provision specifies an assessment of 6.3 percent of the

approved attorney's fee for FY2000. After FY2000, the percentage would be adjusted by the Commissioner as necessary to achieve full recovery of the costs associated with certifying fees to attorneys.

The provision is applicable to fees required to be certified for payment after December 31, 1999, or the last day of the first month beginning after the month of enactment, whichever is later.

Senate amendment

No provision.

Conference agreement

The conference agreement follows the House bill with the modification that, for calendar years after 2000, the assessment would be set at a rate to achieve full recovery of the costs of determining, processing, withholding, and distributing payment of fees to attorneys, but shall not exceed 6.3 percent of the attorney's fee. The Conferees expect that the Commissioner of Social Security will take into account in determining the cost to the Social Security Administration the processing, withholding, and distributing of payments of fees to attorneys. The agreement contemplates ongoing Congressional oversight of the attorney fee assessment process through hearings and requires a study by the General Accounting Office (GAO) to examine the costs of administering the attorney fee provisions with specific estimates of the costs of processing, withholding, and distributing of payment of fees. GAO would also explore the feasibility and advisability of a fixed fee as opposed to an assessment based on a percentage of the attorney's fee and would determine whether the assessment impairs access to representation for applicants. GAO would be required to make recommendations regarding efficiencies that the Commissioner could implement to reduce the cost of determining and certifying fees, the feasibility of linking the collection of the assessment to the timeliness of the payment of fees to attorneys, and the advisability of extending attorney fee disbursement to the Supplemental Security Income program. The agreement also eliminates the requirement that the Commissioner may not certify a fee before the end of the 15-day waiting period, but does not affect any beneficiary's right of appeal.

The authority is provided to the SSA to decrease the user fee assessment, and accordingly it should be decreased to take into account any administrative savings associated with technological improvements or administrative efficiencies implemented by the SSA or if the GAO finds that actual administrative expenses are less than reported by the SSA. The SSA should devote special attention to GAO recommendations related to program improvements or administrative efficiencies.

In addition, the Congress and the Committees of jurisdiction should reconsider the assessment promptly if the GAO finds that such a fee in any way impairs or impacts beneficiaries' ability to obtain and secure legal representation.

Prevention of Fraud and Abuse Associated with Certain Payments Under the Medicaid Program

Present law

Under the Individuals with Disabilities Education Act (IDEA), public schools must provide children with disabilities with a free and appropriate public education in the least restrictive educational setting, including special education and health-related services according to their individualized education program (IEP). In order to assist schools in meeting this obligation, under certain circumstances States may turn to Medicaid as a payer for health-related services such as occupational therapy, speech therapy, and physical therapy. Under certain conditions, school districts may directly bill their State Medicaid program for health-related services provided to disabled children enrolled in Medicaid. In addition, a school district may utilize a community-based organization to provide health-related services to disabled children enrolled in Medicaid.

In May of 1999, the Health Care Financing Administration (HCFA) clarified federal policies with respect to reimbursement for school-based health services under Medicaid in three areas: (1) bundled rates for medical services provided to Medicaid-eligible children in schools; (2) Federal matching payments for school health-related transportation services; and (3) school health-related administrative activities.

House bill

The bill stipulates that Medicaid payments for school-based services and related administrative costs are not to be made unless certain conditions are met. First, individual items and services may not be bundled unless payment is made under a methodology approved by the Secretary of Health and Human Services (HHS). Similarly, fee-for-service payment for individual items and services and administrative expenses is permitted only when payment does not exceed amounts paid to other entities for the same items, services, or administrative expenses, or is made in accordance with an alternative arrangement approved by the Secretary. This provision also codifies HCFA's policies on transportation services in effect as of May 1999. Finally, the provision delineates specific conditions under which payments for Medicaid covered items, services and administrative expenses can be made when a public agency such as a school district contracts with an entity to conduct claims processing functions.

The bill requires coordination between states, managed care entities and schools related to provision of and payment for Medicaid services provided in school settings. The provision would ensure that local school agencies are able to recoup an appropriate amount of federal financial match when they make expenditures for services for these Medicaid eligible children. Finally, the provision specifies that the Administrator of HCFA, in consultation with State Medicaid and education agencies and local school systems, will develop and implement a uniform methodology for administrative claims made by schools.

Senate amendment

No provision.

Conference agreement

The House recedes to the Senate.

Extension of Authority of State Medicaid Fraud Control Units

Present law

Medicaid Fraud Control Units established by State governments as entities separate from the State's Medicaid agency are authorized to investigate and refer for prosecution Medicaid fraud as well as patient abuse in facilities that participate in the Medicaid program.

House bill

The bill permits State Medicaid Fraud Control Units to investigate fraud related to any Federal health care program, subject to the approval of the appropriate Inspector General, if the suspected fraud is related to Medicaid fraud. Funds that are recovered would be returned to the relevant Federal health care program or the Medicaid program. Fraud control units would be permitted to investigate patient abuse in non-Medicaid residential health care facilities.

Senate amendment

No provision.

Conference agreement

The Senate recedes to the House.

Climate Database Modernization

Present law

No provision.

House bill

No provision.

Senate amendment

No provision.

Conference agreement

Notwithstanding any other provision of law, the National Oceanic and Atmospheric Administration (NOAA) shall contract for its multi-year program for climate database modernization and utilization in accordance with NIH Image World Contract #263-96-D-0323 and Task Order #56-DKNE-9-98303 which were awarded as a result of fair and open competition conducted in response to NOAA's solicitation IW SOW 1082.

Special Allowance Adjustment for Student Loans

Present law

Under the Higher Education Act of 1965, the special allowance paid to lenders for participation in the Federal Family Education Loan Program is pegged to the rate for 91-day Treasury bills.

House bill

The bill changes the index for the special allowance from 91-day Treasury bills to that for 3-month commercial paper and would be applicable for payment with respect to any 3-month period beginning on or after January 1, 2000, for loans for which the first disbursement is made after such date.

Senate amendment

No provision.

Conference agreement

The Senate recedes to the House. In receding to the House on the provision, the conferees wish to note that the Higher Education Act reauthorization (P.L. 105-244) required the establishment of a study group to design and conduct a study to identify and evaluate means of establishing a market mechanism for the delivery of Title IV loans. Not fewer than three different mechanisms were to be identified and evaluated by this group which was to report to the Congress no later than May 15, 2001. The conferees wish to note that the Chairman and Ranking Member of the Committee on Education and the Workforce and the Chairman and Ranking Member of the House Subcommittee on Postsecondary Education, Training and Life Long Learning have endorsed the change to the lender yield calculation on student loans contained in the bill. The proposal would change lender yields from January 1, 2000 through June 30, 2003 at which time the House Education and the Workforce Committee and the Senate Health, Education, Labor, and Pension Committee can appropriately review this item during the consideration of the Higher Education Act reauthorization.

Schedule for Payments under SSI State Supplementation Agreements

Present law

States may supplement the federal Supplemental Security Income (SSI) payment. The Social Security Administration (SSA) administers this state supplement payment for 26 States. Under current regulations, States must reimburse SSA within 5 business days after the monthly supplement payment has been made by SSA.

House bill

No provision.

Senate amendment

No provision.

Conference agreement

The conference agreement would change the date for remitting reimbursement by the States to no later than the business day preceding the date SSA pays the monthly benefit. For the payment for the last month of the State's fiscal year, States shall remit the reimbursement by the fifth business day following the date SSA pays the monthly benefit. The agreement also provides for a penalty of 5 percent of the payment and fees due if the payment is received after the specified dates. This provision is effective for monthly benefits paid for months after September 2009 (October 2009 for States with fiscal years that coincide with the Federal fiscal year).

Bonus Commodities related to the National School Lunch Act*Present law*

In the School Lunch program, schools are entitled to federal food commodity assistance for each meal they serve. Commodity assistance must equal a specific amount per meal, about 15 cents a meal in the 1999–2000 school year. In addition, when all school lunch program aid (cash and commodities) are added together, the value of commodities purchased to meet the per-meal (15-cent) entitlement—so-called entitlement commodities—must equal 12 percent of the total cash and commodity aid provided. If not, the Agriculture Department is required to buy additional commodities to meet the 12 percent requirement.

The Agriculture Department appropriations laws for fiscal years 1999 and 2000 changed this 12 percent rule temporarily. They require that any commodities acquired by the Agriculture Department for farm support reasons, and then donated to schools in the school lunch program (so-called bonus commodities), be counted when judging whether the 12 percent requirement has been met.

House bill

No provision.

Senate amendment

No provision.

Conference agreement

The conference agreement would apply the provisions incorporated in the Agriculture Department appropriations laws for fiscal years 1999 and 2000 to fiscal years 2001 through 2009.

Simplification of Foster Child Definition under Earned Income Credit*Present law*

For purposes of the earned income credit ("EIC"), qualifying children may include foster children who reside with the taxpayer for a full year, if the taxpayer cares for the foster children as the taxpayer's own children. (Code sec. 32(c)(3)(B)(iii)). All EIC qualifying children (including foster children) must either be under the age of 19 (24 if a full-time student) or permanently and totally dis-

abled. There is no requirement that the foster child either be (1) placed in the household by a foster care agency or (2) a relative of the taxpayer.

House bill

No provision.

Senate amendment

No provision.

Conference agreement

For purposes of the EIC, a foster child is defined as a child who (1) is cared for by the taxpayer as if he or she were the taxpayer's own child, (2) has the same principal place of abode as the taxpayer for the taxpayer's entire taxable year, and (3) either is the taxpayer's brother, sister, stepbrother, stepsister, or descendant (including an adopted child) of any such relative, or was placed in the taxpayer's home by an agency of a State or one of its political subdivisions or by a tax-exempt child placement agency licensed by a State.

Delay of Effective Date of Organ Procurement and Transplantation Network Final Rule

Present law

No provision.

House bill

No provision.

Senate amendment

No provision.

Conference agreement

The final rule entitled "Organ Procurement and Transplantation Network", promulgated by the Secretary of Health and Human Services on April 2, 1998, together with the amendments to such rules promulgated on October 20, 1999 shall not become effective before the expiration of the 90-day period beginning on the date of enactment of this Act.

LEGISLATIVE BACKGROUND

H.R. 1180, the "Ticket to Work and Work Incentives Improvement Act of 1999," was passed by the House on October 19, 1999. In the Senate, the provisions of S. 331 (the "Work Incentives Improvement Act of 1999"), with an amendment, were substituted, and the bill, as amended, passed the Senate on October 21, 1999. The conference agreement to H.R. 1180 contains provisions to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities. Provisions of H.R. 2923 ("Extension of Expiring Provisions"),¹ as approved by

¹The provisions of H.R. 2923 were reported by the House Committee on Ways and Means on September 28, 1999 (H. Rept. 106-344).

the Ways and Means Committee on September 28, 1999, and S. 1792, (the "Tax Relief Extension Act of 1999"),² as passed by the Senate on October 29, 1999, are included in the conference agreement to H.R. 1180.

I. EXTENSION OF EXPIRED AND EXPIRING TAX PROVISIONS

A. Extend Minimum Tax Relief for Individuals (secs. 24 and 26 of the Code)

Present Law

Present law provides for certain nonrefundable personal tax credits (i.e., the dependent care credit, the credit for the elderly and disabled, the adoption credit, the child tax credit, the credit for interest on certain home mortgages, the HOPE Scholarship and Lifetime Learning credits, and the D.C. homebuyer's credit). Except for taxable years beginning during 1998, these credits are allowed only to the extent that the individual's regular income tax liability exceeds the individual's tentative minimum tax, determined without regard to the minimum tax foreign tax credit. For taxable years beginning during 1998, these credits are allowed to the extent of the full amount of the individual's regular tax (without regard to the tentative minimum tax).

An individual's tentative minimum tax is an amount equal to (1) 26 percent of the first \$175,000 (\$87,500 in the case of a married individual filing a separate return) of alternative minimum taxable income ("AMTI") in excess of a phased-out exemption amount and (2) 28 percent of the remaining AMTI. The maximum tax rates on net capital gain used in computing the tentative minimum tax are the same as under the regular tax. AMTI is the individual's taxable income adjusted to take account of specified preferences and adjustments. The exemption amounts are: (1) \$45,000 in the case of married individuals filing a joint return and surviving spouses; (2) \$33,750 in the case of other unmarried individuals; and (3) \$22,500 in the case of married individuals filing a separate return, estates and trusts. The exemption amounts are phased out by an amount equal to 25 percent of the amount by which the individual's AMTI exceeds (1) \$150,000 in the case of married individuals filing a joint return and surviving spouses, (2) \$112,500 in the case of other unmarried individuals, and (3) \$75,000 in the case of married individuals filing separate returns or an estate or a trust. These amounts are not indexed for inflation.

For families with three or more qualifying children, a refundable child credit is provided, up to the amount by which the liability for social security taxes exceeds the amount of the earned income credit (sec. 24(d)). For taxable years beginning after 1998, the refundable child credit is reduced by the amount of the individual's minimum tax liability (i.e., the amount by which the tentative minimum tax exceeds the regular tax liability).

²The provisions of S. 1792 were reported by the Senate Committee on Finance on October 26, 1999 (S. Rept. 106-201).

House Bill

No provision. H.R. 2923, as approved by the Committee on Ways and Means, makes permanent the provision that allows an individual to offset the entire regular tax liability (without regard to the minimum tax) by the personal nonrefundable credits.

H.R. 2923 repeals the present-law provision that reduces the refundable child credit by the amount of an individual's minimum tax.

Effective date.—The provisions of H.R. 2923 are effective for taxable years beginning after December 31, 1998.

Senate Amendment

No provision. S. 1792, as passed by the Senate, contains the same provisions as H.R. 2923, except that the provisions apply only to taxable years beginning in 1999 and 2000.

Conference Agreement

The conference agreement extends the provision that allows the nonrefundable credits to offset the individual's regular tax liability in full (as opposed to only the amount by which the regular tax exceeds the tentative minimum tax) to taxable years beginning in 1999. For taxable years beginning in 2000 and 2001 the personal nonrefundable credits may offset both the regular tax and the minimum tax.³

Under the conference agreement, the refundable child credit will not be reduced by the amount of an individual's minimum tax in taxable years beginning in 1999, 2000, and 2001.

B. Extend Research and Experimentation Tax Credit and Increase Rates for the Alternative Incremental Research Credit (sec. 41 of the Code)

Present Law

Section 41 provides for a research tax credit equal to 20 percent of the amount by which a taxpayer's qualified research expenditures for a taxable year exceeded its base amount for that year. The research tax credit expired and generally does not apply to amounts paid or incurred after June 30, 1999.

Except for certain university basic research payments made by corporations, the research tax credit applies only to the extent that the taxpayer's qualified research expenditures for the current taxable year exceed its base amount. The base amount for the current year generally is computed by multiplying the taxpayer's "fixed-base percentage" by the average amount of the taxpayer's gross receipts for the four preceding years. If a taxpayer both incurred qualified research expenditures and had gross receipts during each of at least three years from 1984 through 1988, then its "fixed-base percentage" is the ratio that its total qualified research expenditures for the 1984–1988 period bears to its total gross receipts for that period (subject to a maximum ratio of .16). All other taxpayers

³The foreign tax credit will be allowed before the personal credits in computing the regular tax for these years.

(so-called “start-up firms”) are assigned a fixed-base percentage of 3 percent. Expenditures attributable to research that is conducted outside the United States do not enter into the credit computation.

Taxpayers are allowed to elect an alternative incremental research credit regime. If a taxpayer elects to be subject to this alternative regime, the taxpayer is assigned a three-tiered fixed-base percentage (that is lower than the fixed-base percentage otherwise applicable under present law) and the credit rate likewise is reduced. Under the alternative credit regime, a credit rate of 1.65 percent applies to the extent that a taxpayer’s current-year research expenses exceed a base amount computed by using a fixed-base percentage of 1 percent (i.e., the base amount equals 1 percent of the taxpayer’s average gross receipts for the four preceding years) but do not exceed a base amount computed by using a fixed-base percentage of 1.5 percent. A credit rate of 2.2 percent applies to the extent that a taxpayer’s current-year research expenses exceed a base amount computed by using a fixed-base percentage of 1.5 percent but do not exceed a base amount computed by using a fixed-base percentage of 2 percent. A credit rate of 2.75 percent applies to the extent that a taxpayer’s current-year research expenses exceed a base amount computed by using a fixed-base percentage of 2 percent. An election to be subject to this alternative incremental credit regime may be made for any taxable year beginning after June 30, 1996, and such an election applies to that taxable year and all subsequent years (in the event that the credit subsequently is extended by Congress) unless revoked with the consent of the Secretary of the Treasury.

House Bill

No provision. However, H.R. 2923, as approved by the Committee on Ways and Means, extends the research tax credit for five years—i.e., generally, for the period July 1, 1999, through June 30, 2004.

In addition, the provision increases the credit rate applicable under the alternative incremental research credit one percentage point per step, that is from 1.65 percent to 2.65 percent when a taxpayer’s current-year research expenses exceed a base amount of 1 percent but do not exceed a base amount of 1.5 percent; from 2.2 percent to 3.2 percent when a taxpayer’s current-year research expenses exceed a base amount of 1.5 percent but do not exceed a base amount of 2 percent; and from 2.75 percent to 3.75 percent when a taxpayer’s current-year research expenses exceed a base amount of 2 percent.

Research tax credits that are attributable to the period beginning on July 1, 1999, and ending on September 30, 2000, may not be taken into account in determining any amount required to be paid for any purpose under the Internal Revenue Code prior to October 1, 2000. On or after October 1, 2000, such credits may be taken into account through the filing of an amended return, an application for expedited refund, an adjustment of estimated taxes, or other means that is allowed by the Code.

Effective date.—The extension of the research credit is effective for qualified research expenditures paid or incurred during the period July 1, 1999, through June 30, 2004. The increase in the credit

rate under the alternative incremental research credit is effective for taxable years beginning after June 30, 1999. Estimated tax penalties will be waived for the period before July 1, 1999, with respect to any underpayment that is created by reason of the rule allocating research credits to a period based on the ratio of months in such period to the months in the taxable year.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, extends the research tax credit for 18 months—i.e., generally, for the period July 1, 1999, through December 31, 2000.

In addition, S. 1792 increases the credit rate applicable under the alternative incremental research credit one percentage point per step, that is, identical to H.R. 2923.

Lastly, S. 1792 expands the definition of qualified research to include research undertaken in Puerto Rico and possessions of the United States. However, any employee compensation or other expense claimed for computation of the research credit may not also be claimed for the purpose of any credit allowable under sec. 30A (“Puerto Rico economic activity credit”) or under sec. 936 (“Puerto Rico and possession tax credit”).

Effective date.—The extension of the research credit is effective for qualified research expenditures paid or incurred during the period July 1, 1999, through December 31, 2000. The increase in the credit rate under the alternative incremental research credit is effective for taxable years beginning after June 30, 1999. The expansion of qualified research to include research undertaken in any possession of the United States is effective for qualified research expenditures paid or incurred beginning after June 30, 1999.

Conference Agreement

The conference agreement includes the provision of H.R. 2923 by extending the research credit through June 30, 2004.

In addition, the conference agreement follows H.R. 2923 and S. 1792 by increasing the credit rate applicable under the alternative incremental research credit by one percentage point per step.

The conference agreement follows S. 1792 by expanding the definition of qualified research to include research undertaken in Puerto Rico and possessions of the United States.

Research tax credits that are attributable to the period beginning on July 1, 1999, and ending on September 30, 2000, may not be taken into account in determining any amount required to be paid for any purpose under the Internal Revenue Code prior to October 1, 2000. On or after October 1, 2000, such credits may be taken into account through the filing of an amended return, an application for expedited refund, an adjustment of estimated taxes, or other means that are allowed by the Code. The prohibition on taking credits attributable to the period beginning on July 1, 1999, and ending on September 30, 2000, into account as payments prior to October 1, 2000, extends to the determination of any penalty or interest under the Code. For example, the amount of tax required to be shown on a return that is due prior to October 1, 2000 (excluding extensions) may not be reduced by any such credits. In ad-

dition, the conferees clarify that deductions under section 174 are reduced by credits allowable under section 41 as under present law, notwithstanding the delay in taking the credit into account created by this provision.

Similarly, research tax credits that are attributable to the period beginning October 1, 2000, and ending on September 30, 2001, may not be taken into account in determining any amount required to be paid for any purpose under the Internal Revenue Code prior to October 1, 2001. On or after October 1, 2001, such credits may be taken into account through the filing of an amended return, an application for expedited refund, an adjustment of estimated taxes, or other means that are allowed by the Code. Likewise, the prohibition on taking credits attributable to the period beginning on October 1, 2000, and ending on September 30, 2001, into account as payments prior to October 1, 2001, extends to the determination of any penalty or interest under the Code.

In extending the research credit, the conferees are concerned that the definition of qualified research be administered in a manner that is consistent with the intent Congress has expressed in enacting and extending the research credit. The conferees urge the Secretary to consider carefully the comments he has and may receive regarding the proposed regulations relating to the computation of the credit under section 41(c) and the definition of qualified research under section 41(d), particularly regarding the “common knowledge” standard. The conferees further note the rapid pace of technological advance, especially in service-related industries, and urge the Secretary to consider carefully the comments he has and may receive in promulgating regulations in connection with what constitutes “internal use” with regard to software expenditures. The conferees also observe that software research, that otherwise satisfies the requirements of section 41, which is undertaken to support the provision of a service, should not be deemed “internal use” solely because the business component involves the provision of a service.

The conferees wish to reaffirm that qualified research is research undertaken for the purpose of discovering new information which is technological in nature. For purposes of applying this definition, new information is information that is new to the taxpayer, is not freely available to the general public, and otherwise satisfies the requirements of section 41. Employing existing technologies in a particular field or relying on existing principles of engineering or science is qualified research, if such activities are otherwise undertaken for purposes of discovering information and satisfy the other requirements under section 41.

The conferees also are concerned about unnecessary and costly taxpayer record keeping burdens and reaffirm that eligibility for the credit is not intended to be contingent on meeting unreasonable record keeping requirements.

Effective date.—The extension of the research credit is effective for qualified research expenditures paid or incurred during the period July 1, 1999, through June 30, 2004. The increase in the credit rate under the alternative incremental research credit is effective for taxable years beginning after June 30, 1999.

C. Extend Exceptions under Subpart F for Active Financing Income (secs. 953 and 954 of the Code)

Present Law

Under the subpart F rules, 10-percent U.S. shareholders of a controlled foreign corporation (“CFC”) are subject to U.S. tax currently on certain income earned by the CFC, whether or not such income is distributed to the shareholders. The income subject to current inclusion under the subpart F rules includes, among other things, foreign personal holding company income and insurance income. In addition, 10-percent U.S. shareholders of a CFC are subject to current inclusion with respect to their shares of the CFC’s foreign base company services income (i.e., income derived from services performed for a related person outside the country in which the CFC is organized).

Foreign personal holding company income generally consists of the following: (1) dividends, interest, royalties, rents, and annuities; (2) net gains from the sale or exchange of (a) property that gives rise to the preceding types of income, (b) property that does not give rise to income, and (c) interests in trusts, partnerships, and REMICs; (3) net gains from commodities transactions; (4) net gains from foreign currency transactions; (5) income that is equivalent to interest; (6) income from notional principal contracts; and (7) payments in lieu of dividends.

Insurance income subject to current inclusion under the subpart F rules includes any income of a CFC attributable to the issuing or reinsuring of any insurance or annuity contract in connection with risks located in a country other than the CFC’s country of organization. Subpart F insurance income also includes income attributable to an insurance contract in connection with risks located within the CFC’s country of organization, as the result of an arrangement under which another corporation receives a substantially equal amount of consideration for insurance of other-country risks. Investment income of a CFC that is allocable to any insurance or annuity contract related to risks located outside the CFC’s country of organization is taxable as subpart F insurance income (Prop. Treas. Reg. sec. 1.953–1(a)).

Temporary exceptions from foreign personal holding company income, foreign base company services income, and insurance income apply for subpart F purposes for certain income that is derived in the active conduct of a banking, financing, or similar business, or in the conduct of an insurance business (so-called “active financing income”). These exceptions are applicable only for taxable years beginning in 1999.⁴

With respect to income derived in the active conduct of a banking, financing, or similar business, a CFC is required to be predominantly engaged in such business and to conduct substantial activity with respect to such business in order to qualify for the exceptions. In addition, certain nexus requirements apply, which provide that income derived by a CFC or a qualified business unit

⁴Temporary exceptions from the subpart F provisions for certain active financing income applied only for taxable years beginning in 1998. Those exceptions were extended and modified as part of the present-law provision.

(“QBU”) of a CFC from transactions with customers is eligible for the exceptions if, among other things, substantially all of the activities in connection with such transactions are conducted directly by the CFC or QBU in its home country, and such income is treated as earned by the CFC or QBU in its home country for purposes of such country’s tax laws. Moreover, the exceptions apply to income derived from certain cross border transactions, provided that certain requirements are met. Additional exceptions from foreign personal holding company income apply for certain income derived by a securities dealer within the meaning of section 475 and for gain from the sale of active financing assets.

In the case of insurance, in addition to a temporary exception from foreign personal holding company income for certain income of a qualifying insurance company with respect to risks located within the CFC’s country of creation or organization, certain temporary exceptions from insurance income and from foreign personal holding company income apply for certain income of a qualifying branch of a qualifying insurance company with respect to risks located within the home country of the branch, provided certain requirements are met under each of the exceptions. Further, additional temporary exceptions from insurance income and from foreign personal holding company income apply for certain income of certain CFCs or branches with respect to risks located in a country other than the United States, provided that the requirements for these exceptions are met.

House Bill

No provision, but H.R. 2923, as approved by the Committee on Ways and Means, extends for five years the present-law temporary exceptions from subpart F foreign personal holding company income, foreign base company services income, and insurance income for certain income that is derived in the active conduct of a banking, financing, or similar business, or in the conduct of an insurance business.

Effective date.—The provision is effective for taxable years of foreign corporations beginning after December 31, 1999, and before January 1, 2005, and for taxable years of U.S. shareholders with or within which such taxable years of such foreign corporations end.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, extends for one year the present-law temporary exceptions from subpart F foreign personal holding company income, foreign base company services income, and insurance income for certain income that is derived in the active conduct of a banking, financing, or similar business, or in the conduct of an insurance business.

Effective date.—The provision is effective only for taxable years of foreign corporations beginning in 2000, and for taxable years of U.S. shareholders with or within which such taxable years of such foreign corporations end.

Conference Agreement

The conference agreement includes the provision in H.R. 2923 and S. 1792, with a modification to the effective date. The provision in the conference agreement extends for two years the present-law temporary exceptions from subpart F foreign personal holding company income, foreign base company services income, and insurance income for certain income that is derived in the active conduct of a banking, financing, or similar business, or in the conduct of an insurance business.

The conference agreement clarifies that if the temporary exception from subpart F insurance income does not apply for a taxable year beginning after December 31, 2001, section 953(a) is to be applied to such taxable year in the same manner as it would for a taxable year beginning in 1998 (i.e., under the law in effect before amendments to section 953(a) were made in 1998).⁵ Thus, for future periods in which the temporary exception relating to insurance income is not in effect, the same-country exception from subpart F insurance income applies as under prior law.

Effective date.—The provision is effective for taxable years of foreign corporations beginning after December 31, 1999, and before January 1, 2002, and for taxable years of U.S. shareholders with or within which such taxable years of such foreign corporations end.

D. Extend Suspension of Net Income Limitation on Percentage Depletion from Marginal Oil and Gas Wells (sec. 613A of the Code)

Present Law

The Code permits taxpayers to recover their investments in oil and gas wells through depletion deductions. In the case of certain properties, the deductions may be determined using the percentage depletion method. Among the limitations that apply in calculating percentage depletion deductions is a restriction that, for oil and gas properties, the amount deducted may not exceed 100 percent of the net income from that property in any year (sec. 613(a)).

Special percentage depletion rules apply to oil and gas production from “marginal” properties (sec. 613A(c)(6)). Marginal production is defined as domestic crude oil and natural gas production from stripper well property or from property substantially all of the production from which during the calendar year is heavy oil. Stripper well property is property from which the average daily production is 15 barrel equivalents or less, determined by dividing the average daily production of domestic crude oil and domestic natural gas from producing wells on the property for the calendar year by the number of wells. Heavy oil is domestic crude oil with a weighted average gravity of 20 degrees API or less (corrected to 60 degrees Fahrenheit). Under one such special rule, the 100-percent-of-net-income limitation does not apply to domestic oil and gas pro-

⁵For the 1998 amendments, see the Tax and Trade Relief Extension Act of 1998, Division J, Making Omnibus Consolidated and Emergency Supplemental Appropriations for Fiscal Year 1999, Pub. L. No. 105-277, sec. 1005(b), 112 Stat. 2681 (1998).

duction from marginal properties during taxable years beginning after December 31, 1997, and before January 1, 2000.

House Bill

No provision, but H.R. 2923, as approved by the Committee on Ways and Means, extends the present-law suspension of the 100-percent-of-net-income limitation with respect to oil and gas production from marginal wells to include taxable years beginning after December 31, 1999, and before January 1, 2005.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, extends the present-law suspension of the 100-percent-of-net-income limitation with respect to oil and gas production from marginal wells to include taxable years beginning after December 31, 1999, and before January 1, 2001.

Conference Agreement

The conference agreement includes H.R. 2923 and S. 1792, with a modification providing an extension period through taxable years beginning before January 1, 2002.

E. Extend the Work Opportunity Tax Credit (sec. 51 of the Code)

Present Law

In general

The work opportunity tax credit (“WOTC”), which expired on June 30, 1999, was available on an elective basis for employers hiring individuals from one or more of eight targeted groups. The credit equals 40 percent (25 percent for employment of 400 hours or less) of qualified wages. Generally, qualified wages are wages attributable to service rendered by a member of a targeted group during the one-year period beginning with the day the individual began work for the employer.

The maximum credit per employee is \$2,400 (40% of the first \$6,000 of qualified first-year wages). With respect to qualified summer youth employees, the maximum credit is \$1,200 (40 percent of the first \$3,000 of qualified first-year wages).

The employer’s deduction for wages is reduced by the amount of the credit.

Targeted groups eligible for the credit

The eight targeted groups are: (1) families eligible to receive benefits under the Temporary Assistance for Needy Families (TANF) Program; (2) high-risk youth; (3) qualified ex-felons; (4) vocational rehabilitation referrals; (5) qualified summer youth employees; (6) qualified veterans; (7) families receiving food stamps; and (8) persons receiving certain Supplemental Security Income (SSI) benefits.

Minimum employment period

No credit is allowed for wages paid to employees who work less than 120 hours in the first year of employment.

Expiration date

The credit is effective for wages paid or incurred to a qualified individual who began work for an employer before July 1, 1999.

House Bill

No provision. However, H.R. 2923, as approved by the Committee on Ways and Means, extends the work opportunity tax credit for 30 months (through December 31, 2001) and clarifies the definition of first year of employment for purposes of the WOTC. H.R. 2923 also directs the Secretary of the Treasury to expedite procedures to allow taxpayers to satisfy their WOTC filing requirements (e.g., Form 8850) by electronic means.

Effective date.—The provision is effective for wages paid or incurred to qualified individuals who begin work for the employer on or after July 1, 1999, and before January 1, 2002.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, extends the work opportunity tax credit for 18 months (through December 31, 2000) and clarifies the definition of first year of employment for purposes of the WOTC.

Effective date.—The provision is effective for wages paid or incurred to qualified individuals who begin work for the employer on or after July 1, 1999, and before January 1, 2001.

Conference Agreement

The conference agreement provides for a 30-month extension of the work opportunity tax credit. The conference agreement also includes the clarification of the definition of first year of employment for purposes of the WOTC that is included in H.R. 2923 and S. 1792. Finally, the conferees also direct the Secretary of the Treasury to expedite the use of electronic filing of requests for certification under the credit. They believe that participation in the program by businesses should not be discouraged by the requirement that such forms (i.e., the Form 8850) be submitted in paper form.

Effective date.—The provision is effective for wages paid or incurred to qualified individuals who begin work for the employer on or after July 1, 1999, and before January 1, 2002.

F. Extend the Welfare-To-Work Tax Credit (sec. 51A of the Code)***Present Law***

The Code provides to employers a tax credit on the first \$20,000 of eligible wages paid to qualified long-term family assistance (AFDC or its successor program) recipients during the first two years of employment. The credit is 35 percent of the first \$10,000 of eligible wages in the first year of employment and 50

percent of the first \$10,000 of eligible wages in the second year of employment. The maximum credit is \$8,500 per qualified employee.

Qualified long-term family assistance recipients are: (1) members of a family that has received family assistance for at least 18 consecutive months ending on the hiring date; (2) members of a family that has received family assistance for a total of at least 18 months (whether or not consecutive) after the date of enactment of this credit if they are hired within 2 years after the date that the 18-month total is reached; and (3) members of a family who are no longer eligible for family assistance because of either Federal or State time limits, if they are hired within 2 years after the Federal or State time limits made the family ineligible for family assistance.

Eligible wages include cash wages paid to an employee plus amounts paid by the employer for the following: (1) educational assistance excludable under a section 127 program (or that would be excludable but for the expiration of sec. 127); (2) health plan coverage for the employee, but not more than the applicable premium defined under section 4980B(f)(4); and (3) dependent care assistance excludable under section 129.

The welfare to work credit is effective for wages paid or incurred to a qualified individual who begins work for an employer on or after January 1, 1998, and before July 1, 1999.

House Bill

No provision. However, H.R. 2923, as approved by the Committee on Ways and Means, extends the welfare-to-work tax credit for 30 months.

Effective date.—The provision extends the welfare-to-work credit effective for wages paid or incurred to a qualified individual who begins work for an employer on or after July 1, 1999, and before January 1, 2002.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, extends the welfare-to-work tax credit for 18 months.

Effective date.—The provision extends the welfare-to-work credit effective for wages paid or incurred to a qualified individual who begins work for an employer on or after July 1, 1999, and before January 1, 2001.

Conference Agreement

The conference agreement provides for a 30-month extension of the welfare-to-work tax credit.

Effective date.—The provision is effective for wages paid or incurred to a qualified individual who begins work for an employer on or after July 1, 1999, and before January 1, 2002.

G. Extend Exclusion for Employer-Provided Educational Assistance (sec. 127 of the Code)

Present Law

Educational expenses paid by an employer for the employer's employees are generally deductible to the employer.

Employer-paid educational expenses are excludable from the gross income and wages of an employee if provided under a section 127 educational assistance plan or if the expenses qualify as a working condition fringe benefit under section 132. Section 127 provides an exclusion of \$5,250 annually for employer-provided educational assistance. The exclusion expired with respect to graduate courses June 30, 1996. With respect to undergraduate courses, the exclusion for employer-provided educational assistance expires with respect to courses beginning on or after June 1, 2000.

In order for the exclusion to apply, certain requirements must be satisfied. The educational assistance must be provided pursuant to a separate written plan of the employer. The educational assistance program must not discriminate in favor of highly compensated employees. In addition, not more than 5 percent of the amounts paid or incurred by the employer during the year for educational assistance under a qualified educational assistance plan can be provided for the class of individuals consisting of more than 5-percent owners of the employer (and their spouses and dependents).

Educational expenses that do not qualify for the section 127 exclusion may be excludable from income as a working condition fringe benefit.⁶ In general, education qualifies as a working condition fringe benefit if the employee could have deducted the education expenses under section 162 if the employee paid for the education. In general, education expenses are deductible by an individual under section 162 if the education (1) maintains or improves a skill required in a trade or business currently engaged in by the taxpayer, or (2) meets the express requirements of the taxpayer's employer, applicable law or regulations imposed as a condition of continued employment. However, education expenses are generally not deductible if they relate to certain minimum educational requirements or to education or training that enables a taxpayer to begin working in a new trade or business.⁷

House Bill

No provision.

Senate Amendment

No provision. However, S. 1792 as passed by the Senate reinstates the exclusion for employer-provided educational assistance for graduate-level courses, and extends the exclusion, as applied to both undergraduate and graduate-level courses, through 2000. The provision in S. 1792 is effective with respect to undergraduate

⁶These rules also apply in the event that section 127 expires and is not reinstated.

⁷In the case of an employee, education expenses (if not reimbursed by the employer) may be claimed as an itemized deduction only if such expenses, along with other miscellaneous deductions, exceed 2 percent of the taxpayer's AGI. The 2-percent floor limitation is disregarded in determining whether an item is excludable as a working condition fringe benefit.

courses beginning after May 31, 2000, and before January 1, 2001. The provision is effective with respect to graduate-level courses beginning after December 31, 1999, and before January 1, 2001.

Conference Agreement

The conference agreement provides that the present-law exclusion for employer-provided educational assistance is extended through December 31, 2001.

Effective date.—The provision is effective with respect to courses beginning after May 31, 2000, and before January 1, 2002.

H. Extend and Modify Tax Credit for Electricity Produced by Wind and Closed-Loop Biomass Facilities (sec. 45 of the Code)

Present Law

An income tax credit is allowed for the production of electricity from either qualified wind energy or qualified “closed-loop” biomass facilities (sec. 45). The credit applies to electricity produced by a qualified wind energy facility placed in service after December 31, 1993, and before July 1, 1999, and to electricity produced by a qualified closed-loop biomass facility placed in service after December 31, 1992, and before July 1, 1999. The credit is allowable for production during the 10-year period after a facility is originally placed in service.

Closed-loop biomass is the use of plant matter, where the plants are grown for the sole purpose of being used to generate electricity. It does not include the use of waste materials (including, but not limited to, scrap wood, manure, and municipal or agricultural waste). The credit also is not available to taxpayers who use standing timber to produce electricity. In order to claim the credit, a taxpayer must own the facility and sell the electricity produced by the facility to an unrelated party.

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, extends the present-law tax credit for electricity produced by wind and closed-loop biomass for facilities placed in service after June 30, 1999, and before December 31, 2000. S. 1792 also modifies the tax credit to include electricity produced from poultry litter, for facilities placed in service after December 31, 1999, and before December 31, 2000. The credit further is expanded to include electricity produced from landfill gas, for electricity produced from facilities placed in service after December 31, 1999, and before December 31, 2000.

Finally, the credit is expanded to include electricity produced from certain other biomass (in addition to closed-loop biomass and poultry waste). This additional biomass is defined as solid, nonhazardous, cellulose waste material which is segregated from other waste materials and which is derived from forest resources, but not including old-growth timber. The term also includes urban sources

such as waste pallets, crates, manufacturing and construction wood waste, and tree trimmings, or agricultural sources (including grain, orchard tree crops, vineyard legumes, sugar, and other crop by-products or residues. The term does not include unsegregated municipal solid waste or paper that commonly is recycled.

In the case of both closed-loop biomass and this additional biomass, the credit applies to electricity produced after December 31, 1999, from facilities that are placed in service before January 1, 2003 (including facilities placed in service before the date of enactment of this provision), and the credit is allowed for production attributable to biomass produced at facilities that are co-fired with coal.

Conference Agreement

The conference agreement includes S. 1792, with modifications. First, the extension is limited to electricity from facilities using present-law qualified sources (wind and closed-loop biomass) and from poultry waste facilities (placed in service after December 31, 1999). Second, in the case of all three fuel sources, the extension is limited to facilities placed in service before January 1, 2002. Third, the conference agreement does not include the provisions of the Senate amendment allowing co-firing of closed-loop biomass facilities. Fourth, the conference agreement includes the provisions of the Senate amendment clarifying wind facilities eligible for the credit.

I. Extend Duty-Free Treatment Under Generalized System of Preferences (GSP)

Title V of the Trade Act of 1974, as amended, grants authority to the President to provide duty-free treatment on imports of eligible articles from designated beneficiary developing countries (BDCs), subject to certain conditions and limitations. To qualify for GSP privileges, each beneficiary country is subject to various mandatory and discretionary eligibility criteria. Import sensitive products are ineligible for GSP. Section 505(a) of the Trade Act of 1974, as amended, provides that no duty-free treatment under Title V shall remain in effect after June 30, 1999.

House Bill

No provision.

Senate Amendment

No provision. The Senate amendment to H.R. 434, which passed the Senate on November 3, 1999, reauthorizes GSP retroactively for five years to terminate on June 30, 2004. It also provides that, notwithstanding section 514 of the Tariff Act of 1930 or any other provision of law, the entry (a) of any article to which duty-free treatment under Title V of the Trade Act of 1974 would have applied if such entry had been made on June 30, 1999, and (b) that was made after June 30, 1999, and before the date of enactment of this Act, shall be liquidated or reliquidated as free of duty and the Secretary of the Treasury shall refund any duty paid,

upon proper request filed with the appropriate customs officer, within 180 days after the date of enactment of this Act.

Conference Agreement

The conference agreement would reauthorize the GSP program for 27 months, to expire on September 30, 2001. The proposal provides for refunds, upon request of the importer, of any duty paid between June 30, 1999 and the effective date of this Act. All entries between the effective date of this Act and September 30, 2001 would enter duty-free.

J. Extend Authority to Issue Qualified Zone Academy Bonds (sec. 1397E of the Code)

Present Law

Tax-exempt bonds

Interest on State and local governmental bonds generally is excluded from gross income for Federal income tax purposes if the proceeds of the bonds are used to finance direct activities of these governmental units, including the financing of public schools (sec. 103).

Qualified zone academy bonds

As an alternative to traditional tax-exempt bonds, certain States and local governments are given the authority to issue "qualified zone academy bonds." A total of \$400 million of qualified zone academy bonds is authorized to be issued in each of 1998 and 1999. The \$400 million aggregate bond cap is allocated each year to the States according to their respective populations of individuals below the poverty line. Each State, in turn, allocates the credit to qualified zone academies within such State. A State may carry over any unused allocation into subsequent years.

Certain financial institutions that hold qualified zone academy bonds are entitled to a nonrefundable tax credit in an amount equal to a credit rate multiplied by the face amount of the bond (sec. 1397E). A taxpayer holding a qualified zone academy bond on the credit allowance date is entitled to a credit. The credit is includable in gross income (as if it were a taxable interest payment on the bond), and may be claimed against regular income tax and AMT liability.

The Treasury Department sets the credit rate at a rate estimated to allow issuance of qualified zone academy bonds without discount and without interest cost to the issuer. The maximum term of the bond is determined by the Treasury Department, so that the present value of the obligation to repay the bond is 50 percent of the face value of the bond.

"Qualified zone academy bonds" are defined as any bond issued by a State or local government, provided that (1) at least 95 percent of the proceeds are used for the purpose of renovating, providing equipment to, developing course materials for use at, or training teachers and other school personnel in a "qualified zone academy" and (2) private entities have promised to contribute to the qualified zone academy certain equipment, technical assistance

or training, employee services, or other property or services with a value equal to at least 10 percent of the bond proceeds.

A school is a “qualified zone academy” if (1) the school is a public school that provides education and training below the college level, (2) the school operates a special academic program in cooperation with businesses to enhance the academic curriculum and increase graduation and employment rates, and (3) either (a) the school is located in one of the 31 designated empowerment zones or one of the 95 enterprise communities designated under Code section 1391, or (b) it is reasonably expected that at least 35 percent of the students at the school will be eligible for free or reduced-cost lunches under the school lunch program established under the National School Lunch Act.

House Bill

No provision.

Senate Amendment

No provision.

Conference Agreement

The conference agreement authorizes up to \$400 million of qualified zone academy bonds to be issued in each of calendar years 2000 and 2001. Unused QZAB authority arising in 1998 and 1999 may be carried forward by the State or local government entity to which it is (or was) allocated for up to three years after the year in which the authority originally arose. Unused QZAB authority arising in 2000 and 2001 may be carried forward for two years after the year in which it arises. Each issuer is deemed to use the oldest QZAB authority which has been allocated to it first when new bonds are issued.

Effective date.—The provision is effective on the date of enactment.

**K. Extend the Tax Credit for First-Time D.C. Homebuyers
(sec. 1400C of the Code)**

Present Law

In general

First-time homebuyers of a principal residence in the District of Columbia are eligible for a nonrefundable tax credit of up to \$5,000 of the amount of the purchase price. The \$5,000 maximum credit applies both to individuals and married couples. Married individuals filing separately can claim a maximum credit of \$2,500 each. The credit phases out for individual taxpayers with adjusted gross income between \$70,000 and \$90,000 (\$110,000–\$130,000 for joint filers). For purposes of eligibility, “first-time homebuyer” means any individual if such individual did not have a present ownership interest in a principal residence in the District of Columbia in the one year period ending on the date of the purchase of the residence to which the credit applies.

Expiration date

The credit is scheduled to expire for residences purchased after December 31, 2000.

House Bill

No provision.

Senate Amendment

No provision.

Conference Agreement

The conference agreement provides for a one-year extension of the tax credit for first-time D.C. homebuyers, so that it applies to residences purchased on or before December 31, 2001.

Effective date.—The provision is effective for residences purchased after December 31, 2000 and before January 1, 2002.

L. Extend Expensing of Environmental Remediation Expenditures (sec. 198 of the Code)

Present Law

Taxpayers can elect to treat certain environmental remediation expenditures that would otherwise be chargeable to capital account as deductible in the year paid or incurred (sec. 198). The deduction applies for both regular and alternative minimum tax purposes. The expenditure must be incurred in connection with the abatement or control of hazardous substances at a qualified contaminated site.

A “qualified contaminated site” generally is any property that (1) is held for use in a trade or business, for the production of income, or as inventory; (2) is certified by the appropriate State environmental agency to be located within a targeted area; and (3) contains (or potentially contains) a hazardous substance (so-called “brownfields”). Targeted areas are defined as: (1) empowerment zones and enterprise communities as designated under present law; (2) sites announced before February, 1997, as being subject to one of the 76 Environmental Protection Agency (“EPA”) Brownfields Pilots; (3) any population census tract with a poverty rate of 20 percent or more; and (4) certain industrial and commercial areas that are adjacent to tracts described in (3) above. However, sites that are identified on the national priorities list under the Comprehensive Environmental Response, Compensation, and Liability Act of 1980 cannot qualify as targeted areas.

Eligible expenditures are those paid or incurred before January 1, 2001.

House Bill

No provision.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, eliminates the targeted area requirement, thereby, expanding eligible sites to include any site containing (or potentially containing) a hazardous substance that is certified by the appropriate State environmental agency, but not those sites that are identified on the national priorities list under the Comprehensive Environmental Response, Compensation, and Liability Act of 1980.

Effective date.—The provision to expand the class of eligible sites is effective for expenditures paid or incurred after December 31, 1999.

Conference Agreement

The conference agreement extends present-law expiration date for sec. 198 to include those expenditures paid or incurred before January 1, 2002.

Effective date.—The provision to extend the expiration date is effective upon the date of enactment.

M. Temporary Increase in Amount of Rum Excise Tax that is Covered Over to Puerto Rico and the U.S. Virgin Islands (sec. 7652 of the Code)

Present Law

A \$13.50 per proof gallon⁸ excise tax is imposed on distilled spirits produced in or imported (or brought) into the United States. The excise tax does not apply to distilled spirits that are exported from the United States or to distilled spirits that are consumed in U.S. possessions (e.g., Puerto Rico and the Virgin Islands).

The Internal Revenue Code provides for coverover (payment) of \$10.50 per proof gallon of the excise tax imposed on rum imported (or brought) into the United States (without regard to the country of origin) to Puerto Rico and the Virgin Islands. During the five-year period ending on September 30, 1998, the amount covered over was \$11.30 per proof gallon. This temporary increase was enacted in 1993 as transitional relief accompanying a reduction in certain tax benefits for corporations operating in Puerto Rico and the Virgin Islands.

Amounts covered over to Puerto Rico and the Virgin Islands are deposited into the treasuries of the two possessions for use as those possessions determine.

House Bill

No provision, but H.R. 984, as approved by the Committee on Ways and Means, increases from \$10.50 to \$13.50 per proof gallon the amount of excise taxes collected on rum brought into the United States that is covered over to Puerto Rico and the U.S. Virgin Islands. H.R. 984 further provides that \$0.50 per proof gallon of the amount covered over to Puerto Rico will be transferred to the Puerto Rico Conservation Trust, a private, non-profit section 501(c)(3) organization operating in Puerto Rico.

⁸A proof gallon is a liquid gallon consisting of 50 percent alcohol.

Effective date.—The provision is effective for excise taxes collected on rum imported or brought into the United States after June 30, 1999 and before October 1, 1999.

Senate Amendment

No provision, but H.R. 434, as passed by the Senate, is the same as the House bill.

Conference Agreement

The conference agreement reinstates the rum excise tax coverover at a rate of \$13.25 per proof gallon during the period from July 1, 1999, through December 31, 2001.

The conference agreement includes a special rule for payment of the \$2.75 per proof gallon increase in the coverover rate for Puerto Rico and the Virgin Islands. The special rule applies to payments that otherwise would be made in Fiscal Year 2000. Under this special payment rule, amounts attributable to the increase in the coverover rate that would have been transferred to Puerto Rico and the Virgin Islands after June 30, 1999 and before the date of enactment, will be paid on the date which is 15 days after the date of enactment. However, the total amount of this initial payment (aggregated for both possessions) may not exceed \$20 million.

The next payment to Puerto Rico and the Virgin Islands with respect to the \$2.75 increase in the coverover rate will be made on October 1, 2000. This payment will equal the total amount attributable to the increase that otherwise would have been transferred to Puerto Rico and the Virgin Islands before October 1, 2000 (less the payment of up to \$20 million made 15 days after the date of enactment).

Payments for the remainder of the period through December 31, 2001 will be paid as provided under the present-law rules for the \$10.50 per proof gallon coverover rate.

The special payment rule does not affect payments to Puerto Rico and the Virgin Islands with respect to the present-law \$10.50 per proof gallon coverover rate.

Finally, the conferees note that H.R. 984 and H.R. 434, described above, will be considered by the Congress next year. The conferees intend that the special payment rule for Fiscal Year 2000 will be reviewed when that legislation is considered, and that to the extent possible, the delayed payments will be accelerated, or interest on delayed amounts will be provided.

Effective date.—The provision is effective on July 1, 1999.

II. OTHER TIME-SENSITIVE PROVISIONS

A. Prohibit Disclosure of APAs and APA Background Files (secs. 6103 and 6110 of the Code)

Present Law

Section 6103

Under section 6103, returns and return information are confidential and cannot be disclosed unless authorized by the Internal Revenue Code.

The Code defines return information broadly. Return information includes:

A taxpayer's identity, the nature, source or amount of income, payments, receipts, deductions, exemptions, credits, assets, liabilities, net worth, tax liability, tax withheld, deficiencies, overassessments, or tax payments;

Whether the taxpayer's return was, is being, or will be examined or subject to other investigation or processing; or

Any other data, received by, recorded by, prepared by, furnished to, or collected by the Secretary with respect to a return or with respect to the determination of the existence, or possible existence, of liability (or the amount thereof) of any person under this title for any tax, penalty, interest, fine, forfeiture, or other imposition, or offense.⁹

Section 6110 and the Freedom of Information Act

With certain exceptions, section 6110 makes the text of any written determination the IRS issues available for public inspection. A written determination is any ruling, determination letter, technical advice memorandum, or Chief Counsel advice. Once the IRS makes the written determination publicly available, the background file documents associated with such written determination are available for public inspection upon written request. The Code defines "background file documents" as any written material submitted in support of the request. Background file documents also include any communications between the IRS and persons outside the IRS concerning such written determination that occur before the IRS issues the determination.

Before making them available for public inspection, section 6110 requires the IRS to delete specific categories of sensitive information from the written determination and background file documents.¹⁰ It also provides judicial and administrative procedures to resolve disputes over the scope of the information the IRS will disclose. In addition, Congress has also wholly exempted certain matters from section 6110's public disclosure requirements.¹¹ Any part of a written determination or background file that is not disclosed under section 6110 constitutes "return information."¹²

The Freedom of Information Act (FOIA) lists categories of information that a federal agency must make available for public inspection.¹³ It establishes a presumption that agency records are ac-

⁹Sec. 6103(b)(2)(A).

¹⁰Sec. 6110(c) provides for the deletion of identifying information, trade secrets, confidential commercial and financial information and other material.

¹¹Sec. 6110(l).

¹²Sec. 6103(b)(2)(B) ("The term 'return information' means . . . any part of any written determination or any background file document relating to such written determination (as such terms are defined in section 6110(b)) which is not open to public inspection under section 6110").

¹³Unless published promptly and offered for sale, an agency must provide for public inspection and copying: (1) final opinions as well as orders made in the adjudication of cases; (2) statements of policy and interpretations not published in the Federal Register; (3) administrative staff manuals and instructions to staff that affect a member of the public; and (4) agency records which have been or the agency expects to be, the subject of repetitive FOIA requests. 5 U.S.C. sec. 552(a)(2). An agency must also publish in the Federal Register: the organizational structure of the agency and procedures for obtaining information under the FOIA; statements describing the functions of the agency and all formal and informal procedures; rules of procedure, descriptions of forms and statements describing all papers, reports and examinations; rules of general applicability and statements of general policy; and amendments, revisions and repeals of the

cessible to the public. The FOIA, however, also provides nine exemptions from public disclosure. One of those exemptions is for matters specifically exempted from disclosure by a statute other than the FOIA if the exempting statute meets certain requirements.¹⁴ Section 6103 qualifies as an exempting statute under this FOIA provision. Thus, returns and return information that section 6103 deems confidential are exempt from disclosure under the FOIA.

Section 6110 is the exclusive means for the public to view IRS written determinations.¹⁵ If section 6110 covers the written determination, then the public cannot use the FOIA to obtain that determination.

Advance Pricing Agreements

The Advanced Pricing Agreement (“APA”) program is an alternative dispute resolution program conducted by the IRS, which resolves international transfer pricing issues prior to the filing of the corporate tax return. Specifically, an APA is an advance agreement establishing an approved transfer pricing methodology entered into among the taxpayer, the IRS, and a foreign tax authority. The IRS and the foreign tax authority generally agree to accept the results of such approved methodology. Alternatively, an APA also may be negotiated between just the taxpayer and the IRS; such an APA establishes an approved transfer pricing methodology for U.S. tax purposes. The APA program focuses on identifying the appropriate transfer pricing methodology; it does not determine a taxpayer’s tax liability. Taxpayers voluntarily participate in the program.

To resolve the transfer pricing issues, the taxpayer submits detailed and confidential financial information, business plans and projections to the IRS for consideration. Resolution involves an extensive analysis of the taxpayer’s functions and risks. Since its inception in 1991, the APA program has resolved more than 180 APAs, and approximately 195 APA requests are pending.

Currently pending in the U.S. District Court for the District of Columbia are three consolidated lawsuits asserting that APAs are subject to public disclosure under either section 6110 or the FOIA.¹⁶ Prior to this litigation and since the inception of the APA program, the IRS held the position that APAs were confidential return information protected from disclosure by section 6103.¹⁷ On January 11, 1999, the IRS conceded that APAs are “rulings” and

foregoing. 5 U.S.C. sec. 552(a)(1). All other agency records can be sought by FOIA request; however, some records may be exempt from disclosure.

¹⁴ 14. Exemption 3 of the FOIA provides that an agency is not required to disclose matters that are: “(3) specifically exempted from disclosure by statute (other than section 552b of this title) provided that such statute (A) requires that the matters be withheld from the public in such a manner as to leave no discretion on the issue, or (B) establishes particular criteria for withholding or refers to particular types of matters to be withheld; * * *”—5 U.S.C. §552(b)(3).
¹⁵ Sec. 6110(m).

¹⁶ *BNA v. IRS*, Nos. 96–376, 96–2820, and 96–1473 (D.D.C.). The Bureau of National Affairs, Inc. (BNA) publishes matters of interest for use by its subscribers. BNA contends that APAs are not return information as they are prospective in application. Thus at the time they are entered into they do not relate to “the determination of the existence, or possible existence, of liability or amount thereof * * *”

¹⁷ The IRS contended that information received or generated as part of the APA process pertains to a taxpayer’s liability and therefore was return information as defined in sec. 6103(b)(2)(A). Thus, the information was subject to section 6103’s restrictions on the dissemination of returns and return information. Rev. Proc. 91–22, sec. 11, 1991–1 C.B. 526, 534 and Rev. Proc. 96–53, sec. 12, 1996–2 C.B. 375, 386.

therefore are “written determinations” for purposes of section 6110.¹⁸ Although the court has not yet issued a ruling in the case, the IRS announced its plan to publicly release both existing and future APAs. The IRS then transmitted existing APAs to the respective taxpayers with proposed deletions. It has received comments from some of the affected taxpayers. Where appropriate, foreign tax authorities have also received copies of the relevant APAs for comment on the proposed deletions. No APAs have yet been released to the public.

Some taxpayers assert that the IRS erred in adopting the position that APAs are subject to section 6110 public disclosure. Several have sought to participate as amici in the lawsuit to block the release of APAs. They are concerned that release under section 6110 could expose them to expensive litigation to defend the deletion of the confidential information from their APAs. They are also concerned that the section 6110 procedures are insufficient to protect the confidentiality of their trade secrets and other financial and commercial information.

House Bill

No provision, but H.R. 2923, as approved by the Committee on Ways and Means, amends section 6103 to provide that APAs and related background information are confidential return information under section 6103. Related background information is meant to include: the request for an APA, any material submitted in support of the request, and any communication (written or otherwise) prepared or received by the Secretary in connection with an APA, regardless of when such communication is prepared or received. Protection is not limited to agreements actually executed; it includes material received and generated in the APA process that does not result in an executed agreement.

Further, APAs and related background information are not “written determinations” as that term is defined in section 6110. Therefore, the public inspection requirements of section 6110 do not apply to APAs and related background information. A document’s incorporation in a background file, however, is not intended to be grounds for not disclosing an otherwise disclosable document from a source other than a background file.

H.R. 2923 requires that the Treasury Department prepare and publish an annual report on the status of APAs. The annual report is to contain the following information:

- Information about the structure, composition, and operation of the APA program office;
- A copy of each current model APA;
- Statistics regarding the amount of time to complete new and renewal APAs;
- The number of APA applications filed during such year;
- The number of APAs executed to date and for the year;
- The number of APA renewals issued to date and for the year;
- The number of pending APA requests;
- The number of pending APA renewals;

¹⁸ IR 1999-05.

The number of APAs executed and pending (including renewals and renewal requests) that are unilateral, bilateral and multilateral, respectively;

The number of APAs revoked or canceled, and the number of withdrawals from the APA program, to date and for the year;

The number of finalized new APAs and renewals by industry;¹⁹ and

General descriptions of:

the nature of the relationships between the related organizations, trades, or businesses covered by APAs;

the related organizations, trades, or businesses whose prices or results are tested to determine compliance with the transfer pricing methodology prescribed in the APA;

the covered transactions and the functions performed and risks assumed by the related organizations, trades or businesses involved;

methodologies used to evaluate tested parties and transactions and the circumstances leading to the use of those methodologies;

critical assumptions;

sources of comparables;

comparable selection criteria and the rationale used in determining such criteria;

the nature of adjustments to comparables and/or tested parties;

the nature of any range agreed to, including information such as whether no range was used and why, whether an inter-quartile range was used, or whether there was a statistical narrowing of the comparables;

adjustment mechanisms provided to rectify results that fall outside of the agreed upon APA range;

the various term lengths for APAs, including rollback years, and the number of APAs with each such term length;

the nature of documentation required; and

approaches for sharing of currency or other risks.

In addition, H.R. 2923 requires the IRS to describe, in each annual report, its efforts to ensure compliance with existing APA agreements. The first report is to cover the period January 1, 1991, through the calendar year including the date of enactment. The Treasury Department cannot include any information in the report which would have been deleted under section 6110(c) if the report were a written determination as defined in section 6110. Additionally, the report cannot include any information which can be associated with or otherwise identify, directly or indirectly, a particular taxpayer. The Secretary is expected to obtain input from taxpayers to ensure proper protection of taxpayer information and, if necessary, utilize its regulatory authority to implement appropriate processes for obtaining this input. For purposes of section 6103, the report requirement is treated as part of Title 26.

¹⁹This information was previously released in IRS Publication 3218, "IRS Report on Application and Administration of I.R.C. Section 482."

While H.R. 2923 statutorily requires an annual report, it is not intended to discourage the Treasury Department from issuing other forms of guidance, such as regulations or revenue rulings, consistent with the confidentiality provisions of the Code.

Effective date.—The provision is effective on the date of enactment; accordingly, no APAs, regardless of whether executed before or after enactment, or related background file documents, can be released to the public after the date of enactment. It requires the Treasury Department to publish the first annual report no later than March 30, 2000.

Senate Amendment

No provision.

Conference Agreement

The conference agreement includes H.R. 2923.

B. Authority to Postpone Certain Tax-Related Deadlines by Reason of Year 2000 Failures

Present Law

There are no specific provisions in present law that would permit the Secretary of the Treasury to postpone tax-related deadlines by reason of Year 2000 (also known as “Y2K”) failures. The Secretary is, however, permitted to postpone tax-related deadlines for other reasons. For example, the Secretary may specify that certain deadlines are postponed for a period of up to 90 days in the case of a taxpayer determined to be affected by a Presidentially declared disaster. The deadlines that may be postponed are the same as are postponed by reason of service in a combat zone. The provision does not apply for purposes of determining interest on any overpayment or underpayment.

The suspension of time applies to the following acts: (1) filing any return of income, estate, or gift tax (except employment and withholding taxes); (2) payment of any income, estate, or gift tax (except employment and withholding taxes); (3) filing a petition with the Tax Court for a redetermination of deficiency, or for review of a decision rendered by the Tax Court; (4) allowance of a credit or refund of any tax; (5) filing a claim for credit or refund of any tax; (6) bringing suit upon any such claim for credit or refund; (7) assessment of any tax; (8) giving or making any notice or demand for payment of any tax, or with respect to any liability to the United States in respect of any tax; (9) collection of the amount of any liability in respect of any tax; (10) bringing suit by the United States in respect of any liability in respect of any tax; and (11) any other act required or permitted under the internal revenue laws specified in regulations prescribed under section 7508 by the Secretary.

House Bill

No provision, but H.R. 2923, as approved by the Committee on Ways and Means, contains a provision permitting the Secretary to postpone, on a taxpayer-by-taxpayer basis, certain tax-related deadlines for a period of up to 90 days in the case of a taxpayer

that the Secretary determines to have been affected by an actual Y2K related failure. In order to be eligible for relief, taxpayers must have made good faith, reasonable efforts to avoid any Y2K related failures. The relief will be similar to that granted under the Presidentially declared disaster and combat zone provisions, except that employment and withholding taxes also are eligible for relief. The relief will permit the abatement of both penalties and interest.

The relief may apply to the following acts: (1) filing of any return of income, estate, or gift tax, including employment and withholding taxes; (2) payment of any income, estate, or gift tax, including employment and withholding taxes; (3) filing a petition with the Tax Court; (4) allowance of a credit or refund of any tax; (5) filing a claim for credit or refund of any tax; (6) bringing suit upon any such claim for credit or refund; (7) assessment of any tax; (8) giving or making any notice or demand for payment of any tax, or with respect to any liability to the United States in respect of any tax; (9) collection of the amount of any liability in respect of any tax; (10) bringing suit by the United States in respect of any liability in respect of any tax; and (11) any other act required or permitted under the internal revenue laws specified or prescribed by the Secretary. The provision is effective on the date of enactment.

Senate Amendment

No provision.

Conference Agreement

The conference agreement includes the provision in H.R. 2923.

C. Add Certain Vaccines Against *Streptococcus Pneumoniae* to the List of Taxable Vaccines (secs. 4131 and 4132 of the Code)

Present Law

A manufacturer's excise tax is imposed at the rate of 75 cents per dose (sec. 4131) on the following vaccines recommended for routine administration to children: diphtheria, pertussis, tetanus, measles, mumps, rubella, polio, HIB (haemophilus influenza type B), hepatitis B, varicella (chicken pox), and rotavirus gastroenteritis. The tax applied to any vaccine that is a combination of vaccine components equals 75 cents times the number of components in the combined vaccine.

Amounts equal to net revenues from this excise tax are deposited in the Vaccine Injury Compensation Trust Fund ("Vaccine Trust Fund") to finance compensation awards under the Federal Vaccine Injury Compensation Program for individuals who suffer certain injuries following administration of the taxable vaccines. This program provides a substitute Federal, "no fault" insurance system for the State-law tort and private liability insurance systems otherwise applicable to vaccine manufacturers and physicians. All persons immunized after September 30, 1988, with covered vaccines must pursue compensation under this Federal program before bringing civil tort actions under State law.

House Bill

No provision. However, H.R. 2923, as approved by the Committee on Ways and Means, adds any conjugate vaccine against streptococcus pneumoniae to the list of taxable vaccines. The bill also changes an incorrect effective date enacted in Public Law 105–277 and makes certain other conforming amendments to expenditure purposes to enable certain payments to be made from the Trust Fund.

In addition, the bill directs the General Accounting Office (“GAO”) to report to the House Committee on Ways and Means and the Senate Committee on Finance on the operation and management of expenditures from the Vaccine Trust Fund and to advise the Committees on the adequacy of the Vaccine Trust Fund to meet future claims under the Federal Vaccine Injury Compensation Program. The GAO is directed to report its findings to the House Committee on Ways and Means and the Senate Committee on Finance not later than December 31, 1999.

Effective date.—The provision is effective for vaccine purchases beginning on the day after the date on which the Centers for Disease Control make final recommendation for routine administration of conjugated streptococcus pneumoniae vaccines to children.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, contains a provision identical to that of H.R. 2923 except that S. 1792 directs the GAO to report its findings to the House Committee on Ways and Means and the Senate Committee on Finance by January 31, 2000.

Effective date.—The provision is effective for vaccine purchases beginning on the day after the date on which the Centers for Disease Control make final recommendation for routine administration of conjugated streptococcus pneumoniae vaccines to children. The addition of conjugate streptococcus pneumoniae vaccines to the list of taxable vaccines is contingent upon the inclusion in this legislation of the modifications to Public Law 105–277.

Conference Agreement

The conference agreement includes the provision of H.R. 2923 and S. 1792 in adding any conjugate vaccine against streptococcus pneumoniae to the list of taxable vaccines. In addition, the conference agreement follows H.R. 2923 and S. 1792 by changing the effective date enacted in Public Law 105–277 and certain other conforming amendments to expenditure purposes to enable certain payments to be made from the Trust Fund.

The conference report follows S. 1792 by directing that the GAO report its findings to the House Committee on Ways and Means and the Senate Committee on Finance not later than January 31, 2000.

Effective date.—The provision is effective for vaccine sales beginning on the day after the date of enactment. No floor stocks tax is to be collected for amounts held for sale on that date. For sales on or before that date for which delivery is made after such date, the delivery date is deemed to be the sale date. The addition of con-

jugate streptococcus pneumoniae vaccines to the list of taxable vaccines is contingent upon the inclusion in this legislation of the modifications to Public Law 105-277.

D. Delay Requirement that Registered Motor Fuels Terminals Offer Dyed Fuel as a Condition of Registration (sec. 4121 of the Code)

Present Law

Excise taxes are imposed on highway motor fuels, including gasoline, diesel fuel, and kerosene, to finance the Highway Trust Fund programs. Subject to limited exceptions, these taxes are imposed on all such fuels when they are removed from registered pipeline or barge terminal facilities, with any tax-exemptions being accomplished by means of refunds to consumers of the fuel.²⁰ One such exception allows removal of diesel fuel without payment of tax if the fuel is destined for a nontaxable use (e.g., use as heating oil) and is indelibly dyed.

Terminal facilities are not permitted to receive and store non-tax-paid motor fuels unless they are registered with the Internal Revenue Service. Under present law, a prerequisite to registration is that if the terminal offers for sale diesel fuel, it must offer both dyed and undyed diesel fuel. Similarly, if the terminal offers for sale kerosene, it must offer both dyed and undyed kerosene. This "dyed-fuel mandate" was enacted in 1997, to be effective on July 1, 1998. Subsequently, the effective date was delayed until July 1, 2000.

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, delays the effective date of the dyed-fuel mandate for an additional six months, through December 31, 2000. No other changes are made to the present highway motor fuels excise tax rules.

Conference Agreement

The conference agreement includes S. 1792 with a modification delaying the effective date of the dyeing mandate until January 1, 2002.

E. Provide That Federal Production Payments to Farmers Are Taxable in the Year Received

Present Law

A taxpayer generally is required to include an item in income no later than the time of its actual or constructive receipt, unless such amount properly is accounted for in a different period under

²⁰Tax is imposed before that point if the motor fuel is transferred (other than in bulk) from a refinery or if the fuel is sold to an unregistered party while still held in the refinery or bulk distribution system (e.g., in a pipeline or terminal facility).

the taxpayer's method of accounting. If a taxpayer has an unrestricted right to demand the payment of an amount, the taxpayer is in constructive receipt of that amount whether or not the taxpayer makes the demand and actually receives the payment.

The Federal Agriculture Improvement and Reform Act of 1996 (the "FAIR Act") provides for production flexibility contracts between certain eligible owners and producers and the Secretary of Agriculture. These contracts generally cover crop years from 1996 through 2002. Annual payments are made under such contracts at specific times during the Federal government's fiscal year. Section 112(d)(2) of the FAIR Act provides that one-half of each annual payment is to be made on either December 15 or January 15 of the fiscal year, at the option of the recipient.²¹ The remaining one-half of the annual payment must be made no later than September 30 of the fiscal year. The Emergency Farm Financial Relief Act of 1998 added section 112(d)(3) to the FAIR Act which provides that all payments for fiscal year 1999 are to be paid at such time or times during fiscal year 1999 as the recipient may specify. Thus, the one-half of the annual amount that would otherwise be required to be paid no later than September 30, 1999 can be specified for payment in calendar year 1998.

These options potentially would have resulted in the constructive receipt (and thus inclusion in income) of the payments to which they relate at the time they could have been exercised, whether or not they were in fact exercised. However, section 2012 of the Tax and Trade Relief Extension Act of 1998 provided that the time a production flexibility contract payment under the FAIR Act properly is includible in income is to be determined without regard to either option, effective for production flexibility contract payments made under the FAIR Act in taxable years ending after December 31, 1995.

House Bill

No provision. However, the conference agreement to H.R. 2488 includes a provision to disregard any unexercised option to accelerate the receipt of any payment under a production flexibility contract which is payable under the FAIR Act, as in effect on the date of enactment of the provision, in determining the taxable year in which such payment is properly included in gross income. Options to accelerate payments that are enacted in the future are covered by this rule, providing the payment to which they relate is mandated by the FAIR Act as in effect on the date of enactment of this Act.

The provision in H.R. 2488 does not delay the inclusion of any amount in gross income beyond the taxable period in which the amount is received.

Effective date.—The provision in H.R. 2488 is effective on the date of enactment.

Senate Amendment

No provision.

²¹This rule applies to fiscal years after 1996. For fiscal year 1996, this payment was to be made not later than 30 days after the production flexibility contract was entered into.

Conference Agreement

The conference agreement includes the provision in the conference agreement to H.R. 2488.

III. REVENUE OFFSET PROVISIONS

A. Modification of Individual Estimated Tax Safe Harbor (sec. 6654 of the Code)

Present Law

Under present law, an individual taxpayer generally is subject to an addition to tax for any underpayment of estimated tax. An individual generally does not have an underpayment of estimated tax if he or she makes timely estimated tax payments at least equal to: (1) 90 percent of the tax shown on the current year's return or (2) 100 percent of the prior year's tax. For taxpayers with a prior year's AGI above \$150,000,²² however, the rule that allows payment of 100 percent of prior year's tax is modified. Those taxpayers with AGI above \$150,000 generally must make estimated payments based on either (1) 90 percent of the tax shown on the current year's return or (2) 110 percent of the prior year's tax.

For taxpayers with a prior year's AGI above \$150,000, the prior year's tax safe harbor is modified for estimated tax payments made for taxable years through 2002. For such taxpayers making estimated tax payments based on prior year's tax, payments must be made based on 105 percent of prior year's tax for taxable years beginning in 1999, 106 percent of prior year's tax for taxable years beginning in 2000 and 2001, and 112 percent of prior year's tax for taxable years beginning in 2002.

House Bill

No provision, however H.R. 2923, as approved by the Committee on Ways and Means, provides that taxpayers with prior year's AGI above \$150,000 who make estimated tax payments based on prior year's tax must do so based on 108.5 percent of prior year's tax for estimated tax payments made for taxable year 2000.

Effective date.—The provision is effective for estimated payments made for taxable years beginning after December 31, 1999, and before January 1, 2001.

Senate Amendment

No provision, however, S. 1792, as passed by the Senate, provides that for taxable years taxpayers with prior year's AGI above \$150,000 who make estimated tax payments based on prior year's tax must do so based on 110.5 percent of prior year's tax for estimated tax payment made for taxable year 2000. Taxpayers with prior year's AGI above \$150,000 who made estimated tax payments based on prior year's tax must do so based on 112 percent of prior year's tax for estimated tax payments made for taxable year 2004.

Effective date.—The provision is effective for estimated payments made for taxable years beginning after December 31, 1999,

²²\$75,000 for married taxpayers filing separately.

and before January 1, 2001 and for estimated tax payments made for taxable years beginning after December 31, 2003, and before January 1, 2005.

Conference Agreement

The conference agreement includes the provision in H.R. 2923 and the provision in S. 1792 with modifications. Taxpayers with prior year's AGI above \$150,000 who make estimated tax payments based on prior year's tax must do so based on 108.6 percent of prior year's tax for estimated tax payments made for taxable year 2000. Taxpayers with prior year's AGI above \$150,000 who make estimated tax payments based on prior year's tax must do so based on 110 percent of prior year's tax for estimated tax payments made for taxable year 2001. The modified safe harbor percentage is not changed for estimated tax payments made for any taxable years other than 2000 and 2001.

Effective date.—The provision is effective for estimated tax payments made for taxable years beginning after December 31, 1999, and before January 1, 2002.

B. Clarify the Tax Treatment of Income and Losses on Derivatives (sec. 1221 of the Code)

Present Law

Capital gain treatment applies to gain on the sale or exchange of a capital asset. Capital assets include property other than (1) stock in trade or other types of assets includible in inventory, (2) property used in a trade or business that is real property or property subject to depreciation, (3) accounts or notes receivable acquired in the ordinary course of a trade or business, (4) certain copyrights (or similar property), and (5) U.S. government publications. Gain or loss on such assets generally is treated as ordinary, rather than capital, gain or loss. Certain other Code sections also treat gains or losses as ordinary. For example, the gains or losses of securities dealers or certain electing commodities dealers or electing traders in securities or commodities that are subject to "mark-to-market" accounting are treated as ordinary (sec. 475).

Treasury regulations (which were finalized in 1994) require ordinary character treatment for most business hedges and provide timing rules requiring that gains or losses on hedging transactions be taken into account in a manner that matches the income or loss from the hedged item or items. The regulations apply to hedges that meet a standard of "risk reduction" with respect to ordinary property held (or to be held) or certain liabilities incurred (or to be incurred) by the taxpayer and that meet certain identification and other requirements (Treas. Reg. sec. 1.1221-2).

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, adds three categories to the list of assets the gain or loss on which is treated

as ordinary (sec. 1221). The new categories are: (1) commodities derivative financial instruments held by commodities derivatives dealers; (2) hedging transactions; and (3) supplies of a type regularly consumed by the taxpayer in the ordinary course of a taxpayer's trade or business. In defining a hedging transaction, S. 1792 generally codifies the approach taken by the Treasury regulations, but modifies the rules. The "risk reduction" standard of the regulations is broadened to "risk management" with respect to ordinary property held (or to be held) or certain liabilities incurred (or to be incurred), and S. 1792 provides that the definition of a hedging transaction includes a transaction entered into primarily to manage such other risks as the Secretary may prescribe in regulations.

Effective date.—The provision in S. 1792 is effective for any instrument held, acquired or entered into, any transaction entered into, and supplies held or acquired on or after the date of enactment.

Conference Agreement

The conference agreement includes the provision in S. 1792.

C. Expand Reporting of Cancellation of Indebtedness Income (sec. 6050P of the Code)

Present Law

Under section 61(a)(12), a taxpayer's gross income includes income from the discharge of indebtedness. Section 6050P requires "applicable entities" to file information returns with the Internal Revenue Service (IRS) regarding any discharge of indebtedness of \$600 or more.

The information return must set forth the name, address, and taxpayer identification number of the person whose debt was discharged, the amount of debt discharged, the date on which the debt was discharged, and any other information that the IRS requires to be provided. The information return must be filed in the manner and at the time specified by the IRS. The same information also must be provided to the person whose debt is discharged by January 31 of the year following the discharge.

"Applicable entities" include: (1) the Federal Deposit Insurance Corporation (FDIC), the Resolution Trust Corporation (RTC), the National Credit Union Administration, and any successor or subunit of any of them; (2) any financial institution (as described in sec. 581 (relating to banks) or sec. 591(a) (relating to savings institutions)); (3) any credit union; (4) any corporation that is a direct or indirect subsidiary of an entity described in (2) or (3) which, by virtue of being affiliated with such entity, is subject to supervision and examination by a Federal or State agency regulating such entities; and (5) an executive, judicial, or legislative agency (as defined in 31 U.S.C. sec. 3701(a)(4)).

Failures to file correct information returns with the IRS or to furnish statements to taxpayers with respect to these discharges of indebtedness are subject to the same general penalty that is imposed with respect to failures to provide other types of information

returns. Accordingly, the penalty for failure to furnish statements to taxpayers is generally \$50 per failure, subject to a maximum of \$100,000 for any calendar year. These penalties are not applicable if the failure is due to reasonable cause and not to willful neglect.

House Bill

No provision.

Senate Amendment

No provision, but S.1792, as passed by the Senate, requires information reporting on indebtedness discharged by any organization a significant trade or business of which is the lending of money (such as finance companies and credit card companies whether or not affiliated with financial institutions).

Effective date.—The provision is effective with respect to discharges of indebtedness after December 31, 1999.

Conference Agreement

The conference agreement includes the provision in S. 1792.

D. Limit Conversion of Character of Income From Constructive Ownership Transactions (new sec. 1260 of the Code)

Present Law

The maximum individual income tax rate on ordinary income and short-term capital gain is 39.6 percent, while the maximum individual income tax rate on long-term capital gain generally is 20 percent. Long-term capital gain means gain from the sale or exchange of a capital asset held more than one year. For this purpose, gain from the termination of a right with respect to property which would be a capital asset in the hands of the taxpayer is treated as capital gain.²³

A pass-thru entity (such as a partnership) generally is not subject to Federal income tax. Rather, each owner includes its share of a pass-thru entity's income, gain, loss, deduction or credit in its taxable income. Generally, the character of the item is determined at the entity level and flows through to the owners. Thus, for example, the treatment of an item of income by a partnership as ordinary income, short-term capital gain, or long-term capital gain retains its character when reported by each of the partners.

Investors may enter into forward contracts, notional principal contracts, and other similar arrangements with respect to property that provides the investor with the same or similar economic benefits as owning the property directly but with potentially different tax consequences (as to the character and timing of any gain).

House Bill

No provision.

²³Section 1234A, as amended by the Taxpayer Relief Act of 1997.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, includes a provision that limits the amount of long-term capital gain a taxpayer could recognize from certain derivative contracts (“constructive ownership transactions”) with respect to certain financial assets. The amount of long-term capital gain is limited to the amount of such gain the taxpayer would have recognized if the taxpayer held the financial asset directly during the term of the derivative contract. Any gain in excess of this amount is treated as ordinary income. An interest charge is imposed on the amount of gain that is treated as ordinary income. The provision does not alter the tax treatment of the long-term capital gain that is not treated as ordinary income.

A taxpayer is treated as having entered into a constructive ownership transaction if the taxpayer (1) holds a long position under a notional principal contract with respect to the financial asset, (2) enters into a forward contract to acquire the financial asset, (3) is the holder of a call option, and the grantor of a put option, with respect to a financial asset, and the options have substantially equal strike prices and substantially contemporaneous maturity dates, or (4) to the extent provided in regulations, enters into one or more transactions, or acquires one or more other positions, that have substantially the same effect as any of the transactions described. Treasury regulations, when issued, are expected to provide specific standards for determining when other types of financial transactions, like those specified in the provision, have substantially the same effect of replicating the economic benefits of direct ownership of a financial asset without a significant change in the risk-reward profile with respect to the underlying transaction.²⁴

A “financial asset” is defined as (1) any equity interest in a pass-thru entity, and (2) to the extent provided in regulations, any debt instrument and any stock in a corporation that is not a pass-thru entity. A “pass-thru entity” refers to (1) a regulated investment company, (2) a real estate investment trust, (3) a real estate mortgage investment conduit, (4) an S corporation, (5) a partnership, (6) a trust, (7) a common trust fund, (8) a passive foreign investment company,²⁵ (9) a foreign personal holding company, and (10) a foreign investment company.

The amount of recharacterized gain is calculated as the excess of the amount of long-term capital gain the taxpayer would have had absent this provision over the “net underlying long-term capital gain” attributable to the financial asset. The net underlying long-term capital gain is the amount of net capital gain the taxpayer would have realized if it had acquired the financial asset for its fair market value on the date the constructive ownership transaction was opened and sold the financial asset on the date the transaction was closed (only taking into account gains and losses that would have resulted from a deemed ownership of the financial

²⁴It is not expected that leverage in a constructive ownership transaction would change the risk-reward profile with respect to the underlying transaction.

²⁵For this purpose, a passive foreign investment company includes an investment company that is also a controlled foreign corporation.

asset).²⁶ The long-term capital gains rate on the net underlying long-term capital gain is determined by reference to the individual capital gains rates in section 1(h).

Example 1: On January 1, 2000, Taxpayer enters into a three-year notional principal contract (a constructive ownership transaction) with a securities dealer whereby, on the settlement date, the dealer agrees to pay Taxpayer the amount of any increase in the notional value of an interest in an investment partnership (the financial asset). After three years, the value of the notional principal contract increased by \$200,000, of which \$150,000 is attributable to ordinary income and net short-term capital gain (\$50,000 is attributable to net long-term capital gains). The amount of the net underlying long-term capital gains is \$50,000, and the amount of gain that is recharacterized as ordinary income is \$150,000 (the excess of \$200,000 of long-term gain over the \$50,000 of net underlying long-term capital gain).

An interest charge is imposed on the underpayment of tax for each year that the constructive ownership transaction was open. The interest charge is the amount of interest that would be imposed under section 6601 had the recharacterized gain been included in the taxpayer's gross income during the term of the constructive ownership transaction. The recharacterized gain is treated as having accrued such that the gain in each successive year is equal to the gain in the prior year increased by a constant growth rate²⁷ during the term of the constructive ownership transaction.

Example 2: Same facts as in example 1, and assume the applicable Federal rate on December 31, 2002, is six percent. For purposes of calculating the interest charge, Taxpayer must allocate the \$150,000 of recharacterized ordinary income to the three year-term of the constructive ownership transaction as follows: \$47,116.47 is allocated to year 2000, \$49,943.46 is allocated to year 2001, and \$52,940.07 is allocated to year 2002.

A taxpayer is treated as holding a long position under a notional principal contract with respect to a financial asset if the person (1) has the right to be paid (or receive credit for) all or substantially all of the investment yield (including appreciation) on the financial asset for a specified period, and (2) is obligated to reimburse (or provide credit) for all or substantially all of any decline in the value of the financial asset. A forward contract is a contract to acquire in the future (or provide or receive credit for the future value of) any financial asset.

If the constructive ownership transaction is closed by reason of taking delivery of the underlying financial asset, the taxpayer is treated as having sold the contract, option, or other position that is part of the transaction for its fair market value on the closing date. However, the amount of gain that is recognized as a result of having taken delivery is limited to the amount of gain that is treated as ordinary income by reason of this provision (with appropriate basis adjustments for such gain).

²⁶A taxpayer must establish the amount of the net underlying long-term capital gain with clear and convincing evidence; otherwise, the amount is deemed to be zero. To the extent that the economic positions of the taxpayer and the counterparty do not equally offset each other, the amount of the net underlying long-term capital gain may be difficult to establish.

²⁷The accrual rate is the applicable Federal rate on the day the transaction closed.

The provision does not apply to any constructive ownership transaction if all of the positions that are part of the transaction are marked to market under the Code or regulations. The Treasury Department is authorized to prescribe regulations as necessary to carry out the purposes of the provision, including to (1) permit taxpayers to mark to market constructive ownership transactions in lieu of the provision, and (2) exclude certain forward contracts that do not convey substantially all of the economic return with respect to a financial asset.

No inference is intended as to the proper treatment of a constructive ownership transaction entered into prior to the effective date of this provision.

Effective date.—The provision applies to transactions entered into on or after July 12, 1999. For this purpose, a contract, option or any other arrangement that is entered into or exercised on or after July 12, 1999, which extends or otherwise modifies the terms of a transaction entered into prior to such date is treated as a transaction entered into on or after July 12, 1999.

Conference Agreement

The conference agreement includes the provision in S. 1792 with a clarification regarding the effective date. The provision applies to transactions entered into on or after July 12, 1999. For this purpose, it is expected that a contract, option or any other arrangement that is entered into or exercised on or after July 12, 1999, which extends or otherwise modifies the terms of a transaction entered into prior to such date will be treated as a transaction entered into on or after July 12, 1999, unless a party to the transaction other than the taxpayer has, as of July 12, 1999, the exclusive right to extend the terms of the transaction, and the length of such extension does not exceed the first business day following a period of five years from the original termination date under the transaction.

E. Treatment of Excess Pension Assets Used for Retiree Health Benefits (sec. 420 of the Code, and secs. 101, 403, and 408 of ERISA)

Present Law

Defined benefit pension plan assets generally may not revert to an employer prior to the termination of the plan and the satisfaction of all plan liabilities. A reversion prior to plan termination may constitute a prohibited transaction and may result in disqualification of the plan. Certain limitations and procedural requirements apply to a reversion upon plan termination. Any assets that revert to the employer upon plan termination are includible in the gross income of the employer and subject to an excise tax. The excise tax rate, which may be as high as 50 percent of the reversion, varies depending upon whether or not the employer maintains a replacement plan or makes certain benefit increases. Upon plan termination, the accrued benefits of all plan participants are required to be 100-percent vested.

A pension plan may provide medical benefits to retired employees through a section 401(h) account that is a part of such plan. A qualified transfer of excess assets of a defined benefit pension plan (other than a multiemployer plan) into a section 401(h) account that is a part of such plan does not result in plan disqualification and is not treated as a reversion to the employer or a prohibited transaction. Therefore, the transferred assets are not includible in the gross income of the employer and are not subject to the excise tax on reversions.

Qualified transfers are subject to amount and frequency limitations, use requirements, deduction limitations, vesting requirements and minimum benefit requirements. Excess assets transferred in a qualified transfer may not exceed the amount reasonably estimated to be the amount that the employer will pay out of such account during the taxable year of the transfer for qualified current retiree health liabilities. No more than one qualified transfer with respect to any plan may occur in any taxable year.

The transferred assets (and any income thereon) must be used to pay qualified current retiree health liabilities (either directly or through reimbursement) for the taxable year of the transfer. Transferred amounts generally must benefit all pension plan participants, other than key employees, who are entitled upon retirement to receive retiree medical benefits through the section 401(h) account. Retiree health benefits of key employees may not be paid (directly or indirectly) out of transferred assets. Amounts not used to pay qualified current retiree health liabilities for the taxable year of the transfer are to be returned at the end of the taxable year to the general assets of the plan. These amounts are not includible in the gross income of the employer, but are treated as an employer reversion and are subject to a 20-percent excise tax.

No deduction is allowed for (1) a qualified transfer of excess pension assets into a section 401(h) account, (2) the payment of qualified current retiree health liabilities out of transferred assets (and any income thereon) or (3) a return of amounts not used to pay qualified current retiree health liabilities to the general assets of the pension plan.

In order for the transfer to be qualified, accrued retirement benefits under the pension plan generally must be 100-percent vested as if the plan terminated immediately before the transfer.

The minimum benefit requirement requires each group health plan under which applicable health benefits are provided to provide substantially the same level of applicable health benefits for the taxable year of the transfer and the following 4 taxable years. The level of benefits that must be maintained is based on benefits provided in the year immediately preceding the taxable year of the transfer. Applicable health benefits are health benefits or coverage that are provided to (1) retirees who, immediately before the transfer, are entitled to receive such benefits upon retirement and who are entitled to pension benefits under the plan and (2) the spouses and dependents of such retirees.

The provision permitting a qualified transfer of excess pension assets to pay qualified current retiree health liabilities expires for taxable years beginning after December 31, 2000.²⁸

House Bill

No provision.

Senate Amendment

No provision. However, S. 1792, as passed by the Senate, extends the present-law provision permitting qualified transfers of excess defined benefit pension plan assets to provide retiree health benefits under a section 401(h) account through September 30, 2009.²⁹ In addition, the present-law minimum benefit requirement is replaced by the minimum cost requirement that applied to qualified transfers before December 9, 1994, to section 401(h) accounts. Therefore, each group health plan or arrangement under which applicable health benefits are provided is required to provide a minimum dollar level of retiree health expenditures for the taxable year of the transfer and the following 4 taxable years. The minimum dollar level is the higher of the applicable employer costs for each of the 2 taxable years immediately preceding the taxable year of the transfer. The applicable employer cost for a taxable year is determined by dividing the employer's qualified current retiree health liabilities by the number of individuals to whom coverage for applicable health benefits was provided during the taxable year.

Effective date.—S. 1792, as passed by the Senate, is effective with respect to qualified transfers of excess defined benefit pension plan assets to section 401(h) accounts after December 31, 2000, and before October 1, 2009. The modification of the minimum benefit requirement is effective with respect to transfers after the date of enactment. In addition, S. 1792 contains a transition rule regarding the minimum cost requirement. Under this rule, an employer must satisfy the minimum benefit requirement with respect to a qualified transfer that occurs after the date of enactment during the portion of the cost maintenance period of such transfer that overlaps the benefit maintenance period of a qualified transfer that occurs on or before the date of enactment. For example, suppose an employer (with a calendar year taxable year) made a qualified transfer in 1998. The minimum benefit requirement must be satisfied for calendar years 1998, 1999, 2000, 2001, and 2002. Suppose the employer also makes a qualified transfer in 2000. Then, the employer is required to satisfy the minimum benefit requirement in 2000, 2001, and 2002, and is required to satisfy the minimum cost requirement in 2003 and 2004.

²⁸Title I of the Employee Retirement Income Security Act of 1974, as amended ("ERISA"), provides that plan participants, the Secretaries of Treasury and the Department of Labor, the plan administrator, and each employee organization representing plan participants must be notified 60 days before a qualified transfer of excess assets to a retiree health benefits account occurs (ERISA sec. 103(e)). ERISA also provides that a qualified transfer is not a prohibited transaction under ERISA (ERISA sec. 408(b)(13)) or a prohibited reversion of assets to the employer (ERISA sec. 403(c)(1)). For purposes of these provisions, a qualified transfer is generally defined as a transfer pursuant to section 420 of the Internal Revenue Code, as in effect on January 1, 1995.

²⁹S. 1792 modifies the corresponding provisions of ERISA.

Conference Agreement

The conference agreement extends the present-law provision permitting qualified transfers of excess defined benefit pension plan assets to provide retiree health benefits under a section 401(h) account through December 31, 2005.³⁰ The modification of the minimum benefit requirement is effective with respect to transfers after the date of enactment. The Secretary of the Treasury is directed to prescribe such regulations as may be necessary to prevent an employer who significantly reduces retiree health coverage during the cost maintenance period from being treated as satisfying the minimum cost requirement. In addition, the conference agreement contains a transition rule regarding the minimum cost requirement. Under this rule, an employer must satisfy the minimum benefit requirement with respect to a qualified transfer that occurs after the date of enactment during the portion of the cost maintenance period of such transfer that overlaps the benefit maintenance period of a qualified transfer that occurs on or before the date of enactment. For example, suppose an employer (with a calendar year taxable year) made a qualified transfer in 1998. The minimum benefit requirement must be satisfied for calendar years 1998, 1999, 2000, 2001, and 2002. Suppose the employer also makes a qualified transfer in 2000. Then, the employer is required to satisfy the minimum benefit requirement in 2000, 2001, and 2002, and is required to satisfy the minimum cost requirement in 2003 and 2004.

Effective date.—The conference agreement is effective with respect to qualified transfers of excess defined benefit pension plan assets to section 401(h) accounts after December 31, 2000, and before January 1, 2006. The modification of the minimum benefit requirement is effective with respect to transfers after the date of enactment. In addition, the conference agreement contains a transition rule regarding the minimum cost requirement. Under this rule, an employer must satisfy the minimum benefit requirement with respect to a qualified transfer that occurs after the date of enactment during the portion of the cost maintenance period of such transfer that overlaps the benefit maintenance period of a qualified transfer that occurs on or before the date of enactment. For example, suppose an employer (with a calendar year taxable year) made a qualified transfer in 1998. The minimum benefit requirement must be satisfied for calendar years 1998, 1999, 2000, 2001, and 2002. Suppose the employer also makes a qualified transfer in 2000. Then, the employer is required to satisfy the minimum benefit requirement in 2000, 2001, and 2002, and is required to satisfy the minimum cost requirement in 2003 and 2004.

³⁰The conference agreement modifies the corresponding provisions of ERISA.

F. Modify Installment Method and Prohibit its Use by Accrual Method Taxpayers (sections 453 and 453A of the Code)

Present Law

An accrual method taxpayer is generally required to recognize income when all the events have occurred that fix the right to the receipt of the income and the amount of the income can be determined with reasonable accuracy. The installment method of accounting provides an exception to this general principle of income recognition by allowing a taxpayer to defer the recognition of income from the disposition of certain property until payment is received. Sales to customers in the ordinary course of business are not eligible for the installment method, except for sales of property that is used or produced in the trade or business of farming and sales of timeshares and residential lots if an election to pay interest under section 453(1)(2)(B) is made.

A pledge rule provides that if an installment obligation is pledged as security for any indebtedness, the net proceeds³¹ of such indebtedness are treated as a payment on the obligation, triggering the recognition of income. Actual payments received on the installment obligation subsequent to the receipt of the loan proceeds are not taken into account until such subsequent payments exceed the loan proceeds that were treated as payments. The pledge rule does not apply to sales of property used or produced in the trade or business of farming, to sales of timeshares and residential lots where the taxpayer elects to pay interest under section 453(1)(2)(B), or to dispositions where the sales price does not exceed \$150,000.

An additional rule requires the payment of interest on the deferred tax that is attributable to most large installment sales.

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, generally prohibits the use of the installment method of accounting for dispositions of property that would otherwise be reported for Federal income tax purposes using an accrual method of accounting and modifies the installment sale pledge rule to provide that entering into any arrangement that gives the taxpayer the right to satisfy an obligation with an installment note will be treated in the same manner as the direct pledge of the installment note.

Prohibition on the use of the installment method for accrual method dispositions

S. 1792 generally prohibits the use of the installment method of accounting for dispositions of property that would otherwise be reported for Federal income tax purposes using an accrual method

³¹The net proceeds equal the gross loan proceeds less the direct expenses of obtaining the loan.

of accounting. The provision does not change present law regarding the availability of the installment method for dispositions of property used or produced in the trade or business of farming. The provision also does not change present law regarding the availability of the installment method for dispositions of timeshares or residential lots if the taxpayer elects to pay interest under section 453(1).

The provision does not change the ability of a cash method taxpayer to use the installment method. For example, a cash method individual owns all of the stock of a closely held accrual method corporation. This individual sells his stock for cash, a ten year note, and a percentage of the gross revenues of the company for next ten years. The provision does not change the ability of this individual to use the installment method in reporting the gain on the sale of the stock.

Modifications to the pledge rule

S. 1792 modifies the pledge rule to provide that entering into any arrangement that gives the taxpayer the right to satisfy an obligation with an installment note will be treated in the same manner as the direct pledge of the installment note. For example, a taxpayer disposes of property for an installment note. The disposition is properly reported using the installment method. The taxpayer only recognizes gain as it receives the deferred payment. However, were the taxpayer to pledge the installment note as security for a loan, it would be required to treat the proceeds of such loan as a payment on the installment note, and recognize the appropriate amount of gain. Under the provision, the taxpayer would also be required to treat the proceeds of a loan as payment on the installment note to the extent the taxpayer had the right to “put” or repay the loan by transferring the installment note to the taxpayer’s creditor. Other arrangements that have a similar effect would be treated in the same manner.

The modification of the pledge rule applies only to installment sales where the pledge rule of present law applies. Accordingly, the provision does not apply to (1) installment method sales made by a dealer in timeshares and residential lots where the taxpayer elects to pay interest under section 453(1)(2)(B), (2) sales of property used or produced in the trade or business of farming, or (3) dispositions where the sales price does not exceed \$150,000, since such sales are not subject to the pledge rule under present law.

Effective date.—The provision is effective for sales or other dispositions entered into on or after the date of enactment.

Conference Agreement

The conference agreement includes the provision in S. 1792.

G. Denial of Charitable Contribution Deduction for Transfers Associated with Split-dollar Insurance Arrangements (new sec. 501(c)(28) of the Code)

Present Law

Under present law, in computing taxable income, a taxpayer who itemizes deductions generally is allowed to deduct charitable

contributions paid during the taxable year. The amount of the deduction allowable for a taxable year with respect to any charitable contribution depends on the type of property contributed, the type of organization to which the property is contributed, and the income of the taxpayer (secs. 170(b) and 170(e)). A charitable contribution is defined to mean a contribution or gift to or for the use of a charitable organization or certain other entities (sec. 170(c)). The term “contribution or gift” is not defined by statute, but generally is interpreted to mean a voluntary transfer of money or other property without receipt of adequate consideration and with donative intent. If a taxpayer receives or expects to receive a quid pro quo in exchange for a transfer to charity, the taxpayer may be able to deduct the excess of the amount transferred over the fair market value of any benefit received in return, provided the excess payment is made with the intention of making a gift.³²

In general, no charitable contribution deduction is allowed for a transfer to charity of less than the taxpayer’s entire interest (i.e., a partial interest) in any property (sec. 170(f)(3)). In addition, no deduction is allowed for any contribution of \$250 or more unless the taxpayer obtains a contemporaneous written acknowledgment from the donee organization that includes a description and good faith estimate of the value of any goods or services provided by the donee organization to the taxpayer in consideration, whole or part, for the taxpayer’s contribution (sec. 170(f)(8)).

House Bill

No provision.

Senate Amendment

Deduction denial

No provision. However, S. 1792, as passed by the Senate, contains a provision³³ that restates present law to provide that no charitable contribution deduction is allowed for purposes of Federal tax, for a transfer to or for the use of an organization described in section 170(c) of the Internal Revenue Code, if in connection with the transfer (1) the organization directly or indirectly pays, or has previously paid, any premium on any “personal benefit contract” with respect to the transferor, or (2) there is an understanding or expectation that any person will directly or indirectly pay any premium on any “personal benefit contract” with respect to the transferor. It is intended that an organization be considered as indirectly paying premiums if, for example, another person pays premiums on its behalf.

A personal benefit contract with respect to the transferor is any life insurance, annuity, or endowment contract, if any direct or indirect beneficiary under the contract is the transferor, any member of the transferor’s family, or any other person (other than a section 170(c) organization) designated by the transferor. For example, such a beneficiary would include a trust having a direct or indirect

³² *United States v. American Bar Endowment*, 477 U.S. 105 (1986). Treas. Reg. sec. 1.170A-1(h).

³³ The provision is similar to H.R. 630, introduced by Mr. Archer and Mr. Rangel (106th Cong., 1st Sess.).

beneficiary who is the transferor or any member of the transferor's family, and would include an entity that is controlled by the transferor or any member of the transferor's family. It is intended that a beneficiary under the contract include any beneficiary under any side agreement relating to the contract. If a transferor contributes a life insurance contract to a section 170(c) organization and designates one or more section 170(c) organizations as the sole beneficiaries under the contract, generally, it is not intended that the deduction denial rule under the provision apply. If, however, there is an outstanding loan under the contract upon the transfer of the contract, then the transferor is considered as a beneficiary. The fact that a contract also has other direct or indirect beneficiaries (persons who are not the transferor or a family member, or designated by the transferor) does not prevent it from being a personal benefit contract. The provision is not intended to affect situations in which an organization pays premiums under a legitimate fringe benefit plan for employees.

It is intended that a person be considered as an indirect beneficiary under a contract if, for example, the person receives or will receive any economic benefit as a result of amounts paid under or with respect to the contract. For this purpose, as described below, an indirect beneficiary is not intended to include a person that benefits exclusively under a bona fide charitable gift annuity (within the meaning of sec. 501(m)).

In the case of a charitable gift annuity, if the charitable organization purchases an annuity contract issued by an insurance company to fund its obligation to pay the charitable gift annuity, a person receiving payments under the charitable gift annuity is not treated as an indirect beneficiary, provided certain requirements are met. The requirements are that (1) the charitable organization possess all of the incidents of ownership (within the meaning of Treas. Reg. sec. 20.2042-1(c)) under the annuity contract purchased by the charitable organization; (2) the charitable organization be entitled to all the payments under the contract; and (3) the timing and amount of payments under the contract be substantially the same as the timing and amount of payments to each person under the organization's obligation under the charitable gift annuity (as in effect at the time of the transfer to the charitable organization).

Under the provision, an individual's family consists of the individual's grandparents, the grandparents of the individual's spouse, the lineal descendants of such grandparents, and any spouse of such a lineal descendant.

In the case of a charitable gift annuity obligation that is issued under the laws of a State that requires, in order for the charitable gift annuity to be exempt from insurance regulation by that State, that each beneficiary under the charitable gift annuity be named as a beneficiary under an annuity contract issued by an insurance company authorized to transact business in that State, then the foregoing requirements (1) and (2) are treated as if they are met, provided that certain additional requirements are met. The additional requirements are that the State law requirement was in effect on February 8, 1999, each beneficiary under the charitable gift annuity is a bona fide resident of the State at the time the chari-

table gift annuity was issued, the only persons entitled to payments under the annuity contract issued by the insurance company are persons entitled to payments under the charitable gift annuity when it was issued, and (as required by clause (iii) of subparagraph (D) of the provision) the timing and amount of payments under the annuity contract to each person are substantially the same as the timing and amount of payments to the person under the charitable gift annuity (as in effect at the time of the transfer to the charitable organization).

In the case of a charitable remainder annuity trust or charitable remainder unitrust (as defined in section 664(d)) that holds a life insurance, endowment or annuity contract issued by an insurance company, a person is not treated as an indirect beneficiary under the contract held by the trust, solely by reason of being a recipient of an annuity or unitrust amount paid by the trust, provided that the trust possesses all of the incidents of ownership under the contract and is entitled to all the payments under such contract. No inference is intended as to the applicability of other provisions of the Code with respect to the acquisition by the trust of a life insurance, endowment or annuity contract, or the appropriateness of such an investment by a charitable remainder trust.

Nothing in the provision is intended to suggest that a life insurance, endowment, or annuity contract would be a personal benefit contract, solely because an individual who is a recipient of an annuity or unitrust amount paid by a charitable remainder annuity trust or charitable remainder unitrust uses such a payment to purchase a life insurance, endowment or annuity contract, and a beneficiary under the contract is the recipient, a member of his or her family, or another person he or she designates.

Excise tax

The provision imposes on any organization described in section 170(c) of the Code an excise tax, equal to the amount of the premiums paid by the organization on any life insurance, annuity, or endowment contract, if the premiums are paid in connection with a transfer for which a deduction is not allowable under the deduction denial rule of the provision (without regard to when the transfer to the charitable organization was made). The excise tax does not apply if all of the direct and indirect beneficiaries under the contract (including any related side agreement) are organizations described in section 170(c). Under the provision, payments are treated as made by the organization, if they are made by any other person pursuant to an understanding or expectation of payment. The excise tax is to be applied taking into account rules ordinarily applicable to excise taxes in chapter 41 or 42 of the Code (e.g., statute of limitation rules).

Reporting

The provision requires that the charitable organization annually report the amount of premiums that is paid during the year and that is subject to the excise tax imposed under the provision, and the name and taxpayer identification number of each beneficiary under the life insurance, annuity or endowment contract to which the premiums relate, as well as other information required

by the Secretary of the Treasury. For this purpose, it is intended that a beneficiary include any beneficiary under any side agreement to which the section 170(c) organization is a party (or of which it is otherwise aware). Penalties applicable to returns required under Code section 6033 apply to returns under this reporting requirement. Returns required under this provision are to be furnished at such time and in such manner as the Secretary shall by forms or regulations require.

Regulations

The provision provides for the promulgation of regulations necessary or appropriate to carry out the purposes of the provisions, including regulations to prevent the avoidance of the purposes of the provision. For example, it is intended that regulations prevent avoidance of the purposes of the provision by inappropriate or improper reliance on the limited exceptions provided for certain beneficiaries under bona fide charitable gift annuities and for certain noncharitable recipients of an annuity or unitrust amount paid by a charitable remainder trust.

Effective date

The deduction denial provision applies to transfers after February 8, 1999 (as provided in H.R. 630). The excise tax provision applies to premiums paid after the date of enactment. The reporting provision applies to premiums paid after February 8, 1999 (determined as if the excise tax imposed under the provision applied to premiums paid after that date).

No inference is intended that a charitable contribution deduction is allowed under present law with respect to a charitable split-dollar insurance arrangement. The provision does not change the rules with respect to fraud or criminal or civil penalties under present law; thus, actions constituting fraud or that are subject to penalties under present law would still constitute fraud or be subject to the penalties after enactment of the provision.

Conference Agreement

The conference agreement includes the provision in S. 1792.

H. Distributions by a Partnership to a Corporate Partner of Stock in Another Corporation (sec. 732 of the Code)

Present Law

Present law generally provides that no gain or loss is recognized on the receipt by a corporation of property distributed in complete liquidation of another corporation in which it holds 80 percent of the stock (by vote and value) (sec. 332). The basis of property received by a corporate distributee in the distribution in complete liquidation of the 80-percent-owned subsidiary is a carry-over basis, i.e., the same as the basis in the hands of the subsidiary (provided no gain or loss is recognized by the liquidating corporation with respect to the distributed property) (sec. 334(b)).

Present law provides two different rules for determining a partner's basis in distributed property, depending on whether or

not the distribution is in liquidation of the partner's interest in the partnership. Generally, a substituted basis rule applies to property distributed to a partner in liquidation. Thus, the basis of property distributed in liquidation of a partner's interest is equal to the partner's adjusted basis in its partnership interest (reduced by any money distributed in the same transaction) (sec. 732(b)).

By contrast, generally, a carryover basis rule applies to property distributed to a partner other than in liquidation of its partnership interest, subject to a cap (sec. 732(a)). Thus, in a non-liquidating distribution, the distributee partner's basis in the property is equal to the partnership's adjusted basis in the property immediately before the distribution, but not to exceed the partner's adjusted basis in its partnership interest (reduced by any money distributed in the same transaction). In a non-liquidating distribution, the partner's basis in its partnership interest is reduced by the amount of the basis to the distributee partner of the property distributed and is reduced by the amount of any money distributed (sec. 733).

If corporate stock is distributed by a partnership to a corporate partner with a low basis in its partnership interest, the basis of the stock is reduced in the hands of the partner so that the stock basis equals the distributee partner's adjusted basis in its partnership interest. No comparable reduction is made in the basis of the corporation's assets, however. The effect of reducing the stock basis can be negated by a subsequent liquidation of the corporation under section 332.³⁴

House Bill

No provision.

Senate Amendment

In general

No provision. However, S. 1792, as passed by the Senate, contains a provision that provides for a basis reduction to assets of a corporation, if stock in that corporation is distributed by a partnership to a corporate partner. The reduction applies if, after the distribution, the corporate partner controls the distributed corporation.

Amount of the basis reduction

Under the provision, the amount of the reduction in basis of property of the distributed corporation generally equals the amount of the excess of (1) the partnership's adjusted basis in the stock of the distributed corporation immediately before the distribution, over (2) the corporate partner's basis in that stock immediately after the distribution.

The provision limits the amount of the basis reduction in two respects. First, the amount of the basis reduction may not exceed the amount by which (1) the sum of the aggregate adjusted bases

³⁴In a similar situation involving the purchase of stock of a subsidiary corporation as replacement property following an involuntary conversion, the Code generally requires the basis of the assets held by the subsidiary to be reduced to the extent that the basis of the stock in the replacement corporation itself is reduced (sec. 1033).

of the property and the amount of money of the distributed corporation exceeds (2) the corporate partner's adjusted basis in the stock of the distributed corporation. Thus, for example, if the distributed corporation has cash of \$300 and other property with a basis of \$600 and the corporate partner's basis in the stock of the distributed corporation is \$400, then the amount of the basis reduction could not exceed \$500 (i.e., $(\$300 + \$600) - \$400 = \500).

Second, the amount of the basis reduction may not exceed the adjusted basis of the property of the distributed corporation. Thus, the basis of property (other than money) of the distributed corporation could not be reduced below zero under the provision, even though the total amount of the basis reduction would otherwise be greater.

The provision provides that the corporate partner recognizes long-term capital gain to the extent the amount of the basis reduction exceeds the basis of the property (other than money) of the distributed corporation. In addition, the corporate partner's adjusted basis in the stock of the distribution is increased in the same amount. For example, if the amount of the basis reduction were \$400, and the distributed corporation has money of \$200 and other property with an adjusted basis of \$300, then the corporate partner would recognize a \$100 capital gain under the provision. The corporate partner's basis in the stock of the distributed corporation is also increased by \$100 in this example, under the provision.

The basis reduction is allocated among assets of the controlled corporation in accordance with the rules provided under section 732(c).

Partnership distributions resulting in control

The basis reduction generally applies with respect to a partnership distribution of stock if the corporate partner controls the distributed corporation immediately after the distribution or at any time thereafter. For this purpose, the term control means ownership of stock meeting the requirements of section 1504(a)(2) (generally, an 80-percent vote and value requirement).

The provision applies to reduce the basis of any property held by the distributed corporation immediately after the distribution, or, if the corporate partner does not control the distributed corporation at that time, then at the time the corporate partner first has such control. The provision does not apply to any distribution if the corporate partner does not have control of the distributed corporation immediately after the distribution and establishes that the distribution was not part of a plan or arrangement to acquire control.

For purposes of the provision, if a corporation acquires (other than in a distribution from a partnership) stock the basis of which is determined (by reason of being distributed from a partnership) in whole or in part by reference to section 732(a)(2) or (b), then the corporation is treated as receiving a distribution of stock from a partnership. For example, if a partnership distributes property other than stock (such as real estate) to a corporate partner, and that corporate partner contributes the real estate to another corporation in a section 351 transaction, then the stock received in the section 351 transaction is not treated as distributed by a partnership, and the basis reduction under this provision does not apply.

As another example, if a partnership distributes stock to two corporate partners, neither of which have control of the distributed corporation, and the two corporate partners merge and the survivor obtains control of the distributed corporation, the stock of the distributed corporation that is acquired as a result of the merger is treated as received in a partnership distribution; the basis reduction rule of the provision applies.

In the case of tiered corporations, a special rule provides that if the property held by a distributed corporation is stock in a corporation that the distributed corporation controls, then the provision is applied to reduce the basis of the property of that controlled corporation. The provision is also reapplied to any property of any controlled corporation that is stock in a corporation that it controls. Thus, for example, if stock of a controlled corporation is distributed to a corporate partner, and the controlled corporation has a subsidiary, the amount of the basis reduction allocable to stock of the subsidiary is applied again to reduce the basis of the assets of the subsidiary, under the special rule.

The provision also provides for regulations, including regulations to avoid double counting and to prevent the abuse of the purposes of the provision. It is intended that regulations prevent the avoidance of the purposes of the provision through the use of tiered partnerships.

Effective date

The provision is effective for distributions made after July 14, 1999, except that in the case of a corporation that is a partner in a partnership on July 14, 1999, the provision is effective for distributions by that partnership to the corporation after the date of enactment.

Conference Agreement

The conference agreement includes the provision of S. 1792, with a modification to the effective date.

Effective date.—The provision is effective generally for distributions made after July 14, 1999. However, in the case of a corporation that is a partner in a partnership as of July 14, 1999, the provision is effective for any distribution made (or treated as made) to that partner from that partnership after June 30, 2001. In the case of any such distribution after the date of enactment and before July 1, 2001, the rule of the preceding sentence does not apply unless that partner makes an election to have the rule apply to the distribution on the partner's return of Federal income tax for the taxable year in which the distribution occurs.

No inference is intended that distributions that are not subject to the provision achieve a particular tax result under present law, and no inference is intended that enactment of the provision limits the application of tax rules or principles under present or prior law.

I. Treatment of Real Estate Investment Trusts (REITs)

1. Provisions relating to REITs (secs. 852, 856, and 857 of the Code)

Present Law

A real estate investment trust (“REIT”) is an entity that receives most of its income from passive real-estate related investments and that essentially receives pass-through treatment for income that is distributed to shareholders.

If an electing entity meets the requirements for REIT status, the portion of its income that is distributed to the investors each year generally is taxed to the investors without being subjected to a tax at the REIT level. In general, a REIT must derive its income from passive sources and not engage in any active trade or business.

A REIT must satisfy a number of tests on a year by year basis that relate to the entity’s (1) organizational structure; (2) source of income; (3) nature of assets; and (4) distribution of income. Under the source-of-income tests, at least 95 percent of its gross income generally must be derived from rents from real property, dividends, interest, and certain other passive sources (the “95 percent test”). In addition, at least 75 percent of its gross income generally must be from real estate sources, including rents from real property and interest on mortgages secured by real property. For purposes of the 95 and 75 percent tests, qualified income includes amounts received from certain “foreclosure property,” treated as such for 3 years after the property is acquired by the REIT in foreclosure after a default (or imminent default) on a lease of such property or on indebtedness which such property secured.

In general, for purposes of the 95 percent and 75 percent tests, rents from real property do not include amounts for services to tenants or for managing or operating real property. However, there are some exceptions. Qualified rents include amounts received for services that are “customarily furnished or rendered” in connection with the rental of real property, so long as the services are furnished through an independent contractor from whom the REIT does not derive any income. Amounts received for services that are not “customarily furnished or rendered” are not qualified rents.

An independent contractor is defined as a person who does not own, directly or indirectly, more than 35 percent of the shares of the REIT. Also, no more than 35 percent of the total shares of stock of an independent contractor (or of the interests in assets or net profits, if not a corporation) can be owned directly or indirectly by persons owning 35 percent or more of the interests in the REIT. In addition, a REIT cannot derive any income from an independent contractor.

Rents for certain personal property leased in connection with real property are treated as rents from real property if the adjusted basis of the personal property does not exceed 15 percent of the aggregate adjusted bases of the real and the personal property.

Rents from real property do not include amounts received from any corporation if the REIT owns 10 percent or more of the voting power or of the total number of shares of all classes of stock of such

corporation. Similarly, in the case of other entities, rents are not qualified if the REIT owns 10 percent or more in the assets or net profits of such person.

At the close of each quarter of the taxable year, at least 75 percent of the value of total REIT assets must be represented by real estate assets, cash and cash items, and Government securities. Also, a REIT cannot own securities (other than Government securities and certain real estate assets) in an amount greater than 25 percent of the value of REIT assets. In addition, it cannot own securities of any one issuer representing more than 5 percent of the total value of REIT assets or more than 10 percent of the voting securities of any corporate issuer. Securities for purposes of these rules are defined by reference to the Investment Company Act of 1940.³⁵

Under an exception to the ownership rule, a REIT is permitted to have a wholly owned subsidiary corporation, but the assets and items of income and deduction of such corporation are treated as those of the REIT, and thus can affect the qualification of the REIT under the income and asset tests.

A REIT generally is required to distribute 95 percent of its income before the end of its taxable year, as deductible dividends paid to shareholders. This rule is similar to a rule for regulated investment companies ("RICs") that requires distribution of 90 percent of income. Both REITs and RICs can make certain "deficiency dividends" after the close of the taxable year, and have these treated as made before the end of the year. The regulations applicable to REITs state that a distribution will be treated as a "deficiency dividend" (and, thus, as made before the end of the prior taxable year) only to the extent the earnings and profits for that year exceed the amount of distributions actually made during the taxable year.³⁶

A REIT that has been or has combined with a C corporation³⁷ will be disqualified if, as of the end of its taxable year, it has accumulated earnings and profits from a non-REIT year. A similar rule applies to regulated investment companies ("RICs"). In the case of a REIT, any distribution made in order to comply with this requirement is treated as being first from pre-REIT accumulated earnings and profits. RICs do not have a similar ordering rule.

In the case of a RIC, any distribution made within a specified period after determination that the investment company did not qualify as a RIC for the taxable year will be treated as applying to the RIC for the non-RIC year, "for purposes of applying [the earnings and profits rule that forbids a RIC to have non-RIC earnings and profits] to subsequent taxable years." The REIT rules do not specify any particular separate treatment of distributions made after the end of the taxable year for purposes of the earnings and profits rule. Treasury regulations under the REIT provisions state that "distribution procedures similar to those * * * for regulated

³⁵ 15 U.S.C. 80a-1 and following. See Code section 856(c)(5)(F).

³⁶ Treas. Reg. sec. 1.858-1(b)(2).

³⁷ A "C corporation" is a corporation that is subject to taxation under the rules of subchapter C of the Internal Revenue Code, which generally provides for a corporate level tax on corporate income. Thus, a C corporation is not a pass-through entity. Earnings and profits of a C corporation, when distributed to shareholders, are taxed to the shareholders as dividends.

investment companies apply to non-REIT earnings and profits of a real estate investment trust.”³⁸

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, provides as follows:

Investment limitations and taxable REIT subsidiaries

General rule.—Under the provision, a REIT generally cannot own more than 10 percent of the total value of securities of a single issuer, in addition to the present law rule that a REIT cannot own more than 10 percent of the outstanding voting securities of a single issuer. In addition, no more than 20 percent of the value of a REIT’s assets can be represented by securities of the taxable REIT subsidiaries that are permitted under the bill.

Exception for safe-harbor debt.—For purposes of the new 10-percent value test, securities are generally defined to exclude safe harbor debt owned by a REIT (as defined for purposes of sec. 1361(c)(5)(B)(i) and (ii)) if the issuer is an individual, or if the REIT (and any taxable REIT subsidiary of such REIT) owns no other securities of the issuer. However, in the case of a REIT that owns securities of a partnership, safe harbor debt is excluded from the definition of securities only if the REIT owns at least 20-percent or more of the profits interest in the partnership. The purpose of the partnership rule requiring a 20 percent profits interest is to assure that if the partnership produces income that would be disqualified income to the REIT, the REIT will be treated as receiving a significant portion of that income directly through its partnership interest, even though it also may derive qualified interest income through its safe harbor debt interest.

Exception for taxable REIT subsidiaries.—An exception to the limitations on ownership of securities of a single issuer applies in the case of a “taxable REIT subsidiary” that meets certain requirements. To qualify as a taxable REIT subsidiary, both the REIT and the subsidiary corporation must join in an election. In addition, any corporation (other than a REIT or a qualified REIT subsidiary under section 856(i) that does not properly elect with the REIT to be a taxable REIT subsidiary) of which a taxable REIT subsidiary owns, directly or indirectly, more than 35 percent of the vote or value is automatically treated as a taxable REIT subsidiary.

Securities (as defined in the Investment Company Act of 1940) of taxable REIT subsidiaries could not exceed 20 percent of the total value of a REIT’s assets.

A taxable REIT subsidiary can engage in certain business activities that under present law could disqualify the REIT because, but for the proposal, the taxable REIT subsidiary’s activities and relationship with the REIT could prevent certain income from qualifying as rents from real property. Specifically, the subsidiary

³⁸Treas. Reg. sec. 1.857–11(c).

can provide services to tenants of REIT property (even if such services were not considered services customarily furnished in connection with the rental of real property), and can manage or operate properties, generally for third parties, without causing amounts received or accrued directly or indirectly by the REIT for such activities to fail to be treated as rents from real property. However, rents paid to a REIT generally are not qualified rents if the REIT owns more than 10 percent of the value, (as well as of the vote) of a corporation paying the rents. The only exceptions are for rents that are paid by taxable REIT subsidiaries and that also meet a limited rental exception (where 90 percent of space is leased to third parties at comparable rents) and an exception for rents from certain lodging facilities (operated by an independent contractor).

However, the subsidiary cannot directly or indirectly operate or manage a lodging or healthcare facility. Nevertheless, it can lease a qualified lodging facility (e.g., a hotel) from the REIT (provided no gambling revenues were derived by the hotel or on its premises); and the rents paid are treated as rents from real property so long as the lodging facility was operated by an independent contractor for a fee. The subsidiary can bear all expenses of operating the facility and receive all the net revenues, minus the independent contractor's fee.

For purposes of the rule that an independent contractor may operate a qualified lodging facility, an independent contractor will qualify so long as, at the time it enters into the management agreement with the taxable REIT subsidiary, it is actively engaged in the trade or business of operating qualified lodging facilities for any person who is not related to the REIT or the taxable REIT subsidiary. The REIT may receive income from such an independent contractor with respect to certain pre-existing leases.

Also, the subsidiary generally cannot provide to any person rights to any brand name under which hotels or healthcare facilities are operated. An exception applies to rights provided to an independent contractor to operate or manage a lodging facility, if the rights are held by the subsidiary as licensee or franchisee, and the lodging facility is owned by the subsidiary or leased to it by the REIT.

Interest paid by a taxable REIT subsidiary to the related REIT is subject to the earnings stripping rules of section 163(j). Thus the taxable REIT subsidiary cannot deduct interest in any year that would exceed 50 percent of the subsidiary's adjusted gross income.

If any amount of interest, rent, or other deductions of the taxable REIT subsidiary for amounts paid to the REIT is determined to be other than at arm's length ("redetermined" items), an excise tax of 100 percent is imposed on the portion that was excessive. "Safe harbors" are provided for certain rental payments where (1) the amounts are de minimis, (2) there is specified evidence that charges to unrelated parties are substantially comparable, (3) certain charges for services from the taxable REIT subsidiary are separately stated, or (4) the subsidiary's gross income from the service is not less than 150 percent of the subsidiary's direct cost in furnishing the service.

In determining whether rents are arm's length rents, the fact that such rents do not meet the requirements of the specified safe

harbors shall not be taken into account. In addition, rent received by a REIT shall not fail to qualify as rents from real property by reason of the fact that all or any portion of such rent is redetermined for purposes of the excise tax.

The Treasury Department is to conduct a study to determine how many taxable REIT subsidiaries are in existence and the aggregate amount of taxes paid by such subsidiaries and shall submit a report to the Congress describing the results of such study.

Health Care REITS

The provision permits a REIT to own and operate a health care facility for at least two years, and treat it as permitted “foreclosure” property, if the facility is acquired by the termination or expiration of a lease of the property. Extensions of the 2 year period can be granted.

Conformity with regulated investment company rules

Under the provision, the REIT distribution requirements are modified to conform to the rules for regulated investment companies. Specifically, a REIT is required to distribute only 90 percent, rather than 95 percent, of its income.

Definition of independent contractor

If any class of stock of the REIT or the person being tested as an independent contractor is regularly traded on an established securities market, only persons who directly or indirectly own 5 percent or more of such class of stock shall be counted in determining whether the 35 percent ownership limitations have been exceeded.

Modification of earnings and profits rules for RICs and REITs

The rule allowing a RIC to make a distribution after a determination that it had failed RIC status, and thus meet the requirement of no non-RIC earnings and profits in subsequent years, is modified to clarify that, when the sole reason for the determination is that the RIC had non-RIC earnings and profits in the initial year (i.e. because it was determined not to have distributed all C corporation earnings and profits), the procedure would apply to permit RIC qualification in the initial year to which such determination applied, in addition to subsequent years.

The RIC earnings and profits rules are also modified to provide an ordering rule similar to the REIT rule, treating a distribution to meet the requirement of no non-RIC earnings and profits as coming first from the earliest earnings and profits accumulated in any year for which the RIC did not qualify as a RIC. In addition, the REIT deficiency dividend rules are modified to take account of this ordering rule.

Provision regarding rental income from certain personal property

The provision modifies the present law rule that permits certain rents from personal property to be treated as real estate rental income if such personal property does not exceed 15 percent of the aggregate of real and personal property. The provision replaces the

present law comparison of the adjusted bases of properties with a comparison based on fair market values.

Effective date.—The provision is effective for taxable years beginning after December 31, 2000. The provision with respect to modification of earnings and profits rules is effective for distributions after December 31, 2000.

In the case of the provisions relating to permitted ownership of securities of an issuer, special transition rules apply. The new rules forbidding a REIT to own more than 10 percent of the value of securities of a single issuer do not apply to a REIT with respect to securities held directly or indirectly by such REIT on July 12, 1999, or acquired pursuant to the terms of written binding contract in effect on that date and at all times thereafter until the acquisition.

Also, securities received in a tax-free exchange or reorganization, with respect to or in exchange for such grandfathered securities would be grandfathered. The grand-fathering of such securities ceases to apply if the REIT acquires additional securities of that issuer after that date, other than pursuant to a binding contract in effect on that date and at all times thereafter, or in a reorganization with another corporation the securities of which are grandfathered.

This transition also ceases to apply to securities of a corporation as of the first day after July 12, 1999 on which such corporation engages in a substantial new line of business, or acquires any substantial asset, other than pursuant to a binding contract in effect on such date and at all times thereafter, or in a reorganization or transaction in which gain or loss is not recognized by reason of section 1031 or 1033 of the Code. If a corporation makes an election to become a taxable REIT subsidiary, effective before January 1, 2004 and at a time when the REIT's ownership is grandfathered under these rules, the election is treated as a reorganization under section 368(a)(1)(A) of the Code.

The new 10 percent of value limitation for purposes of defining qualified rents is effective for taxable years beginning after December 31, 2000. There is an exception for rents paid under a lease or pursuant to a binding contract in effect on July 12, 1999 and at all times thereafter.

Conference Agreement

The conference agreement includes the provision in S. 1792. The conference agreement clarifies the RIC and REIT earnings and profits ordering rules in the case of a distribution to meet the requirements that there be no non-RIC or non-REIT earnings and profits in any year.

Both the RIC and REIT earnings and profits rules are modified to provide a more specific ordering rule, similar to the present-law REIT rule. The new ordering rule treats a distribution to meet the requirement of no non-RIC or non-REIT earnings and profits as coming, on a first-in, first-out basis, from earnings and profits which, if not distributed, would result in a failure to meet such requirement. Thus, such earnings and profits are deemed distributed first from earnings and profits that would cause such a failure,

starting with the earliest RIC or REIT year for which such failure would occur.

2. Modify estimated tax rules for closely held REITs (sec. 6655 of the Code)

Present Law

If a person has a direct interest or a partnership interest in income-producing assets (such as securities generally, or mortgages) that produce income throughout the year, that person's estimated tax payments must reflect the quarterly amounts expected from the asset.

However, a dividend distribution of earnings from a REIT is considered for estimated tax purposes when the dividend is paid. Some corporations have established closely held REITs that hold property (e.g. mortgages) that if held directly by the controlling entity would produce income throughout the year. The REIT may make a single distribution for the year, timed such that it need not be taken into account under the estimated tax rules as early as would be the case if the assets were directly held by the controlling entity. The controlling entity thus defers the payment of estimated taxes.

House Bill

No provision.

Senate Amendment

No provision, but S. 1792, as passed by the Senate, provides that in the case of a REIT that is closely held, any person owning at least 10 percent of the vote or value of the REIT is required to accelerate the recognition of year-end dividends attributable to the closely held REIT, for purposes of such person's estimated tax payments. A closely held REIT is defined as one in which at least 50 percent of the vote or value is owed by five or fewer persons. Attribution rules apply to determine ownership.

No inference is intended regarding the treatment of any transaction prior to the effective date.

Effective date.—The provision is effective for estimated tax payments due on or after November 15, 1999.

Conference Agreement

The conference agreement includes the provision in S. 1792, effective for estimated tax payments due on or after December 15, 1999.

TAX COMPLEXITY ANALYSIS

Section 4022(b) of the Internal Revenue Service Reform and Restructuring Act of 1998 (the "IRS Reform Act") requires the Joint Committee on Taxation (in consultation with the Internal Revenue Service and the Department of the Treasury) to provide a tax complexity analysis. The complexity analysis is required for all legislation reported by the House Committee on Ways and Means, the Senate Committee on Finance, or any committee of conference if

the legislation includes a provision that directly or indirectly amends the Internal Revenue Code and has widespread applicability to individuals or small businesses.

The staff of the Joint Committee on Taxation has determined that a complexity analysis is not required under section 4022(b) of the IRS Reform Act because the bill contains no provisions that amend the Internal Revenue Code and that have widespread applicability to individuals or small businesses.

ESTIMATED BUDGET EFFECTS OF THE REVENUE PROVISIONS INCLUDED IN THE CONFERENCE AGREEMENT FOR H.R. 1180 ¹

[Fiscal years 2000–2009, in millions of dollars]

| Provision | Effective | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2000–2004 | 2000–2009 |
|--|-------------------|---------------|---------------|---------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|----------------|-------------|
| The "Tax Relief Extension Act of 1999" | | | | | | | | | | | | | |
| I. Extension of Expiring Provisions | | | | | | | | | | | | | |
| A. Treatment of Nonrefundable Personal Credits Under the Alternative Individual Minimum Tax (through 12/31/01). | tybi 1999 | –972 | –977 | –943 | | | | | | | | –2,892 | –2,892 |
| B. Research Tax Credit, and Increase AIC Rates by 1 Percentage Point, and Expand to Puerto Rico and the Other Possessions; Delay Claiming of Credit ² (through 6/30/04). | (³) | | –1,661 | –4,082 | –2,541 | –2,242 | –1,343 | –708 | –386 | –150 | –26 | –10,526 | –13,139 |
| C. Exemption from Subpart F for Active Financing Income (through 12/31/01). | tyba 12/31/99 | –187 | –785 | –744 | | | | | | | | –1,716 | –1,716 |
| D. Suspension of 100% Net Income Limitation for Marginal Properties (through 12/31/01). | tyba 12/31/99 | –23 | –35 | –12 | | | | | | | | –71 | –71 |
| E. Work Opportunity Tax Credit (through 12/31/01) | wpoifibwa 6/30/99 | –229 | –321 | –293 | –151 | –58 | –19 | –3 | | | | –1,051 | –1,073 |
| F. Welfare-to-Work Tax Credit (through 12/31/01) | wpoifibwa 6/20/99 | –49 | –77 | –79 | –47 | –19 | –7 | –2 | | | | –272 | –281 |
| G. Extension of Employer Provided Educational Assistance for Undergraduate Courses (through 12/31/01). | cba 5/31/00 | –134 | –318 | –132 | | | | | | | | –584 | –584 |
| H. Extend and Modify Tax Credit for Electricity Produced From Wind and Closed-Loop Biomass Facilities—credit to include electricity produced from poultry waste (through 12/31/01). | (⁴) | –9 | –25 | –33 | –33 | –34 | –35 | –36 | –37 | –38 | –38 | –135 | –318 |
| I. Reauthorization of Generalized System of Preferences (through 9/30/01) ⁽⁵⁾ . | 7/1/99 | –438 | –360 | | | | | | | | | –798 | –798 |
| J. Extend Qualified Zone Academy Bond Program (3-year carryforward for 1998 and 1999 authority; 2-year carryforward thereafter) (through 12/31/01). | tybi 2000 | –3 | –11 | –20 | –28 | –30 | –30 | –30 | –30 | –30 | –30 | –92 | –242 |
| K. Extend the \$5,000 Credit for First-Time Homebuyers in the District of Columbia (through 12/31/01). | 1/1/01 | | –5 | –15 | (⁶) | (^{6}) | (^{6}) | (^{6}) | (^{6}) | (^{6}) | (^{6}) | –20 | –20 |
| L. Extend Brownfields Environmental Remediation (through 12/31/01). | DOE | 11 | –43 | –59 | –20 | –2 | –1 | 2 | 5 | 6 | 8 | –114 | –93 |
| M. Increase Amount of Rum Excise Tax That is Covered Over to Puerto Rico and the U.S. Virgin Islands (from \$10.50 per proof gallon to \$13.25 per proof gallon) (through 12/31/01) (5) (7). | (⁸) | –20 | –115 | –15 | | | | | | | | –150 | –150 |
| Total of Extension of Expiring Provisions | | –2,053 | –4,733 | –6,427 | –2,820 | –2,385 | –1,435 | –777 | –448 | –212 | –86 | –18,421 | –150 |
| II. Other Time-Sensitive Revenue Provisions | | | | | | | | | | | | | |
| A. Prohibit Disclosure of Advance Pricing Agreements (APAs) and Related Information; Require the IRS to Submit to Congress an Annual Report of Such Agreements. | DOE | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| B. Authority to Postpone Certain Tax-Related Deadlines by Reason of Year 2000 Failures. | DOE | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| C. Add the Streptococcus Pneumoniae Vaccine to the List of Taxable Vaccines in the Federal Vaccine Insurance Program; Study of Program. | sbda DOE | 4 | 7 | 9 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 39 | 91 |

ESTIMATED BUDGET EFFECTS OF THE REVENUE PROVISIONS INCLUDED IN THE CONFERENCE AGREEMENT FOR H.R. 1180¹—Continued

[Fiscal years 2000–2009, in millions of dollars]

| Provision | Effective | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 | 2000–2004 | 2000–2009 |
|--|-------------------|------------------|--------------|---------------|------------|------------|------------|-----------|-----------|------------|-----------|--------------|--------------|
| D. Delay the Requirement that Registered Motor Fuels Terminals Offer Dyed Kerosene as a Condition of Registration (through 12/31/01). | DOE | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| E. Provide that Federal Farm Production Payments are Taxable in the Year of Receipt. | DOE | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| Total of Other Time-Sensitive Revenue Provisions ... | | 4 | 7 | 9 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 39 | 91 |
| III. Revenue Offset Provisions | | | | | | | | | | | | | |
| A. Modify Individual Estimated Tax Safe Harbor to 108.6% for Tax Year 2000 and 110% for Tax Year 2001. | tyba 12/31/99 | 1,560 | 840 | -2,400 | | | | | | | | | |
| B. Clarify the Tax Treatment of Income and Losses from Derivatives. | DOE | (⁹) | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 4 | 9 |
| C. Information Reporting on Cancellation of Indebtedness by Non-Bank Financial Institutions. | coia 12/31/99 | | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 7 | 28 | 63 |
| D. Prevent the Conversion of Ordinary Income or Short-Term Capital Gains into Income Eligible for Long-Term Capital Gain Rates. | teio/a 7/12/99 | 15 | 45 | 47 | 49 | 51 | 54 | 58 | 62 | 66 | 70 | 207 | 517 |
| E. Allow Employers to Transfer Excess Defined Benefit Plan Assets to a Special Account for Health Benefits of Retirees (through 12/31/05). | tmi tyba 12/31/00 | | 19 | 38 | 39 | 40 | 43 | 23 | | | | 136 | 200 |
| F. Repeal Installment Method for Most Accrual Basis Taxpayers; Adjust Pledge Rules. | iso/a DOE | 477 | 677 | 406 | 257 | 72 | 8 | 21 | 35 | 48 | 62 | 1,889 | 2,063 |
| G. Deny Deduction and Impose Excise Tax With Respect to Charitable Split-Dollar Life Insurance Arrangements. | (¹⁰) | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| H. Distributions by a Partnership to a Corporate Partner of Stock in Another Corporation. | (¹¹) | 2 | 4 | 7 | 10 | 10 | 10 | 10 | 10 | 10 | 10 | 33 | 83 |
| I. Real Estate Investment Trust (REIT) Provisions | | | | | | | | | | | | | |
| 1. Impose 10% vote or value test | tyba 12/31/00 | | 2 | 8 | 8 | 8 | 9 | 9 | 9 | 10 | 10 | 26 | 73 |
| 2. Treatment of income and services provided by taxable REIT subsidiaries, with 20% asset limitation. | tyba 12/31/00 | | 50 | 131 | 44 | 19 | -9 | -39 | -72 | -107 | -146 | 244 | -129 |
| 3. Personal property treatment for determining rents from real property for REITs. | tyba 12/31/00 | | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -3 | -7 |
| 4. Special foreclosure rule for health care REITs | tyba 12/31/00 | | | | | | | | | | | | |
| 5. Conformity with RIC 90% distribution rules | tyba 12/31/00 | | 1 | 1 | 1 | | 1 | 1 | 1 | 1 | 1 | 3 | 5 |
| 6. Clarification of definition of independent operators for REITs. | tyba 12/31/00 | | | | | | | | | | | | |
| 7. Modification of earnings and profits rules | da 12/31/00 | | -6 | -3 | -3 | -3 | -4 | -4 | -4 | -4 | -4 | -16 | -35 |
| 8. Modify estimated tax rules for closely-owned REIT dividends. | epdo/a 12/15/99 | 40 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 45 | 52 |
| Total of Revenue Offset Provisions | | 2,094 | 1,640 | -1,757 | 413 | 206 | 120 | 87 | 49 | -32 | 11 | 2,596 | 2,894 |

Net total 45 — 3,086 — 8,175 — 2,397 — 2,169 — 1,305 — 680 — 389 — 170 — 64 — 15,786 — 18,392

¹ Another Title of H.R. 1180 contains an additional revenue provision that modifies the definition of an eligible foster child for purposes of the earned income credit. Effective—bya 12/31/99; 2000—2; 2001—36; 2002—38; 2003—38; 2004—39; 2005—40; 2006—41; 2007—42; 2008—43; 2009—43; 2000—4—153; 2000—9—362.

² For expenses incurred after 6/30/99 and before 10/1/00, credit cannot be claimed until after 9/30/00. For expenses incurred after 9/30/00 and before 10/1/01, credit cannot be claimed until after 9/30/01.

³ Extension of credit effective for expenses incurred after 6/30/99; increase in AIC rates effective for taxable years beginning after 6/30/99; expansion of the credit to include U.S. possessions effective for expenditures paid or incurred beginning after 6/30/99.

⁴ For wind and closed-loop biomass, provision applies to production from facilities placed in service after 6/30/99 and before 1/1/02; for poultry waste, provision applies to production from facilities placed in service after 12/31/99 and before 1/1/02.

⁵ Estimate provided by the Congressional Budget Office.

⁶ Loss of less than \$500,000.

⁷ A special rule applies to the payment of the \$2.75 increase in the cover-over rate for periods before 10/1/00.

⁸ Effective for run imported into the United States after 6/30/99.

⁹ Gain of less than \$500,000.

¹⁰ Effective for transfers made after 2/8/99 and for premiums paid after the date of enactment.

¹¹ Effective 7/14/99 (except with respect to partnerships in existence on 7/14/99, the provision is effective 6/30/01).

Legend for "Effective" column: cba = courses beginning after; coia = cancellation of indebtedness after; da = distributions after; DOE = date of enactment; epe/a = estimated payments due on or after; iso/a = installment sales on or after; sh/a = sales beginning the day after; te/a = transactions entered into on or after; tml = transfers made in; tyba = taxable years beginning after; tyb = taxable years beginning after; wpa/a = wages paid or incurred for individuals beginning work after.

Note.—Details may not add to totals due to rounding.
Source: Joint Committee on Taxation.

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BILL ARCHER,
TOM BLILEY,
DICK ARMEY,

Managers on the Part of the House.

W.V. ROTH, Jr.,
TRENT LOTT,

Managers on the Part of the Senate.



supports that works only for dairy farmers, they will see a regulatory mechanism that benefits all the citizens of the states—consumers, processors and farmers, alike.

This is the way our federalist system is supposed to work—the states talk and we listen. As an issue of states rights, I urge the Judiciary Committee to take this issue up when next we consider it.

TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999—CONFERENCE REPORT—Continued

Mr. ROTH. Mr. President, I am pleased with the progress we have made in two very important areas on issues that will affect the lives of Americans everywhere. This legislation—the Ticket to Work and Work Incentives Improvement Act of 1999—will go a long way toward improving the quality of life for millions of Americans with disabilities. At the same time, important provisions within this legislation—provisions that extend important tax and trade relief provisions—will bring meaningful relief and increased opportunities to individuals and families. The Ticket to Work and Work Incentives Improvement Act will help Americans with disabilities live richer, more productive lives. Its core purpose is to assist disabled individuals in returning to work. It removes the real risk many people with disabilities face of losing their health insurance, and it provides new ways of helping them find and keep meaningful employment.

Is there any question how important this is?

Millions of Americans with disabilities are waiting for the vote. They are waiting to be freed from a disability system that stifles initiative and thwarts productivity rather than rewarding them—a system that tells individuals with disabilities that if they leave their homes and try to find productive employment they will lose their access to health insurance. The current system isn't right, Mr. President. It isn't productive. And it certainly is not ennobling.

Under current law, if a person with a disability wants to return to work—even taking a job with modest earnings—he or she will jeopardize access to insurance coverage through the Medicaid and Medicare programs. And as many individuals with disabilities have difficulties securing private sector insurance coverage, losing access to Medicaid or Medicare is not an option. In fact, it's a tragic consequence for many people with medical conditions that demand ongoing treatment. As a result, the only recourse these individuals have is to forego the opportunity to work—to build and grow professionally and personally—and to stay at home.

No one, Mr. President, should be forced to choose between health care

and employment. Robbing an individual of the opportunity to work becomes a double tragedy in the life of someone who is living with a disability. It's been said that work is the process by which dreams become realities. It is the process by which idle visions become dynamic achievements. Work spells the difference in the life of a man or woman. It stretches minds, utilizes skills and lifts us from mediocrity.

No one should have to choose between health care and work, and passage of the Work Incentives Improvement Act will make that choice unnecessary. By acting on this legislation today, the Senate will offer new promise to millions of Americans with disabilities. This legislation will help promote their independence and personal growth. It will help restore confidence and meaning in their lives—and greater security in the lives of their families.

But this legislation is not about big government. We do not tell the states what they must do. There are no mandates. And we do not tell individuals with disabilities what they must do. We create options. We create choices. And choice is the essence of independence, isn't it?

The unemployment rate among working-age adults with severe disabilities is nearly 75 percent. What a tragic consequence of errant public policy that discourages those who can and want to work from attaining their desires. It's my firm belief that this number will come down—it will come down dramatically as we pass this law allowing them to return to the workplace. My belief is based in part on the fact that over 300 groups of disability advocates, health care providers, and insurers endorse this change and are anxiously waiting for us to act.

These groups and individuals are not the only Americans watching what we do here today. Along with them, are countless other who are looking to this legislation to extend important tax and trade relief provisions that are included in the work incentives bill.

These provisions are "must do" business. Like appropriations, extenders are provisions that we have an obligation to address before we conclude this session. They are necessary fixes to our Tax Code, and will go a long way toward helping families and creating greater economic opportunity in our communities.

Among the important provisions contained in these extenders is one that excludes nonrefundable tax credits from the alternative minimum tax ("AMT"). This change alone will insure that middle-income families receive the benefits of the \$500 per child tax credit, the HOPE Scholarship credit, the Lifetime Learning credit, the adoption credit, and the dependent care tax credit. In this legislation, such relief is extended through December 31, 2002.

Another important provision in this legislation extends and expands the tax credit for production of energy from

wind and closed loop biomass. This important alternative energy provision expired on June 30, 1999. In this legislation, the tax credit is expanded to cover poultry litter-based biomass, and it is extended through December 31, 2001. For my home State of Delaware and many other poultry producing regions, this provision provides an important option for the disposition of poultry litter in a way that will be beneficial and productive.

Other important expiring tax provisions included in this legislation are a 5-year extension and enhancement of the research and development tax credit and the tax-free treatment of employer-provided educational assistance. I can't overstate how important the R&D credit is to the high-tech community and many other important leading American economic sectors. The extension offered in this legislation will give businesses the certainty they need and will result in more and higher paid jobs for American workers. And as far as employer-provided educational assistance, I've made it clear that my goal is to make this provision permanent and expand it to graduate education. I know this is an important goal for Senator MOYNIHAN as well. Over one million workers will benefit from this extension, and under this legislation, the provision is extended through the end of 2001 for undergraduate education.

But, Mr. President, important extenders do not stop here. This legislation will also extend incentives designed to help Americans move from welfare to work through the end of 2001. These incentives include the work opportunity tax credit and the welfare to work tax credit.

Other extenders include the active finance exception to Subpart F—a provision that puts our banks, insurance, and securities firms on equal footing with their foreign competitors in overseas markets—and five other important tax provisions that are scheduled to expire. These provisions, which are extended through the end of 2001, include the "brownfields" expanding treatment of environmental cleanup costs. In addition, the school repair and renovation costs of some school districts are met by an extension of the qualified zone academy bond program.

But the provisions included in this legislation are not limited to tax relief. We also include some important trade issues. For example, we extend the Generalized System of Preferences, as well as Trade Adjustment Assistance programs. Both of these trade provisions are extended through the end of 2001. Beyond these, there are several revenue raising provisions that we've included. Most of these, I am pleased to report, close loopholes in the Tax Code raising some \$3 billion in return.

When all is said and done with this legislation, Mr. President, I am pleased that the tax relief in this bill amounts to a net tax of \$15.8 billion over 5 years and \$18.4 billion over 10.

There's no question that what have before us is a dynamic piece of legislation. From providing hope and opportunity to Americans with disabilities to extending and expanding important tax provisions for individuals and families, this is a comprehensive package. It has been carefully constructed, debated, and addressed in conference. It include that efforts of many of our colleagues and countless hours of staff work.

I want to thank several Senators who have worked closely with me over the past year to bring the work incentives bill to the floor—Senators MOYNIHAN, JEFFORDS, KENNEDY, and BUNNING. Passage of the Work Incentives Improvement Act has been one of my top health care priorities during this Congress. It would have been impossible without close, productive, bipartisan cooperation. Likewise, the effort we've made to address the important tax and trade extenders. Without the work and cooperation of my distinguished friend and the Finance Committee's Ranking Democratic Member, Senator MOYNIHAN, we wouldn't be here today with a conference agreement.

In closing, let me also mention that there are two provisions in this bill outside the Finance Committee's jurisdiction, one dealing with the organ donor and the other dealing with a NOAA procurement matter. I ask my colleagues to join us in seeing that all of these important provisions are passed into law.

The PRESIDING OFFICER. The distinguished Senator from New York is recognized.

Mr. MOYNIHAN. Mr. President, I do wish there were more Members present that we might rise in a general applause to the Senator from Delaware, chairman of the Finance Committee. I refer to him as our revered colleague. This legislation could not be here, most of it would not have been conceived, without him. It is a triumph against what has become our procedures that it is here today and will shortly be approved.

Millions of Americans who will not know that he has done this will benefit from what he has done, and that, for him, will be sufficient knowledge and reward. I want to say that.

I don't want to speak at length because other Senators wish to join in this matter. I simply make two points. One is how very much I appreciate the chairman's mention of the importance of providing employer education assistance for graduate students. Go to any major metropolis in this country, any area where there is a college, and find night schools where young America and not so young come to acquire further skills and greater economic capacity.

Nothing could be more clearly in our national interests. It will go on whether we have a tax credit or not, but on the margins, it is important, first, recognizing the need for new skills, recognizing the need for developing new

areas. Send our own employees to graduate school. Let them get this further degree while they are on the job, come back, be promoted, earn more, and be more valuable.

I spoke with our friend, the House majority leader, Mr. ARMEY. Of course he is a distinguished economist. He noted the last 5 years he was teaching, he was teaching at night school and teaching people who wanted to be there. They didn't have to be there to play soccer—put it that way.

I would secondly like to note, and I know the chairman would agree, absent from our measure today are two matters reported from the Committee on Finance: The Africa Growth and Opportunity Act of 1999 and the Caribbean Basin Initiative. They came out of the Finance Committee as near matter unanimous as can be—under our chairman, things come out of our committee unanimous. We did not succeed given the complexities of these negotiations this time. We will be back. I hope these matters will be addressed. I know on our side of the aisle, if you will, in the House, Representative Rangel, the ranking member in Ways and Means, my counterpart, very much hopes this will happen, and so do I.

Mr. President, I would briefly note, for the RECORD, some important provision in this legislation.

With regard to tax extenders, this bill extends the research and experimentation credit for five years and it extends all other provisions through December 31, 2001. Extending these provisions as long as possible was simply the right thing to do—providing certainty to employers and workers.

Might I add that some of these provisions are vitally important to working families. If we do not, for instance, pass the alternative minimum tax provision, approximately 1.1 million Americans will lose part or all of the \$500 child credit, the HOPE scholarship credit, or other non-refundable credits. We also, rightfully so, extend the Welfare-to-work and the Work opportunity credits.

I would also like to clarify two matters with respect to a provision based on S. 213, which I introduced on January 19, 1999—and which is known as the rum cover-over provision. I am very pleased that we were able to increase from \$10.50 to \$13.25 the amount of excise taxes on rum that is transferred to Puerto Rico and the Virgin Islands. Unfortunately, procedural obstacles required a delay in most of the transfer from fiscal year 2000 to fiscal year 2001. Instead, up to \$20 million will be transferred 15 days after enactment. The remainder of the amount will not, however, be transferred until after September 30, 2000. However, our distinguished Finance Committee Chairman, Senator ROTH, and Chairman ARCHER from the House Ways and Means Committee have made a commitment that, to the extent possible, the delayed payments will be accelerated, or interest on the delayed amounts will be pro-

vided for in the Africa and CBI legislation next year.

With respect to the second matter, the rum cover-over provision, as passed by this body on October 29, 1999, included an additional transfer of 50 cents from the government of Puerto Rico to the National Historic Conservation Trust of Puerto Rico—the purpose of which is the protection and enhancement of the natural resources of Puerto Rico. Unfortunately, the 50 cent transfer is not included in the legislation before us today. However, it is my understanding that the Governor of Puerto Rico, the Honorable Pedro Rossello, has made the commitment to transfer one-sixth (45 cents), of the increase provided by this legislation, to the Trust. I applaud the Governor for his commitment.

I am also very pleased that this legislation would remedy some of the barriers and disincentives that individuals enrolled in Federal disability programs face in returning to work. Many disabled Americans do not return to work because they must lose their health care coverage and because they have inadequate access to employment and rehabilitation services.

In 1986, we took our first step to remove obstacles facing disabled Americans who want to work. Our former Finance Committee Chairman and Majority Leader—Senator DOLE—introduced the Employment Opportunities for Disabled Americans Act to make permanent a demonstration project that enabled Supplemental Security Income—or “SSI” recipients to maintain Medicaid benefits during a transition to work. I was an original co-sponsor of the bill which was enacted on November 11, 1986. Building on that first step and other subsequent initiatives, Senators JEFFORDS, KENNEDY, ROTH and I introduced this work incentives bill in the Senate on January 28th of this year. The legislation has enjoyed overwhelming bipartisan support, passing the Senate 99-0 on June 16th and the House 412-9 on October 19.

The bill addresses an issue of paramount concern: how to encourage disabled individuals to return to work. Currently, less than one-half of one percent of individuals receiving disability benefits now leave the rolls and return to work. A survey by the National Organization on Disability found that only 29 percent of all disabled adults are employed full-time or part-time, compared to 79 percent of the non-disabled adult population. The disabled find it difficult to work because if they earn income above a certain level, they lose their disability benefits and their health care coverage. In fact, witnesses testifying before the Finance Committee cited the potential loss of health care coverage as the primary obstacle between the disabled and their ability to work.

This legislation tries to remove this barrier by guaranteeing that working individuals with disabilities can maintain their Medicare and Medicaid coverage for a longer period of time. Under

current law, Social Security disability beneficiaries, who go back to work and earn a modest income, may only continue their Medicare coverage for four years. This legislation would permit disabled workers to retain their Medicare coverage for an additional four and a half years.

Two important Medicaid provisions are included in this bill. The first would permit more lower-income disabled workers to pay premiums and buy into the Medicaid program. The second establishes a demonstration project that would provide Medicaid coverage to persons likely to become disabled without medical treatment. This is good common-sense policy: providing preventive health coverage to working individuals with serious medical conditions before such conditions worsen to a disabling level.

This legislation does more than just extend greater health care coverage to the disabled. Through a program called "Ticket to Work," it would make it easier for disabled workers to access coordinated vocational rehabilitation and employment assistance services. It provides grants to States to develop the program infrastructure and to perform the outreach necessary to help disabled individuals to work. The legislation would also ensure that a mere return to work does not automatically trigger eligibility reviews that could result in being removed from the disability rolls. In addition, it would streamline the process for individuals to be reinstated for disability benefits, if they are unable to continue working.

Lastly, the bill funds Social Security demonstration projects on how best to encourage disabled individuals to return to work. For example, one innovative project will determine whether a sliding-scale reduction of disability benefits by \$1 for every \$2 earned would make it easier to go back to work. Such a result seems far more reasonable than the current situation where workers who earn income above a statutory limit lose their disability benefits entirely.

The overwhelming support for his legislation is not surprising given its simple and universal goal: providing disabled Americans the opportunity they deserve to work and contribute to the fullest of their ability. For Americans with disabilities, enacting this legislation would take a great step forward in removing the many barriers they face in returning to work.

Before I conclude, Mr. President, I did want to mention that regrettably, this bill includes an extraneous provision delaying implementation of a new regulation to improve the Nation's system of allocating human organs for transplant.

Mr. President, I thank the Chairman for his commitment to this tax extenders and work incentive legislation. I would also like to thank the staffs of the Joint Committee on Taxation, the Senate Finance Committee and the House Way and Means and Commerce Committees. Now, let's go home.

Mr. ROTH. I yield 5 minutes to the distinguished Senator from Vermont.

The PRESIDING OFFICER. May the Chair ascertain how many minutes?

Mr. ROTH. I yield 5 minutes.

The PRESIDING OFFICER. The distinguished Senator from Vermont is recognized for 5 minutes.

PRIVILEGE OF THE FLOOR

Mr. JEFFORDS. Mr. President, first I ask unanimous consent Lu Zeph and Tom Valuck, fellows on my staff, be granted the privilege of the floor during consideration of the conference report.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. JEFFORDS. Mr. President, I see the Senator from Iowa, with whom I have worked all these years, was here just a moment ago. I would like to wish him a happy 60th birthday. I am sure all of us would like to join in that, and I will move on now and get to the purpose of being here today.

Mr. President, I am thrilled that the Senate will soon send to the President the Work Incentives Improvement Act of 1999. This landmark legislation will open doors to jobs across the country for disabled Americans.

As we all know, the Federal Government often sets policies with the best of intentions, and the least of common sense. There are lots of examples, but today's policy for disability benefits takes the prize.

If you are disabled and don't work, you have access to federally funded health care. If you are disabled and you do work, you lose access to federally funded health care. Does it make any sense to you? No, it does not to me, either.

Access to health care is important to everyone, of course, but to severely disabled people it is absolutely vital for the everyday needs of life. And the price tag for this care can be astronomical.

Three years ago, this paradox was brought to my attention, and I began the process of trying to figure out how we could solve it.

I realized that, unless and until we gave individuals with disabilities access to health care, they would not, could not work to their full potential. That is why I am so proud that we are on the verge of changing the law that will, at last, change the lives of 9.5 million individuals with disabilities who have been waiting, pleading that we take this step.

These millions of Americans want and will use the job training and job placement assistance that this legislation authorizes. They will benefit from the advice and guidance that will be available on the complicated work incentives options in Federal law. They will go to work, work longer hours, work more hours, and seek advancement knowing that their health care will be there when they need it.

For those who look beyond what this legislation means in human terms, to its monetary applications, I say, you

will see results. The taxpayer rolls will expand. Use of Federal and State public assistance programs will decrease. Data on the health care needs and costs of working individuals with severe disabilities will be collected. Private employers and their insurers will have data from which they may calculate risks and craft health care insurance options for employees with disabilities.

This conference report represents sound federal policy. Last night our colleagues in the House, on a vote of 418 to 2, endorsed this policy. We must do the same. Let us celebrate and confirm the consensus we have achieved. Individuals with disabilities are waiting to show us how they are ready, willing, and able to join the workforce, support their families, and contribute to their communities and our national economy.

The action we are taking is the next logical step in our efforts to ensure that disabled Americans can fully participate in our society. In 1975 we guaranteed each child with a disability a free appropriate education through the precursor to the Individuals with Disabilities Education Act. In 1978, we prohibited discrimination based on disability in all services, programs, and employment offered by or through the federal government. In 1988, for the first time, we recognized and addressed the need to provide assistive technology to individuals with disabilities.

And in 1990, we enacted the most comprehensive civil rights law for individuals with disabilities, the Americans with Disabilities Act.

Each of these actions was a building block toward true independence for individuals with disabilities.

But the promise of employment rights under the ADA was an empty one for millions of Americans who couldn't afford to take advantage of their rights. Today, we are making good on that promise.

I want to again commend the principal cosponsors of this legislation, Senators KENNEDY, ROTH, and MOYNIHAN for their incredible contributions. Five months ago, the four of us joined President Clinton in a room just off the Senate floor to call for enactment of this legislation.

I was confident then that the day would soon come, and I am elated that it finally has. It is the end of the session, we are all tired, and some tempers are frayed. But Mr. President, as we conclude our work for the year and return to our states, this is one accomplishment of which we can all be proud.

The PRESIDING OFFICER. Who yields time?

The distinguished Senator from New York.

Mr. MOYNIHAN. Mr. President, I have the pleasure to yield up to 15 minutes to my good and old friend, the senior Senator from Massachusetts, who has been so instrumental in this matter.

The PRESIDING OFFICER. The distinguished Senator from Massachusetts is recognized for up to 15 minutes.

Mr. KENNEDY. Mr. President, I join with Senator MOYNIHAN and Senator ROTH in commending our colleagues on the Finance Committee for their strong work in helping bring us to where we are today. I thank them for their leadership.

I would especially like to acknowledge Senator JEFFORDS, who has been instrumental in the development of the legislation. And I, all of us on this side and throughout the Senate and across the country always recognize the real leader on all of the disability issues, our friend from Iowa, Senator HARKIN, who has had a lifetime of commitment on the issues of promoting the interests of disabled Americans. The Senate will welcome his comments this afternoon.

Today, Congress will complete action on the Ticket to Work and the Work Incentives Improvement Act, and this important legislation will go at long last to the White House. When President Clinton signs this bill into law, he will truly be signing a modern Declaration of Independence for millions of men and women with disabilities in communities across the country who will have a priceless new opportunity to fulfill their hopes and dreams of living independent and productive lives.

We know how far we have come in the ongoing battle over many decades to ensure that people with disabilities have the independence they need to be participating members of their communities.

Mr. President, 67 years ago this month we elected a disabled American to the highest office in the land. He became one of the greatest Presidents, but Franklin Roosevelt was compelled by the prevailing attitudes of his time to conceal his disability as much as possible. The World War II Generation began to change all that. The 1950s showed the Nation a new class of people—people with disabilities—as veterans returned from the war to an inaccessible society. Each decade since then has brought significant progress.

In the 1960s, Congress responded with new architectural standards so we could build a society of which everyone could be a part.

The 1970s convinced us that full participation in society was needed, not only for disabled veterans but for disabled children and family members and for those injured in everyday accidents. Congress responded with a range of federally funded programs which improved the lives of people with mental retardation, supported the rights of children with disabilities to go to school, ensured the right of people with disabilities to vote, and gave people with disabilities greater access to health care.

The 1980s brought a new realization that when we are talking about assisting people with disabilities, we must not look only to Federal programs, but to the private sector as well. Congress again responded by guaranteeing fair housing opportunities for people with disabilities, by ensuring access to air

travel, and making telecommunication advances available for people who are hard of hearing or deaf.

The 1990s brought us the Americans with Disabilities Act, which promised every disabled citizen a new and better life, in which disability would no longer put an end to the American dream.

But too often, for too many Americans, the promise of the ADA has been unfulfilled. Now, with this legislation, we will finally link civil rights clearly with health care. It isn't civil and it isn't right to send a person to work without the health care they need and deserve.

As Bob Dole stated in his eloquent testimony to the Finance Committee earlier this year, this issue is about people going to work—"it is about dignity and opportunity and all the things we talk about, when we talk about being an American."

Millions of disabled men and women in this country want to work and are able to work. But they have been denied the opportunity to work because they lack access to needed health care. As result, the Nation has been denied their talents and their contributions to our communities.

Current laws are an anachronism. Modern medicine and modern technology make it easier than ever before for disabled persons to have productive lives and careers. Current laws are often a greater obstacle to that goal than their disability itself. It's ridiculous that we punish disabled persons who dare to take a job by penalizing them financially, by taking away their health insurance lifeline, and by placing other unfair obstacles in their path.

Currently, there are approximately 9 million working-age adults who receive disability benefits, many of whom could take jobs if they could keep their governmentally financed health benefits. A national survey earlier this year showed that, while 76 percent of people with disabilities wanted to work, nearly 75 percent are unemployed. Of those receiving benefits, only 1/2 of 1% leave the disability roles to return to work.

Disability groups have estimated that about 2 million of the 8 million would consider forgoing disability payments and take jobs as a result of this legislation.

The estimated cost of this new program would be recouped if only 70,000 people leave the disability benefit roles. If 210,000 of them take jobs, the government would actually save \$1 billion annually in disability payments.

That 210,000 constitutes only 10% of the number of people who the disability community believe will avail themselves of this program. If their estimates are even close to accurate, the savings to the Federal Government could eventually approach \$10 billion per year. Far more important that the savings is the impact on people's lives. It is about dignity. It is about opportunity that is by far the most important charge.

Today is a new beginning for persons with disabilities in their pursuit of the American dream. This bill corrects the injustice they have unfairly suffered.

The Work Incentives Improvement Act removes these unfair barriers to work that face so many Americans with disabilities:

It makes health insurance available and affordable when a disabled person goes to work, or develops a significant disability while working.

It gives people with disabilities greater access to the services they need to become successfully employed.

It phases out the loss of cash benefits as income rises, instead of the unfair sudden cut-off that workers with disabilities face today.

It places work incentive planners in communities, rather than in bureaucracies, to help workers with disabilities learn how to obtain the employment services and support they need.

Many leaders in communities throughout the country have worked long and hard and well to help us reach this milestone. They are consumers, family members, citizens, and advocates. They showed us how current job programs for people with disabilities are failing them and forcing them into poverty.

In all the time I have been in the Senate, I doubt if there has really been a single piece of legislation that has so coherently reflected the common concerns of a constituency and all of that constituency worked so effectively on recommendations to the Congress of the United States.

We have worked together for many months to develop effective ways to right these wrongs. And to all of them I say, thank you for helping us to achieve this needed legislation. It truly represents legislation of the people, by the people and for the people. It is all of you who have been the fearless, tireless warriors for justice.

When we think of citizens with disabilities, we tend to think of men and women and children who are disabled from birth. But fewer than 15% of all people with disabilities are born with their disabilities. A bicycle accident or a serious fall or a serious illness can suddenly disable the healthiest and most physically able person.

In the long run, this legislation may be more important than any other action we have taken in this Congress.

I say that very sincerely. In the long run, this legislation may be the most important piece of legislation we have passed in this Congress. Its offers a new and better life to large numbers of our fellow citizens. Disability need no longer end the American dream. That was the promise of the Americans with Disabilities Act a decade ago, and this legislation dramatically strengthens our fulfillment of that promise.

This bill has a human face. It is for Alice in Oklahoma, who was disabled because of multiple sclerosis and receives SSDI benefits. She will now be able to get personal assistance to work

and live in here community. No longer will she have to use all of her savings and half of her wages to pay for personal assistance and prescription drugs. No longer will she be left in poverty.

This bill is for Tammy in Indiana, who has cerebral palsy and uses a wheelchair and works part-time at Wal-Mart. No longer will she be forced to restrict her hours of work. Her goals of becoming a productive citizen will no longer be denied—because now she will have access to the health care she needs.

This bill is for Abby in Massachusetts, who is six years old and has mental retardation. Her parents are very concerned about her future. Already, she has been denied coverage by two health insurance firms because of the diagnosis is of mental retardation. Without Medicaid, her parents would be bankrupted by her current medical bills. Now when Abby enters the work force, she will not have to live in poverty or lose her Medicaid coverage. All that will change, and she will have a fair opportunity to work and prosper.

This bill is for many other citizens whose stories are told in this diary, called "A Day in the Life of a Person with a Disability."

Disabled people are not unable. Our goal in this legislation is to banish the stereotypes, to reform and improve existing disability programs, so that they genuinely encourage and support every disabled person's dream to work and live independently, and be a productive and contributing member of their community. That goal should be the birthright of all Americans—and with this legislation, we are taking a giant step toward that goal.

A story from the debate on the Americans with Disabilities Act illustrates the point. A postmaster in a town was told that he must make his post office accessible. The building had 20 steep steps leading up to a revolving door at the only entrance. The postmaster questioned the need to make such costly repairs. He said, "I've been here for thirty-five years, and in all that time, I've yet to see a single customer come in here in a wheelchair." As the Americans with Disabilities Act has proved so well, if you build the ramp, they will come, and they will find their field of dreams. This bill builds new ramps, and vast numbers of the disabled will now come—to work.

The road to economic prosperity and the right to a decent wage must be more accessible to all Americans—no matter how many steps stand in the way. That is our goal in this legislation. It is the right thing to do, and it is the cost effective thing to do. And now we are finally doing it.

Eliminating these barriers to work will help disabled Americans to achieve self-sufficiency. We are a better and stronger and fairer country when we open the door of opportunity to all Americans, and enable them to be equal partners in the American dream.

For millions of Americans with disabilities, this bill is a declaration of independence that can make the American dream come true. Now, when we say "equal opportunity for all," it will be clear that we mean all.

No one in America should lose their medial coverage—which can mean the difference between life and death—if they go to work. No one in this country should have to choose between buying a decent meal and buying the medication they need.

Nearly a year ago, President Clinton signed an executive order to increase employment and health care coverage for people with disabilities. Today, with strong bipartisan support, Congress is demonstrating its commitment to our fellow disabled citizens. But our work is far from done.

This bill is only the first step in the major reform of the Social Security disability programs that will enable individuals with disabilities to have the rights and privileges that all other Americans enjoy; 54 million Americans with disabilities are waiting for our action. We will not stop today, we will not stop tomorrow, we will not ever stop until America works for all Americans.

Mr. President, in these final moments, I especially commend President Clinton, Vice President Gore, and Secretary Shalala. President Clinton made this one of his top priorities over this year and during these final negotiations. He understands the importance of this legislation, and this was a matter of central importance to him and his Presidency.

I also thank John Podesta and Chris Jennings who saw this through to the very end.

I commend the many Senate staff members whose skilled assistance contributed so much to the achievement: Jennifer Baxendale, Alec Vachon, and Frank Polk of Senator ROTH's staff; Kristin Testa, John Resnick, Edwin Park, and David Podoff of Senator MOYNIHAN's staff; Pat Morrissey, Lu Zeph, Chris Crowley, Jim Downing, and Mark Powden of Senator JEFFORDS' staff; Connie Garner—a special thanks to Connie Garner—Jim Manley, Jonathan Press, Jeffrey Teitz, and Michael Myers of my own staff; and the many other staff members of the Health Committee and the Finance Committee.

No longer will disabled Americans be left out and left behind. The Ticket to Work and the Work Incentives Improvement Act of 1999 is an act of courage, an act of community, and, above all, an act of hope for the future. I urge its passage, and I reserve the remainder of the time of the Senator from New York.

Mr. ROTH addressed the Chair.

The PRESIDING OFFICER (Mr. GRAMS). The Senator from Delaware.

Mr. ROTH. Mr. President, I yield 10 minutes to the Senator from New Mexico.

The PRESIDING OFFICER. The Senator from New Mexico is recognized for 10 minutes.

Mr. DOMENICI. Thank you very much, I say to Senator ROTH.

I might say, on the bill that we are speaking to, the Ticket to Work and Work Incentives Improvement Act, I do not know how many Senators have ever had a disabled person who is holding a job and getting a paycheck. Come and see them. A disabled person who is holding a job and just got a paycheck—and you get to visit with them—they are glowing. They are filled with pride that they are able to work. Actually, it is the best therapy in the world for a disabled person to have a job.

I happen to know that from personal experience in my own family. But I have seen it in scores of faces of people who come and tell me as disabled people that they are working and they are getting a paycheck.

The U.S. Government, probably because it did not understand what it was doing, decided that we would help disabled people who were not working with health insurance, either under Medicare or Medicaid. Then what a cruel hoax, as soon as they started working and making sufficient money, as low as \$700 a month, they started losing their health care coverage, and they began to wonder and their parents began to wonder, why did they ever take a job?

For some, they did not even make any net profit out of getting a job. Because if they are cut off from health care, some of them have to pay their entire paycheck to take care of their illness. That is just not right. Frankly, it was a hard issue in terms of drafting something that could work, and I compliment everybody that worked on this bill. I think it is a very important day today.

In fact, I am sorry it is getting passed along with a great deal of other legislation because the importance of it might very well get lost. Sometimes a long debate on a bill is meritorious, for the country finds out what we are doing. They are not necessarily going to find out about this bill because we did not use a lot of time today. But I asked the distinguished chairman if I could use a few moments and he gave it to me. Now, if the Senate would bear with me, I just want to take the remaining time I have, and how much is that?

The PRESIDING OFFICER. The Senator has 7 minutes remaining.

THE BUDGET

Mr. DOMENICI. I am going to take a few moments to thank a few people and summarize the budget bill that we are going to pass this evening, hopefully.

I want to thank the White House for their cooperation in coming to an agreement with reference to the appropriations bill and all of those things that are in the so-called omnibus package.

In particular, I want to thank the director of the Office of Management and Budget, Mr. Lew. The last evening

understand what we were doing, and worked with us. He now is a budget expert. That is good. From time to time, I am very glad we can take matters into his office and he understands it thoroughly.

With that, I yield the floor.

TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999—CONFERENCE REPORT—Continued

PRIVILEGE OF THE FLOOR

Mr. MOYNIHAN. Mr. President, I ask unanimous consent that Kyle Kinner, a presidential management intern with the Finance Committee minority staff, be granted the privilege of the floor during the consideration of this conference report.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MOYNIHAN. I have the great pleasure to yield 5 minutes to my friend from Illinois, Senator DURBIN.

The PRESIDING OFFICER. The Senator from Illinois is recognized for 5 minutes.

Mr. DURBIN. I salute Senator ROTH, Senator MOYNIHAN, Senator KENNEDY, Senator JEFFORDS, Senator HARKIN, and others who worked so hard on this Work Incentives Improvement Act.

A close friend of my family had a son who was mentally ill. This young man wanted more than anything to go to work. He knew if he did so, he would lose the protection of health insurance. So he was held back from that opportunity. I don't believe he was better for that. I don't believe America was better for that.

This bill addresses that challenge and says that as the disabled go to work, they will still be able to use Medicaid and Medicare to protect themselves with health insurance even as they earn some income. That is only just. It opens up an opportunity that currently is not there. I am happy to be a supporter of this legislation. I look forward to voting for it when it comes to the floor.

There is some reservation in my mind about the bill that is before us, not because of the provision I just mentioned, nor because of the extension of certain tax credits and benefits, but, rather, because of the language in this bill relating to organ donation.

This is the challenge we face in America. If you are an American grievously ill, in need of an organ transplant, your chances of survival depend more than anything on your address and how much money you have. You could be the most seriously ill person in some State in this Union and be overlooked and bypassed in favor of another patient in another State who is not as seriously ill and might be able to wait. That needs to change. That is certainly not a fair or American way.

The rules we are trying to promulgate to make that change have been the source of great controversy on Capitol Hill. It is sad when it comes to a

point where Members of the House and Senate are deeply involved in a debate over the availability of organs for donation to those who need a transplant to live.

In my State of Illinois, over the last 3 years, 97 people have died waiting for organ transplants at the University of Chicago. I see my colleague from the State of Pennsylvania, Senator SANTORUM, where 187 people died waiting at the University of Pittsburgh. My colleagues, Senator MOYNIHAN and Senator SCHUMER, know that 99 people died waiting at Mount Sinai in New York. In the last week alone, two people have died at one of the Chicago transplant centers because an organ did not become available.

If you are an American who needs a liver transplant to survive and you live in the following States, you have much less chance of receiving the transplant: Arizona, California, Colorado, Connecticut, Illinois, Massachusetts, Maryland, Michigan, New York, or Pennsylvania.

This is not a fair system. It is a system which cries out for justice and one that cries out for the politicians to step aside. Let the medical community find the best and most efficient way organs can move to the people who need them to live, instead of getting caught up in some special interest tangle here or political dogfight. It is sad that we are now in a situation on this bill where we have not resolved this contentious issue. I sincerely hope all parties will come together, and soon, to make certain that changes are made to make the system fairer. We know, by the people we represent, that this is literally a life-or-death argument.

Kathryn Krivy lives in Chicago. She runs the wellness clinic at the Northwestern Memorial Hospital. She is desperately in need of a new liver. She has developed primary biliary cirrhosis, a very rare autoimmune disease that is incurable. She has been on the transplant list in Chicago for over 2 years, but currently, because of the delay, she has decided to sign up at the Mayo Clinic in Minnesota because it is much more likely she can receive a transplant in a shorter period of time. She has the knowledge and the resources to make that decision, but many of the poorer people in America waiting for an organ transplant do not have that luxury.

We should not reach the point in America where something as basic as the gift of life, an organ donation, depends on your home address. That is exactly what has occurred. An estimated 66,000 potential organ recipients are waiting their turn. Only 20,000 will see an organ transplant this year. Nearly, 5,000 Americans will die each year, at least 13 every day, while awaiting organ transplants. Of those, it is estimated that 300 to 1,000 Americans, maybe up to 3 a day, might be spared if this system were fairer and were revised. Unfortunately, that is not the case.

Though this is an excellent bill which I support, I believe it is a sad commentary that we have reached this state of affairs. I hope in the next session of Congress we can bring justice to organ donation.

I yield the floor.

Mr. ASHCROFT. Mr. President, today the United States Senate completes its business for calendar year 1999 by passing two important bills: H.R. 3194—the final spending bill, and H.R. 1180—the Work Incentives Act, which provides new opportunities for disabled individuals to enter the work force and includes \$18 billion dollars in tax cuts. I am pleased to announce my support for both these bills.

The Chairman of the Senate Budget Committee has eloquently explained how this budget agreement keeps faith with the Republican pledge that no Social Security trust fund monies be used to pay for other government programs.

Last year, for the first since 1960—during the Eisenhower Administration—we balanced the budget without counting the Social Security surplus. Mr. President, for the first time in 39 years the government did not divert money from the Social Security Trust Fund to pay for other programs.

As a result of the spending plan pursued by this Republican Congress, which called for protection of Social Security, increased spending on education and defense, and reduction of the national debt, we have begun to put our fiscal House in order.

When I was elected to this body in 1994, the incoming 104th Congress inherited a projected four-year budget deficit of \$906 billion. Now, through the hard work and discipline of this Congress, the tables have turned. That actual four-year period produced a net budget surplus of \$63 billion—a turnaround of \$969 billion, just a shade under a trillion dollars. With the passage of the final FY 2000 appropriations bill, we will continue on that path, reducing our national debt by \$140 billion dollars in the current fiscal year.

Unlike last year's omnibus appropriations package that increased spending by almost \$14 billion, this Congress successfully obtained offsets for all of the President's new spending, including an across-the-board cut that will help eliminate government waste and excess. In addition, despite President Clinton's best efforts, the offsets do not include a tax increase.

At the beginning of this year, I said that the Congress' primary responsibility was to protect the Social Security surplus. With the passage of this budget, we have accomplished that goal. In addition, not only have we avoided a tax hike, but we have also given the American people an \$18 billion tax cut through the provisions contained in H.R. 1180—the Work Incentives Act.

I am pleased that the final bill includes over \$2 billion in additional education spending over last year and gives local school districts more flexibility in how they spend that federal

assistance. The appropriations bill also contains an increase of \$1.7 billion for veterans spending above President Clinton's request, as well as an increase in funding for national defense that includes a boost in pay and benefits for our soldiers, sailors, and airmen.

But this bill does not just fund these important priorities, it also provides real cuts in government waste and abuse. The legislation includes a 0.38% across the board reduction that is essential to maintaining our fiscal discipline and protecting Social Security.

Included in this package are provisions to address some unintended consequences of the Balanced Budget Act of 1997 to protect Medicare recipients and providers. This bill includes \$16 billion over 5 years to ensure that senior citizens can continue to receive quality health care.

These Medicare changes will help Medicare patients in hospitals—particularly rural, teaching, and cancer hospitals—skilled nursing facility residents, home health care recipients, and seniors who wish to receive their health care through the innovative Medicare+Choice program rather than through the conventional fee-for-service mechanism. I have traveled around Missouri and heard from countless doctors, patients, nurses, and other health care providers about the necessity of these changes. These provisions are good for the seniors in Missouri and across the Nation.

The package also provides for State Department Reauthorization, including language I authored that requires the State Department to publish a report documenting American victims of terrorist attacks in Israel, Gaza, and the West Bank.

In addition, the almost 400,000 Missouri households that are satellite television viewers will be pleased that this bill includes language that will allow them to continue receiving local programming. The Satellite Home Viewer Act will give real price competition and choice in video programming to all Missourians.

Finally, Mr. President, I am pleased that unlike last year, when we lumped all the bills together, allowing \$14 billion in extra spending into one package, this year we finished our work on each of the bills, and negotiated each bill on its individual merits. While this bill is an omnibus package for procedural reasons, it was not negotiated as an omnibus package. Every provision was negotiated according to regular order, and as a result, we were able to succeed in our goal of protecting Social Security.

Mr. WELLSTONE. Mr. President, I rise to support this conference report and I say, Mr. President, that I am very happy to have been an original cosponsor of the Work Incentives Improvement Act of 1999.

People all across Minnesota who have contacted my office know the importance of the Work Incentives Improve-

ment Act and how it will further expand the possibilities opened up by the Americans with Disabilities Act which was enacted in 1990. Thanks to the ADA, many people with disabilities in Minnesota and around the country are working, but others still cannot accept jobs because they would lose their health care coverage. This Act will allow them to fulfill their dreams for employment and to be productive citizens.

This legislation has enjoyed overwhelming bipartisan support—with 79 Senate cosponsors. It would make it easier for those receiving disability benefits through Social Security programs to go to work without losing their Medicare or Medicaid health benefits. The legislation also encourages the disabled to seek paid employment by gradually reducing their cash benefits as income increases, rather than cutting them off completely.

Let's look at the current situation for disabled individuals who seek employment and require health insurance coverage. For some of these people, employer-based coverage is unavailable because they are self-employed or because their disabilities prevent them from working full-time. For others, coverage is unaffordable because of copays and co-insurance for repeated, ongoing treatments. For those offered affordable employer insurance, these plans generally cover only primary and acute care, not the specialized medications, equipment, supplies and other long term care needs that individuals with disabilities unfortunately require.

Last year, in the Spring of 1998, the Minnesota Consortium for Citizens with Disabilities surveyed 1200 Minnesotans who have disabilities and found the vast majority were ready to go to work if their current health care benefits remained intact.

Here are two examples from Minnesota:

Let me tell my colleagues about Steve. Steve is a middle-aged adult with advanced Limb Girdle Muscular Dystrophy. He is married, has two grown children, and owns his own home in rural Minnesota. As the manifestations of his condition progressively worsen, Steve has struggled to remain self-sufficient as long as possible using all of his personal resources. Steve's desire to remain an independent contributing member of society is evident in his efforts to develop the skills that enable him to work from home in a computer-based business. Steve is on SSDI making him eligible for Medical Assistance that pays for his health care needs. He is growing weaker and cannot afford to lose his medical assistance eligibility. Steve has a fledgling publishing business; ghost-writing and copy-writing. He crafts sales ads and creates direct mail advertising packages. Steve uses the Internet to market his services. He uses his website as a forum for other authors to advertise their books. He sells space as one would a classified ad. Steve is be-

coming involved with e-bay auctioning focusing on books—first editions and autographed copies. Steve says the Work Incentives Improvement Act is his only opportunity to become financially independent. "If a person in my position is at risk for all of the medical expenses that one could incur, that is a big incentive not to try to get ahead. I still have my pride, my ego, the desire to rise above."

Another Minnesotan whose story I would like to tell is Jean. Jean is in her mid-forties and has had Charcot-Marie-Tooth Disease since early childhood. Her muscles have wasted away from her elbows to her finger tips and from her thighs to her toes. She has trunk weakness and uses a power wheelchair for mobility. Jean works in an office as a clerk-typist using a pencil held between her two hands to strike the computer keys and a trackball to navigate her computer. Jean's career is limited by not being able to accept raises, declining wage rewards for the continuing education and skills she has gained, because if she accepted these well deserved raises, she would exceed Supplemental Security Income's (SSI) earnings threshold of just \$500/month and lose her eligibility for medical assistance. "It just seems unfair that people with disabilities don't have the same opportunities to advance in their careers. Why can't we earn enough money to live in a house? To purchase a van with a lift? To travel?"

These are but two of the thousands of disabled Americans who, with guaranteed continued health care coverage—coverage they already have—would be able to lead more productive lives, productive for themselves, for their families and for their communities. In my state there are not enough workers to meet the needs of Minnesota employers, and I know it is also the case in many communities around the country. According to the Disability Institute, in 7 years Minnesota will need 1 million new workers. The Work Incentives Improvement Act will help match the needs of Minnesota's disabled community with Minnesota employers. That is what I call a real win-win situation.

When President Bush signed the Americans with Disability Act in 1990, he noted that when you add together all the state, federal, local and private funds, it costs almost \$200 billion annually to support people with disabilities—to keep them dependent. The ADA was the first giant step forward to allow Americans with disabilities to be independent. The Work Incentives Improvement Act of 1999 which we have before us today is another giant step along the same path, and today I am happy to say that we will be taking that step.

Mr. FRIST. Mr. President, yesterday, the House and Senate Conference Committee reached agreement on the Ticket to Work and Work Incentives Improvement Act of 1999, which addresses

a fundamental inequity for individuals with disabilities.

As a heart and lung transplant surgeon, I witnessed unfair discrimination against patients with disabilities. After a successful transplant, several of my patients were faced with a serious dilemma. They had to choose between keeping their health insurance coverage or returning to work. Under current law, if these patients choose to return to work and earn more than \$500 per month, they lose their disability payments and health care coverage provided through Medicare and Medicaid as part of their Social Security Disability Insurance (SSDI). This is health care coverage that they simply cannot get in the private sector, as it is extremely difficult for individuals with severe disabilities to obtain coverage due to their medical history.

Let me illustrate the profound impact this dilemma has had on our disabled Americans. Today, the unemployment rate among working-age adults with disabilities is nearly 75 percent. Only 7% of disabled Americans—318,728 of the 4.2 million non-blind individuals with disabilities—were working in 1997, according to the General Accounting Office. Many persons with disabilities who currently receive federal disability benefits, such as SSDI and Supplemental Security Income (SSI), want to work; however, less than one-half of one percent of these beneficiaries successfully forego disability benefits and become self-sufficient. If disabled individuals try to work and increase their income, they lose their disability cash benefits and their health care coverage. The loss of these benefits is simply too powerful of a disincentive to return to work.

In addition, more than 7.5 million disabled Americans receive cash benefits from SSI and SSDI. Disability benefit spending for SSI and SSDI totals \$73 billion a year, making these disability programs the fourth largest entitlement expenditure in the federal government. If only one percent—or 75,000—of the 7.5 million disabled adults were to become employed, federal savings in disability benefits would total \$3.5 billion over the lifetime of the beneficiaries. Removing barriers to work is not only a major benefit to disabled Americans in their pursuit of self-sufficiency, but it also contributes to preserving the Social Security Trust Fund.

This legislation is critical to the health and well-being of our disabled Americans. It will create new opportunities for individuals with disabilities to return to work while allowing them to maintain their health insurance coverage and disability benefits. In particular, this bill expands new options to states under the Medicaid program for workers with disabilities; continues Medicare coverage for working individuals with disabilities; and establishes a ticket to work and self-sufficiency program.

I would like to thank Senator JEFFORDS for his leadership on this critical

issue. I would also like to thank Senators LOTT, ROTH, MOYNIHAN and KENNEDY and their House colleagues for their dedication toward reaching consensus on this important legislation.

Mr. KOHL. Mr. President, I rise today in support of the Work Incentives Conference Report. As my colleagues know, this conference report contains a number of items that have been joined together in order to accommodate the end of session schedule, and I would like to offer brief comments on several of those items.

With regard to the tax portion of the conference report, I am in support of the compromise that was reached to extend the expired tax credits. Earlier this year, I supported an ambitious tax relief package which extended the credits and contained my child care tax credit and farmer income averaging relief provisions, as well as targeted tax measures to help Americans pay for education and health care and to expand the low-income housing tax credit. Hardworking American taxpayers created the budget surplus, and a significant portion of that surplus should be returned to them, allowing them to keep more of their own paychecks and helping them plan for their future. It is my hope that when we return in the spring, we will rise above partisan concerns and achieve bipartisan progress towards comprehensive tax relief, as well as the challenge of reforming both Medicare and Social Security. And we must do so while continuing our vigilance in protecting the balanced budget gains of recent years.

But for today we will content ourselves with the limited extenders package before us. The research and development tax credit promotes innovation and enhances the competitiveness of American business. The work opportunity and welfare-to-work tax credits continue the partnership between the public and private sector to move those in need of a helping hand off of public assistance and into the workforce. I am also pleased that this tax package preserves eligibility to important tax benefits, such as the child tax credit, by protecting against the encroachment of the alternative minimum tax. While I am concerned that the conferees did not offset fully the costs of these provisions and would have preferred a final version along the lines of the bipartisan, and fully offset, Senate bill, this package is modest and urgently needed. It deserves our endorsement.

I am extremely pleased that we are finally taking the final step to enact the Work Incentives Improvement Act into law. I cosponsored this legislation because I believe strongly that it will have a tremendous impact on the lives of people with disabilities.

Currently, over 9 million people receive disability benefits through the SSDI and SSI programs. Only 1/2 of 1 percent of SSDI beneficiaries, and only 1 percent of SSI beneficiaries ever return to work. Yet we know that many—in fact, the vast majority—of

people with disabilities want to work. In study after study, people with disabilities report that the single biggest obstacle to returning to work is the loss of health care benefits that often comes along with their decision to work. Many do not have access to employer-based health insurance and find policies in the individual insurance market prohibitively expensive. Therefore, disabled beneficiaries who want to work are faced with the choice of returning to work while risking their health benefits or forgoing work to maintain health coverage.

This is simply unacceptable. People with disabilities deserve every opportunity to live healthy, productive lives, and we should encourage and support their efforts to work by ensuring that they continue to have access to the health care services they need. I am pleased that the Work Incentives Improvement Act accomplishes that goal. This bill will ensure that millions of people with disabilities have the opportunity to work if they are able—without the fear of losing the health insurance coverage they need in order to live healthier lives and to succeed in their work. I want to commend the bipartisan efforts of Chairman ROTH, Senator MOYNIHAN, Chairman JEFFORDS, and Senator KENNEDY, in making this bill a reality.

Again, I regret that end-of-year pressure has forced us to combine so many unrelated provisions into a single bill. However, I support the conference report for the reasons I have just stated, and I urge my colleagues to vote for its adoption.

Mr. ALLARD. Mr. President, it is with great reluctance that I vote for the Work Incentives Act Conference Report.

A particular provision, Section 408, has been added to this important piece of legislation at a date too late to make further changes. Section 408 was introduced in the House, included in the Conference Report, but never debated in the Senate. I am a cosponsor of the Senate version of this bill.

In an effort to finish the first session of the 106th Congress we have had no time to sound our concerns and make due changes. Section 408 extends the authority of state Medicaid fraud units. Not only would this provision mandate more federal control over what has been historically governed by the states, it also calls for investigation and prosecution of resident abuse in non-Medicaid board and care facilities. This provision allows the federal government unprecedented control over the quality of care in private institutions. This is yet another example of government authority exceeding its' boundaries. I have always been a supporter of state's rights and less government control and I feel these regulations are best promulgated by the states. Certainly they should not be promulgated in the final days of the session.

It is my opinion that we must reduce the amount of federal government regulation and not further impede the rights of care providers and state officials to monitor private industry. I make an effort to examine all pieces of legislation to ensure that the end results is objective and does not further burden individuals with undue regulation.

Again it is with great reluctance that I vote for this act. The changes made in the Conference Report at this late date are onerous and threaten the sanctity of private health care providers.

Mr. LIEBERMAN. Mr. President, I rise to express my support for the tax extenders package included in the Work Incentives Act conference report. In the context of our current budget situation of a small projected on-budget surplus for FY 2000, I believe this tax package strikes an important balance between fiscal responsibility and tax relief.

Although I would have preferred a fully offset tax package, I am pleased that the bill is fully offset for FY2000 and partially offset for FY2001, the two years for which most of the tax provisions are extended by law. If two years from now when we reconsider most of these provisions a on-budget surplus does not exist, I will push for an extenders package that is fully offset to ensure that we do not go into deficit as a result of tax relief measures.

The package includes several important provisions that I strongly support. The Research and Experimentation Tax Credit is important for our future international competitiveness. This tax credit provides an important incentive for our companies to research and innovate. I hope that in the near future we will update this credit to reflect current business conditions and to make it a permanent part of the tax code.

The AMT modification, the Worker Opportunity Tax Credit, and the Welfare-to-Work Tax Credit are all important provisions to help low to moderate income earners create more opportunities and to improve their living standards. I am pleased that the Finance Committee decided to include renewal of the Generalized System of Preferences in this tax package. This is a critical program for promoting growth in developing economies and for increasing international trade integration.

I strongly support the provision to extend and modify the tax credit for electricity produced by wind and biomass materials. In order to ensure energy security and address national environmental priorities such as clean air and mitigation of global climate change, it is essential that renewable energy options become more competitive. These tax provisions will ensure that renewable energy technologies will be able to compete more equitably with fossil sources such as coal and oil. However, while this package includes

modest extensions and modifications, I am disappointed that the bill does not go further by extending the credit to include landfill methane and other cellulosic feedstocks.

I would like to thank Chairman ROTH and Senator MOYNIHAN for their hard work in getting this package together. It is a fiscally responsible and an appropriate package under our current fiscal situation. I urge my colleagues to support this bill.

Mr. JEFFORDS. Mr. President I am delighted to stand before you today, to speak about an extremely important piece of legislation. The bill we are sending to the President today, a bill I know he is eager to sign into law, will have a tremendous impact on people with disabilities. In fact, this legislation is the most important piece of legislation for the disability community since the Americans with Disabilities Act.

My reason for sponsoring this particular piece of legislation is quite simple. The Work Incentives Improvement Act of 1999 addresses a fundamental flaw in current law. Today, individuals with disabilities are forced to make a choice . . . an absurd choice. They must choose between working and receiving health care. Under current federal law, if people with disabilities work and earn over \$700 per month, they will lose cash payments and health care coverage under Medicaid or Medicare. This is health care coverage that they need. This is health care coverage that they cannot get in the private sector. This is not right.

Once enacted, the Work Incentives Improvement Act of 1999 will allow individuals with disabilities, in states that elect to participate, continuing access to health care when they return to work or remain working. In addition, those individuals who seek it, will have access to job training and job placement assistance from a wider range of providers than is available at this time. Currently, there are 9.5 million individuals with disabilities across the country who receive cash payments and health care coverage from the federal government. Approximately 24,000 of these individuals live in my home state, Vermont. Once enacted, the Work Incentives Improvement Act will actually save the federal government money. For example, let's assume that 200 Social Security disability beneficiaries in each state return to work and forgo cash payments. That would be 10,000 individuals out of the 9.5 million individuals with disabilities across the country. The annual savings to the Federal Treasury in cash payments for just these 10,000 people would be \$133,550,000! Imagine the savings to the Federal Treasury if this number were higher. Clearly, the Work Incentives Improvement Act of 1999 is fiscally responsible legislation.

I began work on this bill 1996. Though it was a long and sometimes difficult task, many hands made light work. Senator KENNEDY, Ranking member on

the HELP Committee, joined me in March 1997. Senators ROTH and MOYNIHAN, Chairman and Ranking Member on the Finance Committee signed on as committed partners in December of 1998. Last January, 35 of our colleagues, from both sides of the aisle, joined us in introducing S. 331, the Senate version of this legislation. One week later, in a Finance Committee hearing, we heard compelling testimony from our friend, former Senator Dole, a strong supporter of this legislation. A month later, we marked this legislation out of the Finance Committee with an overwhelming majority in favor of the bill. Finally, on June 15th, with a total of 80 cosponsors, we passed this legislation on the floor of the United States Senate, with a unanimous vote of 99-0.

Four months later, over 35 of our colleagues in the House of Representatives, took to the floor of their chamber, and spoke eloquently for their version of this legislation. Later that day, the bill passed the floor of the House with a vote of 412-9. Since then, the Senate and House Conferees have been working diligently in effort to reach common ground. I am very pleased today, that the differences in policy in the two different bills have been resolved and consensus has been reached on a conference agreement. This agreement does not compromise the original intent of the legislation, retaining key provisions from S. 331.

From my perspective, the Work Incentives Improvement Act of 1999 represents a natural and important progression in federal policy for individuals with disabilities. That is, federal policy increasingly reflects the premise that individuals with disabilities are cherished by their families, valued and respected in their communities, and are an asset and resource to our national economy. Today, most federal policy promotes opportunities for these individuals, regardless of the severity of their disabilities, to contribute to their maximum potential—at home, in school, at work, and in the community.

I have been committed to improving the lives of individuals with disabilities throughout my Congressional career. Providing a solid elementary and secondary education for children with disabilities, so that they will be equipped, along with their peers, to benefit from post-secondary and employment opportunities is crucial. When I came to Congress in 1975, Public Law 94-142, the Education for all Handicapped Children Act, now the Individuals with Disabilities Education Act (IDEA), was enacted into law. IDEA assures each child with a disability, a free and appropriate public education. I am proud to be one of the original drafters of this legislation which has reshaped what we offer to and expect of children with disabilities in our nation's schools.

In addition, I have been committed to providing job training opportunities for individuals with disabilities. In

1978, I played a central role in ensuring access to programs and services offered by the federal government for individuals with disabilities through an amendment to the Rehabilitation Act. I believe that this amendment alone laid the foundation for significant legislation that followed, including the Technology-Related Assistance for Individuals with Disabilities Act of 1988, now the Assistive Technology Act of 1998, both of which I drafted. Most importantly, this legislation opened the doors for the most comprehensive piece of legislation of all, the Americans with Disabilities Act of 1990. This legislation prohibits discrimination on the basis of disability in employment, public services, public accommodations, transportation, and telephone service.

These laws have forever changed the social landscape of America. They serve as models for other countries who recognize that their citizens with disabilities are an untapped resource. In our country, individuals with disabilities are seen everywhere, doing everything. Just this past weekend, thousands of physically disabled individuals participated in the New York City Marathon, as they have been doing for years. The expectations that these people set for themselves and the standards we apply to them have increasingly been raised, and now in many circumstances equal those set and applied to other individuals.

Unfortunately, one major inequity remains. That is, the loss of health care coverage if an individual on the Social Security disability rolls chooses to work. Individuals with disabilities want to work. They have told me this. In fact, a Harris survey found that 72 percent of Americans with disabilities want to work, but only one-third of them do work. With today's enactment of the Work Incentives Improvement Act of 1999, individuals with disabilities will no longer need to worry about losing their health care if they choose to work a forty-hour week, to put in overtime, or to pursue career advancement. Individuals with disabilities are sitting at home right now, waiting for this legislation to become law. Having a job will provide them with a sense of self-worth. Having a job will allow them to contribute to our economy. Having a job will provide them with a living wage, which is not what one has through Social Security.

In addition to continuing health care coverage and providing job training opportunities for individuals with disabilities, this legislation offers many other substantial long-term benefits. The Work Incentives Improvement Act of 1999 will give us access to data regarding the numbers, the health care needs, and the characteristics of individuals with disabilities who work. Furthermore, this legislation will provide the federal government as well as private employers and insurers, the facts upon which to craft appropriate future health care options for working individuals with disabilities. It will allow

employers and insurers to factor in the effects of changing health care needs over time for this population. Hopefully, it will even improve the way in which employers operate return-to-work programs. Through increased tracking of data, we will learn the benefits of intervening with appropriate health care, when an individual initially acquires a disability. We will also learn the value of continuing health care to a working individual with a disability. If an individual, even with a severe disability, knows that he or she has access to uninterrupted, appropriate health care, the individual will be a healthier, happier and thus more productive worker.

I would like to take the time now to briefly outline the major provisions which have remained as part of this legislation. The conference agreement retains the two state options of establishing Medicaid buy-ins for individuals on Social Security disability rolls, who choose to work and exceed income limits in current law, as well as for those who show medical improvement, but still have an underlying disability. For working individuals with disabilities, the conference agreement extends access, beyond what is allowed in current law, to Medicare. In addition, the legislation before us today retains several key provisions from S. 331, including, the authority to fund Medicaid demonstration projects to provide access to health care to working individuals with a potentially severe disability; the State Infrastructure Grant Program, to assist states in reaching and helping individuals with disabilities who work; work incentive planners and protection and advocacy provisions; and finally, most of the provisions in the Ticket to Work Program.

In order to control the cost of this legislation, compromises were made. Although the purpose of the State Infrastructure Grant Program and the Medicaid Demonstration Grant Program remain the same, the terms and conditions of these grants were altered in conference. As a result, states are not required to offer a Medicaid buy-in option to individuals with disabilities on Social Security, who work and exceed income limits in current law, prior to receiving an Infrastructure or a Medicaid Demonstration Grant.

Also in Conference, the extended period of eligibility for Medicare for working individuals with disabilities has been changed from 24 to 78 months. During this extended period, the federal government is to cover the cost of the Part A premium of Medicare for a working individual with a disability, who is eligible for Medicare. S. 331 would have extended such coverage for an individual's working life, if he or she became eligible during a 6-year time period.

I would like to note two changes to the Ticket to Work program made during Conference. The new legislation shifts the appointment authority for the members of the Work Incentives

Advisory Panel from the Commissioner of Social Security to the President and Congress. In addition, language regarding the reimbursements between employment networks and state vocational rehabilitation agencies was deleted in Conference. The new legislation gives the Commissioner of Social Security the authority to address these matters through regulation.

Although several changes have been made from the original Work Incentives bill, I am still very pleased with what we are adopting today. This is legislation that makes sense, and it will contribute to the well-being of millions of Americans, including those with disabilities and their friends, their families, and their co-workers. Today's vote provides us the opportunity to bring responsible change to federal policy and to eliminate a misguided result of the current system—if you don't work, you get health care; if you do work, you don't get health care. The Work Incentives Improvement Act of 1999 makes living the American dream a reality for millions of individuals with disabilities, who will no longer be forced to choose between the health care coverage they so strongly need and the economic independence they so dearly desire.

In closing, I would like to thank the many people who contributed to reaching this day. I especially thank the conferees, Majority Leader LOTT, Senators ROTH and MOYNIHAN, and in the House, Majority Leader ARMEY, and Congressmen ARCHER, BLILEY, RANGEL, and DINGELL. I also thank their staff who worked so closely in effort to reach this day. From my staff, I thank Pat Morrissey, Lu Zeph, Leah Menzies, Chris Crowley, and Kim Monk. I want to recognize and extend my appreciation to the staff members of my three fellow sponsors of this bill; Connie Garner in Senator KENNEDY'S office, Jennifer Baxendell and Alexander Vachon with Senator ROTH, and Kristen Testa, John Resnick, and Edwin Park from Senator MOYNIHAN'S staff. Finally, I wish to thank Ruth Ernst with the Senate Legislative Counsel for her drafting skill and substantive expertise, her willingness to meet time tables, and most of all, her patience. In addition to staff, we received countless hours of assistance and advice from the Work Incentives Task Force of the Consortium for Citizens with Disabilities. These individuals worked tirelessly to educate Members of Congress about the need for and the effects of this legislation.

Finally, I would like to urge my colleagues in both chambers to set aside any concerns about peripheral matters and to focus on the central provisions of this legislation. Let's focus on what today's vote will mean to the 9.5 million individuals with disabilities across the nation. At last, these individuals will be able to work, to preserve their health, to support their families, to become independent, and most importantly, to contribute to their communities, the economy, and the nation.

We are making a statement, a noble statement and we must do the right thing. Let's send this bill to the President.

Mr. REED. Mr. President, I rise today in strong support of the Ticket to Work and Work Incentives Improvement Act.

I want to pay tribute to my colleagues, Senators KENNEDY and JEFFORDS, who began working on this legislation in the last Congress—effectively building support for this bill from a handful of senators to 79 co-sponsors.

I also want to commend Senators MOYNIHAN and ROTH, who have dedicated their time and effort to this important cause. They have kept the debate on this bill focused on the substance, and have prevented it from degenerating into grandstanding or partisan bickering.

But the lion's share of credit should go to the members of the disability community, who have been tireless advocates for work incentives legislation. Without their hard work, we would not be here today. This bill is the product of their grassroots activism—making a common sense idea into a national policy.

As my colleagues know, the major provisions of the Ticket to Work and Work Incentives Improvement Act are infinitely sensible. They would remove the most significant barrier that individuals with disabilities face when they try to return to work—continued access to adequate health care.

Currently, individuals with disabilities face the dilemma of choosing between the Medicare and Medicaid health benefits they need and the job they desire. Mr. President, this is not a choice at all, and it is regrettable.

According to surveys, about three quarters of individuals with disabilities who are receiving Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) benefits want to work. Sadly, less than one percent are actually able to make a successful transition into the workforce. A major barrier seems to be the lack of sufficient health care coverage.

By passing this legislation, we will extend eligibility for Medicare and Medicaid and provide a helping hand to individuals with disabilities who aspire to work.

Mr. President, this legislation also takes a step to help workers who are stricken with progressive, degenerative diseases, such as Multiple Sclerosis, HIV/AIDS, and Parkinson's Disease, which can be slowed with proper treatment. With the health coverage buy-in offered under this bill, these workers can continue to hold a job instead of leaving the workforce in hopes of meeting the need requirements for Medicaid coverage.

These citizens can continue to make substantial contributions to the workplace and to society while benefitting intellectually and emotionally.

With the Americans with Disabilities Act, Congress adopted legislation to

combat discrimination and remove physical barriers from the workplace. Now, we have the chance to lift yet another barrier to work, the loss of health care coverage.

In my home state of Rhode Island, more than 40,000 individuals with disabilities could benefit from the work incentives bill. Across the country, more than 9.5 million people could be positively affected by this legislation.

Our booming economy has created millions of new jobs, and has brought thousands of Americans into the workforce for the first time. By passing this legislation, we can take another step to help a significant group of Americans participate in our national economic prosperity.

Mr. President, before I yield, I would like to briefly mention my concern about some offsets attached to this measure. As colleagues who have followed this bill know, it seemed as if there was a revolving door when it came to the consideration of offsets during the Conference. Provisions came and went and returned again.

I was pleased that a controversial offset regarding the refund of FHA up-front mortgage insurance premiums was withdrawn. This offset was essentially a \$1,200 tax on approximately 900,000 low- and middle-income families and first-time home-buyers, and the conferees were right to omit it from this bill.

Regrettably, the bill retains two other controversial offsets, which I oppose. The first is an assessment on attorneys representing clients with Social Security disability benefits claims. Although the Administration supports this offset, I believe that it will discourage qualified attorneys from taking on these complicated, labor-intensive claims cases—which already offer little remuneration to attorneys. Ultimately, this assessment will hurt those individuals trying to secure their rightful benefits, not the attorneys. I commend the conferees for taking steps to blunt the impact of this provision by capping the fee at 6.3% and requiring GAO to study the cost and efficiency of this and alternative assessment structures. Nonetheless, I still believe that this is an inappropriate offset.

The other offset changes the index for student loan interest rates from the 91-day Treasury bill to the three-month rate for commercial paper. This provision saves a modest amount of money in the short-term. Unfortunately, those savings will not be transferred to students, and the offset will actually put taxpayers on the hook if the markets turn sour. Let me add that this provision flies in the face of an agreement reached in last year's Higher Education Act Amendments. Under that legislation, we were to study the impact of this type of conversion. We are still awaiting the findings of that study, and in the absence of an authoritative conclusion, I believe it is premature to entertain this change in pol-

icy. Mr. President, setting these important concerns aside, I believe that the Ticket to Work and Work Incentives Improvement Act is a major victory for all Americans, and we should all support it. I want to again commend the leading Senate sponsors, Senators KENNEDY, JEFFORDS, MOYNIHAN, and ROTH for their tremendous work in bringing this legislation to this point, and I urge all of my colleagues to vote for it.

The PRESIDING OFFICER. Who yields time?

Mr. ROTH. Mr. President, I yield 8 minutes to the Senator from Pennsylvania.

The PRESIDING OFFICER. The Senator from Pennsylvania is recognized for 8 minutes.

Mr. SANTORUM. Mr. President, I want to pick up where the Senator from Illinois left off. I think he hit the nail on the head with respect to our concern with a provision in this bill which will create an additional moratorium for the organ allocation regulations to go into effect.

There will be a 90-day moratorium. Senator DURBIN, Senator SCHUMER, Senator MOYNIHAN, Senator SPECTER, and I, and many others have some grave concerns about its impact on thousands of people who are on transplant lists across this country and their ability to get organs in what may be the last few days of their lives. That is, unfortunately, what is going to occur. We are going to delay a system being put into place which would put a priority on the health status of the person on the transplant list as opposed to the residency status of where that person happens to be in the hospital.

It is a battle. It is an economic battle in many respects. And certainly, from some perspectives, I have transplant centers in my State that support these regulations; I have transplant centers in my State that oppose them. I look at it from the unbiased position of, what is in the best interest of the patient? For me, as Senator DURBIN just said, when 3 of the 11 people who will die today because organs are not available, when 3 of them needlessly die because we are transplanting organs that would otherwise go to them into people who are healthier and would not die but for the transplant, then we have something seriously wrong in this country. We have something seriously wrong when geography trumps patient need. That is what the current organ allocation system has.

Why has that occurred? This was a system that was put in place well over 10 years ago, when there were fewer transplant centers and when organs could not survive as long after being harvested. So geography did play an important role because the organ that was harvested had to be quickly transported to a hospital and implanted into the donee. That has changed. Now organs survive for around 4 hours, according to our transplant surgeon, Dr. FRIST, who lectured us on this a little

while ago. Now we have the ability to more broadly spread these organs out so we can reach sicker people. Yet the organ allocation system developed well over 10 years ago still focuses on geography. It may have been applicable at one time. It doesn't work anymore. People are dying as a result of it.

We have 4,000 people on transplant lists; 1,000 will die. And it is incredible to me that those will die unnecessarily—4,000 will die and 1,000 will die unnecessarily—because of our regulations.

We have gone through a moratorium on these regs. I know this is a very controversial issue. It is a controversial issue because of economics. There is no controversy anymore as to what is in the best interest of patients. Last year, when Bob Livingston was able to get a year delay as chairman of the Appropriations Committee, we said, well, the medical evidence will sustain their position that geography is the best way to do this. So we asked for a study—the study of the Institute of Medicine—to determine the findings of a non-partisan, nonbiased organization. Let me tell you what they came back with:

On the basis of the analysis of this report, it seems apparent that patients on liver transplant—

That is what they specifically looked at—

waiting lists will be better served by an allocation system that facilitates broader sharing within broader populations.

The Institute of Medicine says "broader sharing," with geography being a lower priority factor in the decision.

This question was also put forward: Will more people die if we continue this system?

Again, the Institute of Medicine was very clear:

Increased sharing of organs would result in increasing transplantation rates for status 1 patients, the sickest patients, decreasing pre-transplantation mortality for sicker patients, which is status 2(b), and decreasing transplantation rates for status 3 patients, without increasing mortality.

That is the key. Yes, status 3, the healthier patients, will get fewer organs, but they won't die as a result of that. Yes, status 1 and 2(b) patients will get more transplantations and will live as a result of that, where they otherwise would die.

So it is clear, again, from the medical evidence the Institute of Medicine has put forward that a broader geographic sharing is the way to go. That is what these regulations dictate—that the sicker patients should get these before they die, not healthy patients who would otherwise live or would live for a long period of time without transplants.

The other issue you will hear brought up is that we need geography to be a big factor because it increases the availability of organs, that people want to donate organs in their community. The Institute of Medicine looked at this and found no convincing evidence

to support the claim that broader sharing would adversely affect donation rates, or potential donors would decline to donate because an organ might be used outside the immediate geographic area.

I have an organ donor card. I am someone who, upon my demise, wants to be able to give organs to someone else so they might live. I don't care whether it goes to somebody in Pittsburgh, or in Chicago, or in Alabama, as long as it goes to the person who needs it the most.

That brings me to my final point, on which I think we can all agree. This debate is contentious, and the reason for that is, we don't have enough organs. So I just say that we can all agree that we need to do more to encourage organ donation. People are needlessly dying because people and families have trouble at that moment of death—I know how difficult that can be—making the decision to donate the organs of somebody who is brain dead to someone else who can live as a result of that donation. Hopefully, through this discussion, we can also work on how we can broaden the availability of organs so this contentious issue of regional transplant centers will be minimized in the future.

Mr. President, with that, I yield back the remainder of my time.

The PRESIDING OFFICER. Who yields time?

Mr. MOYNIHAN. Mr. President, I have the great honor and pleasure to yield 5 minutes to the Senator from Iowa, who is so active in the Ticket to Work legislation.

The PRESIDING OFFICER. The Senator from Iowa is recognized for 5 minutes.

Mr. HARKIN. Mr. President, I thank the ranking member on the committee. I rise in strong support of the Work Incentives Improvement Act. I really want to commend my two colleagues, Senator JEFFORDS of Vermont and Senator KENNEDY from Massachusetts, for their excellent work in getting this very important piece of legislation through. I want to also thank the members of the Finance Committee—in particular, Senator ROTH and Senator MOYNIHAN—for their hard work on this legislation.

For people with disabilities all over this country, this is truly an incredible day. Congress is continuing to fulfill the promise we made to people with disabilities 9 years ago when we passed the Americans With Disabilities Act in 1990. When we passed the ADA, they told Americans with disabilities that the door to equal opportunity was finally open. And the ADA has opened doors of opportunity—plenty of them. Americans with disabilities now expect to be treated as full citizens, with all the rights and responsibilities that entails.

But our work is not finished. Far too many people with disabilities who want to work are unemployed. One of the main reasons they are unemployed is,

under the current system, people have to choose between a job and health care. I could not put it any better than a constituent of mine, a young woman by the name of Phoebe Ball. Phoebe just graduated from the University of Iowa. She was shocked when they found that if she took an entry-level job paying \$18,000 a year, she would suffer a huge loss—her health insurance.

So Phoebe wrote an article for the newspaper. I will read part of it:

I want off SSI desperately . . . I want to work. I want to know that I have earned the money I have . . .

My parents and my society made a promise to me. They promised me that I can live with this disability, and I can . . . What is limiting me right now is not this wheelchair, and it's not this limb that's missing. It's a system that says if I can work at all, then I'm undeserving of any assistance, I'm undeserving of the basic medical care that I need to stay alive.

. . . What is needed is a government that understands its responsibility to its citizens . . . then we'll see what we are capable of, then we'll be working and proving the worth of the Americans With Disabilities Act.

I could not say it any better than Phoebe just did. The Work Incentives Improvement Act is a comprehensive bill that will be the answer to Phoebe Ball's dilemma. If only 1 percent—or 75,000—of the 7.5 million people with disabilities, such as Phoebe, who are now on benefits were to become employed, Federal savings would total \$3.5 billion over the work life of these beneficiaries. That not only makes economic sense, it contributes to preserving the Social Security trust fund.

The disability community across this country and Members from both sides of the aisle have wholeheartedly endorsed this bill. Rarely do we see such broad bipartisan support. But that is because on this particular issue it is easy to agree—people with disabilities should continue to move toward greater and greater independence.

In that spirit, Senator SPECTER and I introduced the Medicaid Community Attendant Services and Supports Act earlier this week. Its shorthand name is MCASSA. This bill will build on what we are doing today with the Work Incentives Improvement Act. Ten years after the passage of the Americans With Disabilities Act, next year, we are still facing the situation where our current long-term care program favors putting people into institutions.

A person has a right to the most expensive form of care—a nursing home bed—because nursing home care is an entitlement. But if that same person with a disability wants to live in the community, he or she is going to have to face a lack of available services because community services are optional under Medicaid. Nursing home is a mandatory entitlement, but if you want to live in the community, that is optional. Well, the purpose of our bill is to level the playing field and give people with disabilities a real choice.

Our bill would allow any person entitled to medical assistance who would

go to a nursing facility to use the money for community attendant services and support. In shorthand, what our bill says is: Let the Federal money follow the person and not the program. If that person wants to use that money for community-based services and attendant services, that person with a disability ought to be able to use the money that way. If they want to use the money for a nursing home, leave it up to the individual; we should not be dictating where they ought to live and how they ought to live. As is the work incentives bill, MCASSA is rooted in the promise of ADA—equality of opportunity, full participation, independent living, and economic self-sufficiency for all.

I thank the Chair.

I thank the President.

I yield the floor.

The PRESIDING OFFICER. Who yields time?

Mr. ROTH. Mr. President, I yield 4 minutes to the Senator from Alabama.

The PRESIDING OFFICER. The Senator from Alabama is recognized for 4 minutes.

Mr. SESSIONS. Mr. President, I thank the Senator from Delaware, and I thank him particularly for his interest on this issue and so many other issues that have been before this Senate, including all of the major tax cuts in our country in the last number of years. He has been a key player in that.

The issue before us today involves many different aspects. I believe very strongly that the organ transplant issue is critical for our Nation. We have made such magnificent progress in enhancing the availability of organs, helping people who receive those organs, and increasing the success rate of organ transplants. It has been a continual series of advancements—whether it is medication to avoid rejection, or the skill of a surgeon, and so forth. The key to that has been the magnificent services rendered by organ transplant centers all over the country.

The plan that has been directed and proposed by Secretary Shalala of HHS, which gives her, in fact, the total ability to void and dictate the regulations, that plan has been opposed and is not supported by the overwhelming number of organ transplant centers in this country. They do not believe it will save lives. They do not believe it will help the system to have Washington decide who gets organ transplants.

We have a system that is working and getting better on a daily basis, which is something of which we can be extraordinarily proud.

In Alabama, the University of Alabama at Birmingham is No. 1 in the world in kidney transplants. They are exceptionally skilled at that procedure, and is one of the great organ transplant centers in the world. Others are similar around the country. They are very uneasy about and object to this consolidation of power in the Secretary's office—a person who is not

elected by the people, and yet is about to impose regulations on the dispersement of organs in America.

This is a matter that ought to be and by law and right should be done in the U.S. Congress. The House passed a bill quite different from the Secretary's proposal. The committee met in the appropriations, and several Senators who had a view on this came up with a bill giving a 42-day window to change any rule she might pass. We will hardly be in session. We will not be in session in 42 days. Ninety days is the minimum time we can have so that this Congress can fulfill its responsibility to the health and safety of this country by having hearings and passing legitimate legislation on organ transplantation.

I would point out that the chairman of that subcommittee of the committee of which I am a member, Senator FRIST, Dr. FRIST, is one of the great organ transplant surgeons in America. He did the first organ-lung transplant in the history of the State of Tennessee. He will chair that committee. He is going to be fair on this issue.

But there is a congressional responsibility, and the minimum time we can accept is the 90 days that has been proposed.

I thank the Chair.

I hope and I am confident that will be part of this legislation.

Mr. MOYNIHAN. Mr. President, I am happy to yield 3 minutes to my colleague and friend from New York.

The PRESIDING OFFICER. The Senator from New York is recognized for 3 minutes.

Mr. SCHUMER. Mr. President, I thank the Senator for yielding time.

I rise, along with my colleagues from Pennsylvania and Illinois, very much against my colleague from Alabama on this important issue.

When somebody donates a liver or lungs or a kidney or a heart, they do not donate it in a particular area. They don't donate it and say: I want the person who lives in the State of Alabama or the State of New Jersey to have it. They donate it to do the most good.

Finally, we have come up with a solution with provisions that are fair—that say it doesn't matter where you live but rather what your need is in terms of getting an organ.

All of a sudden, to my disappointment, in the dark of night a ruling of that position was put into the legislation.

I think this is wrong. When somebody needs a liver in New York, and they need it, and their life depends on the liver, that liver should not go to someone in another State who has at least 3 years to live on their existing organs.

It is so wrong to create geographic divisions. We have learned that. The Secretary of HHS has promulgated regulations which, if I had my way, would be promulgated immediately.

My friend and colleague, who I know is very sincere in this, the Senator from Alabama, and others, put in a provision to delay this for 90 days.

I thank the Senator from Pennsylvania, Senator LOTT, and the Secretary of HHS for trying to compromise this issue so it can be fair to all.

We must and we will continue to fight, those of us who believe that organ donations should go to those who need it the most, and not those who live in a certain geographical area be given those organs.

The system has been supported by the National Academy of Sciences Institute of Medicine. It was developed by medical people and scientists. That is the way it ought to be.

We ought not hold organs hostage to political, geographic, and other divisive considerations.

Again, when somebody donates an organ, a beautiful and selfless act, it ought not be marred by politics. It ought to go to the person of greatest need, no matter where that person lives.

Mr. President, I yield the remainder of my time.

Mr. MOYNIHAN. Mr. President, I am happy to yield 3 minutes to my friend, Senator WELLSTONE.

The PRESIDING OFFICER. The Senator from Minnesota is recognized for 3 minutes.

Mr. WELLSTONE. Mr. President, I want to actually start out on a positive note by raising one question.

This Work Incentives Improvement Act is a very important piece of legislation for all the reasons my colleagues have explained. I will go through that in a moment.

I don't understand why there is in this piece of legislation a \$1.7 billion subsidy for higher education lenders. I don't understand what that is doing in this piece of legislation. We are talking about whether or not people with disabilities are going to be able to work and maintain their health care coverage. That is what is so important about this legislation. It is incredibly important to the disabilities community in my State and across the country.

I thank Senators KENNEDY, JEFFORDS, ROTH, and MOYNIHAN. But I have to raise this question just for the RECORD.

What are we doing putting a \$1.7 billion subsidy in here for higher education lenders? Students could use this money by way of expanding the Pell grant. Students could use the money by way of low interest loans. Students could use the money to make higher education more affordable. But why is this provision being linked to another piece of legislation?

I must say again that when we get back to how we conduct our business, I hope next time we will not put these kinds of provisions together. This is not the way to legislate.

I think it is a great piece of legislation. I am going to support it. But I certainly don't think we should have this \$1.7 billion subsidy for the lenders as a part of this bill.

I yield the floor.

The PRESIDING OFFICER. The majority leader.

Mr. LOTT. Mr. President, I ask unanimous consent that the voting schedule occur no later than 5 p.m. this evening, and that it be reversed so that the first vote will now occur on the adoption of the Work Incentives conference report, to be followed by the cloture vote, and finally adoption of the appropriations conference report.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. MOYNIHAN. Mr. President, in the spirit of the hour, the Democratic side yields the remainder of its time to the distinguished and ebulliently happy majority leader.

Mr. LOTT. Thank you, Mr. President. It is always a great pleasure to work with the Senator from New York. It is even more fun to hear him speak. I am not sure what he said, but it sounded beautiful. I take it as a high compliment as I always do.

For the sake of a colloquy to clarify a section in the work incentives bill, I yield to Senator SANTORUM. We will have a colloquy with Senator SANTORUM, Senator SCHUMER, and myself.

Mr. SANTORUM. Mr. President, there is an issue over the language contained in section 413 of H.R. 1180 and the intent thereof that I ask the majority leader to clarify.

Mr. LOTT. Mr. President, I thank the Senator from Pennsylvania, and the Senator from New York, Mr. SCHUMER, for working with me on this and for their devotion to this important public health issue.

It is one which is important to our country and to the people that need the organ transplants. We have to try to find the best and the fairest way to deal with this issue. I am happy to clarify this issue contained in the legislative measure.

Mr. SANTORUM. I wish to clarify the language in section 413 of H.R. 1180 pertaining to the implementation of the Secretary of Health and Human Service's final rule on organ procurement and the transplantation printed in the Federal Register on October 20, 1999, specifically to ensure that this language allows, but does not require, the Secretary of HHS to revise this rule after the 90-day period beginning on the date of enactment of this act.

Mr. LOTT. Mr. President, the language will delay the rule for 90 days. That is what is required and that was my intent, from the date of enactment of H.R. 1180, in order to facilitate additional public review. It is not the intent of the legislation to cause any unreasonable delay in the formulation of necessary improvements in national organ transplant policies, but rather to permit constructive review of the information that will be available and for the Congress to review it.

Furthermore, I make clear section 413 provides that the rule is not effective until the expiration of the 90-day rule beginning on the date of enact-

ment of this act. During that 90-day period, the Secretary shall publish a notice eliciting public comments on the rule and shall conduct a full review of the comments. At the end of the period, section 413 allows, but does not require, the Secretary to make any revisions in the rule that she deems appropriate.

Mr. SANTORUM. I thank the majority leader for the clarification.

The PRESIDING OFFICER. The Senator from New York.

Mr. SCHUMER. Mr. President, will the Senator from Pennsylvania yield for a brief statement?

Mr. LOTT. I believe I have the time and I will yield.

Mr. SCHUMER. Mr. Leader and Senator SANTORUM, I have spoken with the Secretary of HHS and she has assured me this clarification has the support of the administration and it is something she, and it, intend to stand by.

Mr. LOTT. I thank the Senator.

Does the Senator from Alabama wish to speak?

Mr. SESSIONS. Mr. President, is it your expectation following the 90-day period during which the Secretary reviews the public comments that as of today we have not had a formal comment period, as I understand it; that the Secretary should inform the Congress of her reasons behind any final decision she would make?

Mr. LOTT. Yes, absolutely. I expect that and I believe she will do that.

Mr. SESSIONS. I wish to say that I know a lot of hard work has gone into this very contentious issue. Some said this had happened in the dead of night. What happened in the dead of night—I serve on the health committee that should be dealing with this—this 42-day rule went in. Our committee never voted on that or had hearings on it.

This at least gives our committee a narrow window of opportunity to try to deal with it. It won't be a full 90 days because we will be out half of that. It will be a narrow opportunity with Senator BILL FRIST chairing it and maybe we can work out some things that make sense. Right now I am very troubled. The overwhelming majority of the transplant centers are not happy with these rules as they are being developed. I think the Congress must speak.

I yield the floor.

Mr. LOTT. Mr. President, if I have time remaining, I yield the floor. I believe we are prepared to begin our series of votes, unless the chairman or ranking member would desire to wrap up.

The PRESIDING OFFICER. All time has expired.

Mr. ROTH. Mr. President, I would also like to quickly thank several staff members who have been working long and hard to make this bill possible.

Let me thank several members of Senator MOYNIHAN'S staff—as always, they are skilled professionals who have been our partners working on this bill every step of the way.

In particular, let me thank Jon Resnick, Edwin Park, and David Podoff. And I would like to thank a former member of the Moynihan staff, Kristen Testa, who was there at the very beginning of this bill's legislative life and without whom there would not have been a Work Incentives Improvement Act.

I would also like to thank Pat Morrissey, Leah Menzies, and Lu Zeph of Senator JEFFORDS' office, and Connie Garner on Senator KENNEDY'S staff. They have been tireless in their efforts on behalf of this legislation. Jennifer Baxendell and Alec Vachon from my staff worked tirelessly on this legislation and deserve special commendation.

Since this bill's inception, our staffs have worked together closely and well. I would like to thank you all for your dedication and hard work throughout all the many ups and downs this bill has faced.

Mr. President, I would also like to thank the dedicated professionals who worked so diligently to complete this year's tax legislation. First of all, I would like to thank my Finance team—Frank Polk, Joan Woodward, Mark Prater, Brig Pari, Tom Roeser, Bill Sweetnam, Jeff Kupfer, Ed McClellan, Ginny Flynn, Tara Bradshaw, Connie Foster and Myrtle Agent. I would also like to thank John Duncan and Bill Nixon from my personal staff for their commitment to seeing this process through to its successful completion.

I would also like to thank the members of Senator MOYNIHAN'S Finance staff who have helped make this a bipartisan effort—David Podoff, Russ Sullivan, Stan Fendley, Anita Horn, and Mitchell Kent.

It is also important to recognize the professionals of the Joint Committee on Taxation. In particular, I would like to thank Lindy Paull, Bernie Schmitt, Rick Grafmeyer, Carolyn Smith, Cecily Rock, Mary Schmitt, Greg Bailey, Tom Barthold, Ben Hartley, David Hering, Harold Hirsch, Laurie Matthews, Sam Olchyk, Oren Penn, Todd Simmens, Paul Schmidt, Mel Schwarz, and Barry Wold.

I would also like to thank Jim Fransen and Mark Mathiesen of the Senate's Legislative Counsel office who have the thankless job of turning tax policy into statute.

Finally, I would like to thank the Treasury's Office of Tax Policy. In particular, Linda Robertson, Jon Talisman and Joe Mikrut deserve special recognition for their help in this important legislation.

On this occasion I would also like to thank the staff who worked so hard on the Medicare, Medicaid, and SCHIP reform provisions included in the Omnibus Appropriations Act. They have worked incredibly long hours, with real dedication, to develop the strong, consensus product before the Senate today. In particular, let me thank Kathy Means, Teresa Houser, Mike

O'Grady, Jennifer Baxendell, and Alec Phillips on the Majority staff.

I would also like to thank Senator MOYNIHAN's staff for their cooperation and input. Let me thank Chuck Konigsberg, Liz Fowler, Edwin Park, Jon Resnick, Faye Drummond, Kyle Kinner, Dustin May, Julianne Fisher, Jewel Harper, and Doug Steiger.

I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There is a sufficient second.

The yeas and nays were ordered.

The PRESIDING OFFICER. The question is on agreeing to the conference report. The yeas and nays have been ordered.

The clerk will call the roll.

The legislative assistant called the roll.

Mr. NICKLES. I announce that the Senator from Arizona (Mr. MCCAIN), the Senator from Washington (Mr. GORTON), and the Senator from Oregon (Mr. SMITH) are necessarily absent.

I further announce that, if present and voting, the Senator from Oregon (Mr. SMITH) would vote yea.

Mr. REID. I announce that the Senator from Washington (Mrs. MURRAY), is absent attending a funeral.

The PRESIDING OFFICER. Are there any other SENATORS in the Chamber desiring to vote?

The result was announced—yeas 95, nays 1, as follows:

[Rollcall Vote No. 372 Leg.]

YEAS—95

| | | |
|------------|------------|-------------|
| Abraham | Edwards | Lincoln |
| Akaka | Enzi | Lott |
| Allard | Feingold | Lugar |
| Ashcroft | Feinstein | Mack |
| Baucus | Fitzgerald | McConnell |
| Bayh | Frist | Mikulski |
| Bennett | Graham | Moynihan |
| Biden | Gramm | Murkowski |
| Bingaman | Grams | Nickles |
| Bond | Grassley | Reed |
| Boxer | Gregg | Reid |
| Breaux | Hagel | Robb |
| Brownback | Harkin | Roberts |
| Bryan | Hatch | Rockefeller |
| Bunning | Helms | Roth |
| Burns | Hollings | Santorum |
| Byrd | Hutchinson | Sarbanes |
| Campbell | Hutchison | Schumer |
| Chafee, L. | Inhofe | Sessions |
| Cleland | Inouye | Shelby |
| Cochran | Jeffords | Smith (NH) |
| Collins | Johnson | Snowe |
| Conrad | Kennedy | Specter |
| Coverdell | Kerrey | Stevens |
| Craig | Kerry | Thomas |
| Crapo | Kohl | Thompson |
| Daschle | Kyl | Thurmond |
| DeWine | Landrieu | Torricelli |
| Dodd | Lautenberg | Warner |
| Domenici | Leahy | Wellstone |
| Dorgan | Levin | Wyden |
| Durbin | Lieberman | |

NAYS—1

Voinovich
NOT VOTING—4

Gorton Murray
McCain Smith (OR)

The conference report was agreed to. Mr. GORTON. Mr. President, had I been present for the vote on the conference report on H.R. 1180, I would have voted "no." I would have done so in spite of my high approval of most of the tax extenders and of many of the work initiative provisions. Neverthe-

less, the bill included an unwise and ill-considered new tax credit for the use of chicken waste for power production. That provision could never have survived standing alone. It is another unjustified complication in our tax code never considered by either House of Congress. It poisons the entire bill.

Mr. MOYNIHAN. I move to reconsider the vote.

Mr. LOTT. I move to lay that motion on the table.

The motion to lay on the table was agreed to.

Mr. LOTT addressed the Chair.

The PRESIDING OFFICER (Mr. SANTORUM). The majority leader.

ORDER OF PROCEDURE

Mr. LOTT. Mr. President, I ask unanimous consent that the next two votes in this series be limited to 10 minutes in length.

The PRESIDING OFFICER. Without objection, it is so ordered.

SEASONS GREETINGS

Mr. LOTT. Mr. President, once again, I thank Senators on both sides for their cooperation and for their good work this year and wish you all a Happy Thanksgiving and a Merry Christmas.

I yield the floor.

DISTRICT OF COLUMBIA APPROPRIATIONS ACT, 2000—CONFERENCE REPORT—Resumed

CLOTURE MOTION

The PRESIDING OFFICER. Under the previous order, pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The legislative assistant read as follows:

CLOTURE MOTION

We the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the conference report to accompany the District of Columbia appropriations bill.

Trent Lott, Ted Stevens, Larry E. Craig, Judd Gregg, Tim Hutchinson, Don Nickles, Mike Crapo, Connie Mack, Slade Gorton, Ben Nighthorse Campbell, Arlen Specter, Pat Roberts, Chuck Hagel, Richard Shelby, Thad Cochran, and John Warner.

The PRESIDING OFFICER. The question is, Is it the sense of the Senate that the conference report accompanying H.R. 3194, an act making appropriations for the government of the District of Columbia and other activities chargeable in whole or in part against revenues of said District for the fiscal year ending September 30, 2000, shall be brought to a close?

The yeas and nays are required under the rule. The clerk will call the roll.

The legislative clerk called the roll.

Mr. NICKLES. I announce that the Senator from Oregon (Mr. SMITH), the

Senator from Arizona (Mr. MCCAIN), and the Senator from Washington (Mr. GORTON) are necessarily absent.

I further announce that, if present and voting, the Senator from Oregon (Mr. SMITH) would vote yea.

Mr. REID. I announce that the Senator from Washington (Mrs. MURRAY) is absent attending a funeral.

The yeas and nays resulted—yeas 87, nays 9, as follows:

[Rollcall Vote No. 373 Leg.]

YEAS—87

| | | |
|------------|------------|-------------|
| Abraham | Edwards | Lugar |
| Akaka | Enzi | Mack |
| Allard | Feinstein | McConnell |
| Ashcroft | Frist | Mikulski |
| Baucus | Gramm | Moynihan |
| Bayh | Grassley | Murkowski |
| Bennett | Gregg | Nickles |
| Biden | Hagel | Reed |
| Bingaman | Harkin | Reid |
| Bond | Hatch | Robb |
| Boxer | Helms | Roberts |
| Breaux | Hollings | Rockefeller |
| Brownback | Hutchinson | Roth |
| Bryan | Hutchison | Santorum |
| Bunning | Inhofe | Sarbanes |
| Burns | Inouye | Schumer |
| Byrd | Jeffords | Sessions |
| Campbell | Johnson | Shelby |
| Chafee, L. | Kennedy | Smith (NH) |
| Cleland | Kerrey | Snowe |
| Cochran | Kerry | Specter |
| Collins | Kyl | Stevens |
| Coverdell | Landrieu | Thomas |
| Craig | Lautenberg | Thompson |
| Crapo | Leahy | Thurmond |
| Daschle | Levin | Torricelli |
| DeWine | Lieberman | Voinovich |
| Dodd | Lincoln | Warner |
| Domenici | Lott | Wyden |

NAYS—9

| | | |
|--------|------------|-----------|
| Conrad | Feingold | Grams |
| Dorgan | Fitzgerald | Kohl |
| Durbin | Graham | Wellstone |

NOT VOTING—4

Gorton Murray
McCain Smith (OR)

The PRESIDING OFFICER. On this vote, the yeas are 87, the nays are 9. Three-fifths of the Senators duly chosen and sworn having he voted in the affirmative, the motion is agreed to.

FISHERIES RESEARCH VESSEL

Mr. LOTT. Mr. President, the NOAA budget includes \$51.56 million in funds to procure the first of four state-of-the-art fishery research vessels to conduct critical research on our Nation's fishery resources. This is an important step in providing for sustainable fisheries for our fishermen, U.S. trade, and U.S. consumers. It is my understanding that these ships will be some of the most technically complex research vessels in the world. It is critical that the procurement of these ships reflect this complexity, and that all U.S. shipbuilders with technical expertise in oceanographic research ships will have the opportunity to offer their expertise to the Government. Is it the Senator's understanding that this solicitation will be open to all U.S. shipbuilders, without set-asides that limit competition?

Mr. STEVENS. The Majority Leader is correct. In providing for the first of these ships to be built, we understood that the public will benefit from free and unrestricted competition on this vessel. The demands placed on our fishery management system dictate that

This legislation does not benefit only persons with disabilities, it also has major benefits for the Federal Government and the taxpayer. If an additional one-half of 1 percent of the current Social Security Disability and Supplemental Security Income recipients were to cease receiving benefits as a result of employment, the savings and cash assistance would total \$3.5 billion over the worklife of the individuals.

This worthy legislation was passed by the House overwhelmingly earlier this year, and I expect it will enjoy similar support today.

Part B of the underlying bill is a collection of tax extenders. I am pleased that this agreement includes a 5-year extension for research and development tax credit. Science and technology are critical for our future development, our knowledge about the world around us, and our understanding of ourselves.

I have long been a strong supporter of incentives to encourage businesses to invest in the development of new technologies and products. Through its existence, the R&D tax credit has served as a fundamental component of our Nation's competitiveness strategy by increasing the amount of research undertaken by the private sector.

One key provision which I would have strongly supported had it been allowed to remain in the bill would have entitled workers to better pension benefits through what is known as section 415 of the tax code. But, regrettably, this provision was left at the station.

In addition, the bill includes a delay in the implementation of rules proposed by the Department of Health and Human Services to restructure organ allocation in our Nation. While this delay is not likely to please people on either side of this emotional issue, it should at least allow the Congress to debate this matter more fully when we return in January.

Mr. Speaker, my main regret on the legislation is that we are dealing with what should have been several bills and are, instead, forced to consider them as a single package. This approach limits debate and prohibits many Members from exercising their right to discuss the legislation. It is unfair and it is unnecessary. There is no reason why these bills should not have been brought up earlier under open rules with full debate. This is to say nothing of the many, many worthwhile bills that are being pushed aside altogether in the majority's rush to adjourn.

But we are coming back with renewed energy and commitment to passing the Patients' Bill of Rights, increasing the minimum wage for working families, and halting the violence and gunfire which threatens our homes and our communities.

Mr. Speaker, by all accounts, this will be the final rule to be considered this century. This is also the final rule of this millennium. Those of us who serve on this important committee are keenly aware of its historical and institutional role in this Congress on behalf

of the American people. Grounded by that tradition and honored by the opportunity, we are thankful to the Members who have gone before us, and we look forward to the new millennium and meeting the challenges facing the American people in the 21st Century. I am grateful for my colleagues on the Committee on Rules.

Mr. Speaker, I reserve the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I thank the gentlewoman from New York (Ms. SLAUGHTER) for noting that this is the last rule of this millennium. From my perspective, I had forgotten about that, and I thank the gentlewoman for bringing it up.

Mr. Speaker, I reserve the balance of my time.

Ms. SLAUGHTER. Mr. Speaker, I have no requests for time, and I yield back the balance of my time.

Mr. HASTINGS of Washington. Mr. Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The previous question was ordered.

The resolution was agreed to.

A motion to reconsider was laid on the table.

ELECTION OF MEMBER TO CERTAIN STANDING COMMITTEES OF THE HOUSE

Mr. FROST. Mr. Speaker, I offer a resolution (H. Res. 391), and I ask unanimous consent for its consideration in the House.

The SPEAKER pro tempore. The Clerk will report the resolution.

The Clerk read as follows:

H. RES. 391

Resolved, That the following named Member be, and is hereby, elected to the following standing Committees of the House of Representatives:

Committee on Agriculture and Committee on Science: Mr. Baca of California.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

The resolution was agreed to.

A motion to reconsider was laid on the table.

□ 1800

CONFERENCE REPORT ON H.R. 1180, TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999

Mr. ARCHER. Mr. Speaker, pursuant to House Resolution 387, I call up the conference report on the bill (H.R. 1180) to amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaning-

ful opportunities to work, and for other purposes.

The Clerk read the title of the bill.

The SPEAKER pro tempore (Mr. PEASE). Pursuant to House Resolution 387, the conference report is considered as having been read.

(For conference report and statement, see proceedings of the House of November 17, 1999, at page H12174.)

The SPEAKER pro tempore. The gentleman from Texas (Mr. ARCHER) and the gentleman from New York (Mr. RANGEL) each will control 30 minutes.

The Chair recognizes the gentleman from Texas (Mr. ARCHER).

GENERAL LEAVE

Mr. ARCHER. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative within which to revise and extend their remarks and include extraneous material on the conference report H.R. 1180.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Texas?

There was no objection.

Mr. ARCHER. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, today I rise in strong support of H.R. 1180, the Ticket to Work and Work Incentives Act, which also contains an important package of tax relief for American workers and families.

First, let me discuss the Ticket to Work and Work Incentives Act. Most of those receiving disability benefits today, due to the severity of their impairments, cannot attempt to work. Today, however, the Americans with Disabilities Act, along with advances in technology, medicine and rehabilitation, are opening doors of opportunity never thought possible to individuals with disabilities. Now people can telecommute to work. There are voice-activated computers. And, as technology provides new ways to clear hurdles presented by a disability, government must also keep pace by providing opportunity and not just dependency. Government should be helping people to work, not building barriers to independence and freedom.

This is one more victory in a string of health care achievements that the Republican Congress has guided into law. We strengthened Medicare, we made health insurance more portable, we passed tax breaks for long-term health care and to cut health insurance costs for people who buy their own health insurance, unfortunately, only to see all those vetoed by the President. And now we have modernized a key program for people with disabilities so that the Government is a help and not a hindrance. Mr. Speaker, that is truly a record of achievement and progress.

Another significant victory is the tax relief package in this bill. Because of our action, millions of families can now breathe easier knowing they will not get hit with a surprise tax hike for the next 3 years because we fixed the alternative minimum tax. The AMT is

a perfect example of an out-of-control Tax Code. Under the AMT, taxpayers are not allowed to claim the full child tax credit, the dependent care tax credit, the Hope Scholarship tax credit, and other tax credits which Congress passed to help Americans make ends meet. So the Tax Code was giving on one hand while quickly taking away with the other. This bill, today, fixes that for middle-income families, hundreds of thousands of them, for the next 3 years.

This bill also helps American companies maintain their cutting edge of research and development which will lead to new products, better medicines and a higher standard of living for consumers because it extends the most important R&D tax credit. For the first time in a long while, we have extended the tax credit for 5 years instead of hand-to-mouth year after year, on which no one can fully depend. Now businesses can plan for the future.

Another significant achievement of this bill is that Congress convinced the President that American taxpayers are paying too much and deserve some of their money back. Yes, it is only a small portion, but any amount of taxpayer funds that can be gotten out of Washington is money that cannot be spent on making government bigger. And that is exactly what this bill does.

This is one more achievement for a Congress that keeps delivering for the American people. We have made historic progress in paying down the debt, \$140 billion alone in the last 2 years. We are locking away the Social Security surplus so it cannot be spent on other things, and we are working on a long-term plan to save Social Security for all time. And now we have agreed to start returning a portion of the non-Social Security surplus to the taxpayers who send it here, and that is real progress.

Mr. Speaker, I reserve the balance of my time.

Mr. RANGEL. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, I was hoping that on this last bill, that the gentleman from Texas (Mr. ARCHER) and I have worked on together, that we might have found a more bipartisan tone than the one which the gentleman has just expressed today.

The gentleman talks about the accomplishments and what has been done for those people that are disabled as though his Democratic colleagues did not join with him to make this bill all that it is. The President presented this to the Congress and we worked together, and I agree that we do have a good bill.

There are some things that the gentleman does not talk about, and I expect that there is good reason for it. The gentleman has a delay here for the President's program dealing with transportation network for organ procurements, and the gentleman delays this from going into effect. It is controversial; it has nothing to do with

taxes, but somehow the gentleman got that in there.

The gentleman has some other bill that came from the other side, a contractor that deals with NOAA. It has nothing to do with taxes or the disabled.

And then, when we get involved with taxes, the gentleman talked about a Congress that produces. Well, I had hoped that we would not end on this note; but the last I heard from the majority, they were pulling up the Tax Code by the roots. True, that was 6 years ago, 5 years ago, 4, 3, 2, 1, and continuously counting down. The closest the other side came to even dealing with the Tax Code, as I recall, was a \$792 billion tax cut that never even got off the ground. And if we were to just weigh that bill, I hardly believe that even the staunchest conservative Republican would say that it simplified the Tax Code.

Now, I would have to agree with the gentleman that on the expiring provisions, the extensions of legislation that is existing law, that the gentleman and I worked together not as a Democrat or a Republican, but we worked together as tax writers, and with the help of the administration we were able to get these provisions paid for. We were able to put it in in a responsible way.

We could not stop all of the irresponsible things the other side wanted to do, so some people might want to focus on how the Republicans intend to make electricity out of chicken waste. But the gentleman insisted on the provision, we have it here, and God bless. The gentleman can join the wind and the closed-loop biomass, and if that is the way the other side wants to spend the credits, they are the majority and they can do it. But that is one of the things that we did not want to be associated with.

But I agree with the gentleman on the other good provisions. What are they? The extensions of existing law; to say that this Congress will not be irresponsible and allow these provisions to expire without doing the right thing.

So what I would like to say to the gentleman from Texas (Mr. ARCHER) is that he has no idea the pleasure it has been working with him on these positive things. And the only reason I stand up to point out some differences with the gentleman is that I would appreciate the gentleman not calling them Republican initiatives. The good ones are the bipartisan initiatives; the bad ones belong to the other side.

Mr. Speaker, I reserve the balance of my time.

Mr. ARCHER. Mr. Speaker, I yield myself such time as I may consume simply to say that I think that it is unfortunate that the gentleman from New York has sought to try to, through his rhetoric, create some degree of partisanship. I would have liked to have given him far more credit on this bill. Much of what is in here are things that he wanted, but he would

not sign the conference report. And, frankly, that does take away from bipartisanship.

Mr. Speaker, I yield 2 minutes to the gentleman from Minnesota (Mr. RAMSTAD), a member of the committee.

(Mr. RAMSTAD asked and was given permission to revise and extend his remarks.)

Mr. RAMSTAD. Mr. Speaker, I thank the chairman for yielding me this time, and I also thank him for his strong leadership on this legislation.

Mr. Speaker, I rise in strong support of this important bill. Helping people with disabilities live up to their full potential has been a top priority of mine ever since being elected to Congress, in fact, 10 years before as a State senator as well. I also strongly support the tax extender provisions in this bill.

I must say that I was disappointed, however, that the administration insisted that an important revenue-raising provision be dropped from the final agreement. This provision was based on legislation I sponsored, H.R. 3082, which was cosponsored by a strong bipartisan majority on the Committee on Ways and Means. This legislation would have protected employees' stock ownership plans, ESOPs for S-corporation workers by preventing the abuse of tax rules that help them build retirement savings and equity in their company. But unfortunately, the administration wanted to impose a draconian scheme that would have effectively killed ESOPs; would have killed this savings opportunity for thousands of American workers.

Thanks to the leadership of the gentleman from Texas (Mr. ARCHER) and the bipartisan support for S-corporation ESOPs in Congress on the Committee on Ways and Means and in the full body, the administration's misguided proposal was soundly rejected in negotiations over this extenders package, and for that I am grateful. This was a victory for American workers and a victory for boosting America's dangerously low savings rate.

Although these ESOPs S-Corporation legislation was not enacted in this bill this session, I am pleased that Congress resisted the administration's plan to dismantle ESOPs, because they are highly effective retirement savings programs.

We are going to be back with this next year, and again I thank the chairman for his leadership.

Mr. Speaker, I rise in strong support of the bill before us. Helping people with disabilities live up to their full potential has been one of my top priorities even since I was first elected to public office.

I also strongly support the important tax extender provisions which will save families from being unfairly penalized by the Alternative Minimum Tax and will keep U.S. businesses competitive, innovative and job-creating.

I was disappointed the Administration insisted that an important revenue-raising provision be dropped from the final agreement. This provision was based on legislation I introduced (H.R. 3082) which is cosponsored by a

strong bipartisan majority of the Ways and Means Committee.

H.R. 3082 would protect employee stock ownership plans (ESOPs) for S corporation workers by preventing the abuse of tax rules that help them build retirement savings and equity in their company. But unfortunately, the Administration wanted to impose a draconian scheme that would have effectively killed this savings opportunity for thousands of American workers.

Thanks to the leadership of Chairman ARCHER and the bipartisan support for S corporation ESOPs in Congress, the Administration's misguided proposal was soundly rejected in negotiations over this extenders package. That was a victory for American workers, and a victory for boosting America's dangerously low savings rate.

Although H.R. 3082 was not enacted in this session, I am pleased Congress resisted the Administration's plan to dismantle these ESOPs, which are a highly effective retirement savings program. Thank you, Mr. Speaker.

Mr. Speaker, I can't tell you how long I have waited, along with many of my friends with disabilities in Minnesota, for this day. As many of my colleagues know, I have been working hard to help people with disabilities live up to their full potential since my election to this body in 1990, and as a Minnesota State Senator ten years prior. In fact, in 1993, Rep. Pete Stark and I introduced legislation to achieve the same goal we seek today.

As I have reminded my colleagues before, it was nine years ago that many of us enacted the ADA. It was nine long years ago that president Bush signed it into law and said, "Many of our fellow citizens with disabilities are unemployed. They want to work and they can work . . . this is a tremendous pool of people who will bring to jobs diversity, loyalty, low turnover rate, and only one request: the chance to prove themselves."

Mr. Speaker, despite the remarkably low unemployment rate in this country today, many of those with disabilities are still asking for this change to prove themselves in the workplace.

Despite all the good that the ADA has done to date, there is still room for improvement. The ADA did not remove all the barriers within current federal programs that prohibit people with disabilities from working. It's time to eliminate work disincentives for people with disabilities!

Eliminating work disincentives for people with disabilities is not just humane public policy, it is sound fiscal policy. It's not only the right thing to do; it's the cost-effective thing to do!

Discouraging people with disabilities from working, earning a regular paycheck, paying taxes and moving off public assistance actually results in reduced federal revenues.

People with disabilities have to make decisions based on financial reality. Should they consider returning to work or even making it through vocational rehabilitation, the risk of losing vital federal health benefits often becomes too threatening to future financial stability. As a result, they are compelled not to work. Given the sorry state of present law, that's generally a reasonable and rational decision.

We must transform these federal programs into spring-boards to the workforce for people with disabilities. This important bill does just that.

As I have said many times, preventing people from working runs counter to the American spirit, one that thrives on individual achievements and the larger contributions to society that result.

I implore my colleagues to vote for this important legislation before us today!

Mr. RANGEL. Mr. Speaker, I yield myself such time as I may consume, and would just like to say to the chairman that I understand that my signature was expected at midnight last night, and I am sorry I could not be with him, because then the gentleman might have treated me more gently this evening.

Mr. Speaker, I yield 2 minutes to the gentleman from Maryland (Mr. CARDIN).

Mr. CARDIN. Mr. Speaker, I thank the gentleman for yielding me this time.

Mr. Speaker, this is a very important bill. It contains some very important provisions. I want to applaud the Clinton administration for the initiative and bringing forward the Ticket to Work legislation. It removes impediments from disabled individuals being able to return to work. It will save us money. If we get people off of disability to work, as they want to work, this legislation is very important.

Secondly, the tax extenders are very important. We all want to extend the tax provisions that would otherwise expire, whether it be for research and development or some of the other provisions that are in the bill.

But, Mr. Speaker, I must express my concern about a provision that was added that deals with the fair allocation of organs that would block HHS's regulation in this area. I believe that that provision will jeopardize the health of critically ill patients, and it is also inconsistent with our last vote on the budget omnibus bill.

The HHS regulation went through a process. It listened to the public; it listened to the Institute of Medicine and came forward with recommendations that tries to take geographical politics out of organ distribution and do it to people who are the most critically in need.

□ 1815

I hope we can follow the compromise that was in the last bill because that was a fair compromise that was reached that requires HHS to go out and listen and explain the regulations to the public. It is inconsistent with the provisions that are in this bill.

I hope that HHS will not have to follow the language because it is inconsistent with the last bill because, otherwise, I think we are going to jeopardize the health of the critically-ill individuals.

Mr. ARCHER. Mr. Speaker, I yield 3 minutes to the gentleman from New York (Mr. LAZIO).

Mr. LAZIO. Mr. Speaker, let me begin by thanking the distinguished gentleman from Texas (Mr. ARCHER), the chairman of the Committee on

Ways and Means, for his fine work and for his leadership in getting this to the floor. Let me thank the gentleman from Virginia (Mr. BLILEY), the chairman of my committee, for holding hearings immediately and being the first to actually move the Work Incentives Improvement Act.

This has been a remarkable achievement. I think there are many who believe that we would never get to this day. But, in fact, we are here.

I want to thank people on both sides of the aisle, the gentleman from Connecticut (Mrs. JOHNSON), the gentleman from Minnesota (Mr. RAMSTAD), the gentleman from California (Mr. MATSUI), and the gentleman from California (Mr. WAXMAN) for working in a bipartisan fashion on the Work Incentives Improvement Act.

Today, Mr. Speaker, we have the privilege of taking the most significant stride forward for rights of disabled people since the Americans with Disabilities Act. We are addressing the next great frontier when it comes to fully integrating disabled Americans into society, giving them the same economic opportunities that the rest of us enjoy.

Mr. Speaker, many Americans with disabilities rely on Federal health care and social services, assistance that makes it possible for them to lead independent and productive lives. But, unbelievably, we condition this assistance on their destitution. People with disabilities must get poor and stay poor if they are going to retain their health care benefits. They have got to choose between working and surviving.

That is why I introduced the Work Incentives Improvement Act, and that is why we have over 250 cosponsors from both sides of the aisle to end this perverse system of allowing Americans with disabilities to enter the workforce without endangering their health care coverage.

Mr. Speaker, a 1998 Harris survey found that 72 percent of Americans with disabilities want to work, but the fact remains that only one-half of one percent of dependent disabled Americans successfully move to work. Each percentage point of Americans moving to work represents 80,000 Americans who want to pay all or part of their own way but cannot; 80,000 Americans who are forced by a poorly designed system to sit on the sidelines while American businesses clamor for qualified workers.

This bill, in the end, Mr. Speaker, is about empowering people, people like a 39-year-old Navy veteran from my district who used to work on Wall Street and hoped to become a stockbroker but an accident in 1983 left him a quadriplegic. And even though he requires assistance for even the most basic daily activities, he never gave up on his dream. And 10 years after his accident, he passed the grueling stockbroker licensing exam. But, like most disabled Americans, he cannot afford to lose his health care benefits. If it

were not for the current Federal rules, he would be a practicing, taxpaying stock broker today.

The Work Incentives Improvement Act ends this injustice. It rips down bureaucratic walls that stand between people with disabilities and a paycheck. It is important to remember that a paycheck means a lot more than just money. For a disabled American or any American, it means self-sufficiency. It means pride in a job well done. It means dignity.

Mr. Speaker, we have come a long, long way since the time when Americans with disabilities were shunted off to the farthest corners of our communities. Many Americans have been waiting for us to give them a chance to pursue the American dream. Today let us tell them that the wait is over. Let us get the Work Incentives Improvement Act passed today.

Mr. RANGEL. Mr. Speaker, I yield 1½ minutes to the gentlewoman from California (Ms. LOFGREN).

Ms. LOFGREN. Mr. Speaker, the disability provisions of this act are really important and are going to make a difference in the lives of many. But I want to talk about two other provisions that will make our country more prosperous, and that is the R&D tax credit and Section 127 of the Tax Code.

Our party's position, the Democratic position, as stated by our leader is that the R&D tax credit should be permanent. This 5-year extension is really in the right direction. I am happy to support it. But next year we are going to go for permanent.

On 127, I was so pleased that the gentleman from New York (Mr. RANGEL), the ranking member, has taken so much time to work on this. It is important that we support employer-supported tuition reimbursement plans. In this day and age, when the best educated workforce means they will be competitive, encouraging employers to help employees to continue their education is essential.

Again, I am happy to support this extension, and I look forward to extending this to graduate education. I thank the gentleman from New York (Mr. RANGEL) whose understanding and support of high-tech issues in this bill comes through loud and clear. He really followed through on the commitments he made when he came and visited Silicon Valley and really understood the issue of competitiveness and technology and education.

So kudos to the gentleman from New York (Mr. RANGEL) for his wonderful work. I look forward to taking both of these provisions just a little bit farther in the next Congress.

Mr. ARCHER. Mr. Speaker, I yield 2 minutes to the gentleman from Florida (Mr. FOLEY), a member of the Committee on Ways and Means.

Mr. FOLEY. Mr. Speaker, I do want to just correct a statement made by the prior speaker when she described their efforts to extend permanently the R&D tax credit.

We can tell our colleagues from negotiations that Mr. Summers, the Treasury Secretary, vehemently opposed that permanent extension. So that, if that is the position of the party, we would like the Secretary of the Treasury to be informed of that position so that it would be much easier for the chairman of the Committee on Ways and Means to accomplish something he tried to do at the very outset of deliberations.

I want to also suggest to my colleagues how proud I am to stand up and support this bill. Credits to Puerto Rico and U.S. possessions, minimum tax relief for individuals, permitting full use of personal nonrefundable credits, welfare-to-work tax credits, work opportunity tax credits, a number of initiatives that I think will stimulate the economy, continue us on our road to prosperity, continue to see additional revenues to the Treasury so we can continue to reduce the debt of the American taxpayers to increase and enhance investment in America.

I commend the gentleman from Texas (Mr. ARCHER), the chairman of the Committee on Ways and Means, for seeing this bill to the successful conclusion. Especially, I would like to note the ticket-to-work and Work Incentives Improvement Act of 1999.

So oftentimes some of our vulnerable citizens in society who have been stricken by illnesses and ailments have been unable to make the required choice of whether to stay employed and then forgo, if you will, the Social Security, the Medicare-Medicaid provisions. This bill now makes an attempt, to allow those capable and able individuals to be in the workforce, continue those vital health insurance needs provided by Medicaid and Medicare, and allow them to be productive, taxpaying citizens.

So I applaud the bill and I urge Members to vote for passage of this bill as it comes to the floor.

Mr. RANGEL. Mr. Speaker, it is with great pleasure that I yield 3 minutes to the gentleman from Michigan (Mr. DINGELL), the former chairman and now ranking member of the Committee on Commerce, my friend and distinguished colleague.

(Mr. DINGELL asked and was given permission to revise and extend his remarks.)

Mr. DINGELL. Mr. Speaker, I thank my good friend, the gentleman from New York (Mr. RANGEL) for his kindness to me.

We take one step forward and one back. The bipartisan agreement on organ allocations was reached during negotiations between Labor, HHS and on that appropriations bill.

The revised regulation would not become final until 42 days after enactment, sufficient time to enable the comments on the revisions and, if necessary, to make further modifications. Now we are witnessing an end run by opponents to this proposal with regard to organ allocation policy.

The legislation before us contains a moratorium of 90 days on any allocation regulation. This delay has a huge cost. The regulation calls for broader organ sharing. This is consistent with the conclusion of the National Academy of Sciences, which studied the allocation system.

HHS has stated that approximately 300 lives per year could be saved through broader sharing. The math is simple. There is a difference between a 42-day delay and a delay of almost 90 days.

Two more points to be made. First, blocking HHS oversight amounts to privatization of Medicare and Medicaid expenditures attributable to organ transplants. If my colleagues want to privatize Medicare, let them do it in the open and proper fashion.

Second, blocking HHS oversight continues the proliferation of State organ allocation statutes, at least 12 by last count. That is directly in conflict with the current allocation criteria and with good sense.

The same Members who decry political or bureaucratic involvement in organ allocation policy when they have HHS in mind are stunningly silent when politicians and bureaucrats involved in this are State officials.

A lack of leadership on the issue is creating immense fragmentation of organ allocation policies, just the opposite direction of where IOM said the allocation policies should go.

In like fashion, the Work Incentives Act of 1999 is a large step in the correct fashion. It will ensure that the disabled no longer have to choose between health care and their jobs. The bill also includes a demonstration project to provide health coverage to people who have serious conditions but are not fully disabled, these people who have multiple sclerosis or cerebral palsy. This would enable them to remain as working members of society.

Thanks to hard work and dedication on the part of the administration and the disability community, additional funding has been secured for a very important project here.

During the past few weeks, controversy has swirled around proposed offsets in the bill. Parties from both sides have agreed to remove some of the most contentious payfors. However, I have heard objections from many of my constituents about two offsets that remain, a provision to change the way that students loans are financed and a tax on payments to attorneys who represent Social Security claimants.

Although I am going to vote for this bill, I have substantial concerns for these offsets. And, very truthfully, the things that are done here are wrong.

The Work Incentives Act has overcome many obstacles in its legislative history. The bill is on the floor today because it is based on good policy and because it will make a difference of lives of people with disabilities. For that reason, I support it.

Mr. ARCHER. Mr. Speaker, I yield 2 minutes to the gentleman from Florida (Mr. SHAW), the respected chairman of the Subcommittee on Social Security of the Committee on Ways and Means.

Mr. SHAW. Mr. Speaker, I thank the chairman for yielding me this time.

Mr. Speaker, this legislation is about work. Its goal is to help individuals with disabilities work and support themselves and support their families.

Today only three in ten adults with disabilities work, compared with eight in ten adults without disabilities. A big reason is Government programs take away cash and medical benefits if disabled individuals find and keep jobs. That must change. And it will change under this bill that is before us today.

No one should be afraid of losing benefits if they do the right thing and try to work. We should reward and help especially those who struggle to overcome their disabilities. That is why we are offering the new tickets disability individuals can use to obtain whatever services they need in order to work.

But we do not stop there. We extend health care coverage for a total of 8½ years so that no one has to fear losing their medical coverage if they go to work.

Some may still not risk going to work for fear of having to wait months or even years to get back on the benefits if their health begins to once again decline. So we ensure disabled individuals can quickly get back onto the rolls if they try to work but their health deteriorates.

That is the right kind of safety net, one that encourages work and protects those who need help along the way. From providing more help, finding and keeping a job, ensuring health care coverage, to strengthening the safety net to those who cannot stay on the job, this legislation does the right thing. This is another historic step to ensure that everyone can know the dignity that comes with work.

I urge all Members to support this bill.

Mr. RANGEL. Mr. Speaker, I yield 2 minutes to the gentleman from Ohio (Mr. BROWN), the ranking member of the Subcommittee on Health and Environment of the Committee on Commerce.

Mr. BROWN of Ohio. Mr. Speaker, I thank the gentleman from New York (Mr. RANGEL) for yielding me the time.

Mr. Speaker, this Congress owes a debt of gratitude to the gentleman from New York (Mr. LAZIO) and to the gentleman from California (Mr. WAXMAN). Thanks largely to their efforts, we have an opportunity to do something right. I wish I could say that more often.

We owe a debt of gratitude especially to the gentleman from Michigan (Mr. DINGELL) and the gentleman from New York (Mr. RANGEL) under whose leadership proponents of this legislation managed to defend repeated attempts to emasculate it.

Finally, we owe a debt of gratitude to President Clinton. The President and

his exceptional health team have demonstrated their commitment to the goals of this bill in a number of ways, lending their assistance again and again as this arduous process moved forward.

The idea behind the bill is simple. If individuals want to work, let us help them work. For many disabled individuals, the ability to work hinges on reliable health care. Yet, under current law, work means losing access to that care. By providing continued access to Medicare and Medicaid, the Work Incentives Improvement Act enables individuals to leave the disability roles and go back to work.

H.R. 1180 taps into the tremendous human potential that all of us have and takes us closer to a time where equal opportunity for disabled people is no longer an objective, it is a fact.

Nothing is perfect. This bill could have been much closer to that ideal if the Republican leadership had not co-opted it with a self-serving moratorium on the organ allocation bill. And there is a user fee provision that may reduce the number of attorneys willing to represent disabled clients. It is not a particularly well thought out provision. But overall, Mr. Speaker, the bill is a victory for the disabled and a much needed reminder that American values are, in fact, intact.

I ask for support of the bill.

□ 1830

Mr. ARCHER. Mr. Speaker, I yield 2 minutes to the gentlewoman from Connecticut (Mrs. JOHNSON), the respected chairman of the Subcommittee on Human Resources of the Committee on Ways and Means.

Mrs. JOHNSON of Connecticut. Mr. Speaker, I thank the gentleman for yielding me this time. I want to comment briefly on two parts of this bill. First of all, it is really a joy to know that people in my district who suffer from physical or mental disabilities and who want to work and are capable of work but cannot work because of fear of losing their health coverage are going to be able to work. And as the Christmas holidays approach and they are offered longer hours, I know that they are going to be able to realize their dream of being a real part of the work team at their place of business. It is really a wonderful thing that we have done in this bill, to enable Americans simply to realize the opportunity of self-fulfillment that work offers.

But I also want to mention one other thing. How do we foster invention? Lots of times, we ask ourselves, how do we assure that there will be a strong economy for our children? In this bill is one of the keys. For the first time ever, we make the research and development tax credit in place and law for 5 years. Our goal is permanence, but we have never had 5 years. This will enable companies to plan and enable them to invest at a pace and at dimensions of dollars that we have never seen before. That drives new products. That

drives state-of-the-art inventions. That drives economic leadership. And that drives good jobs, high-paying jobs, and a successful America.

I want to personally congratulate the gentleman from Texas for his dedication to the R&D tax credit that would be longstanding enough to foster the kind of growth and invention, support for an entrepreneurial economy that this R&D tax credit will achieve. I know that he would have preferred permanence as many of us would have. But this is a tremendous breakthrough. It is a real tribute to the gentleman from Texas and his dedication and to this Congress that we have extended the R&D tax credit for 5 years.

Mr. RANGEL. Mr. Speaker, I yield 2 minutes to the gentlewoman from Texas (Ms. JACKSON-LEE).

Ms. JACKSON-LEE of Texas. Mr. Speaker, I thank the gentleman for yielding me this time. I guess I would like to focus on the dignity that this bill gives to many Americans who simply want a chance. I thank the ranking member. I thank the chairman of this committee. I could quarrel with the process in some of the extenders that we will also be including, but I want to respond with a focus on one of my constituents who saw me in the Heights, an area of my district in Houston, and spoke about her son. We were at a memorial giving tribute to those who had served in the military who lived in the Heights area. After the program, she came up and said, "What is the progress, when will you pass the Work Incentives Improvement Act? My son wants to be independent. My son wants to get on his feet. My son who is disabled simply wants to have his day in the sun."

And so this particular bill is of great relief to her and her family. It is a ticket to work and self-sufficiency program. And in fact over the years that I have been in Congress, I have enjoyed meeting with some of the physically and mentally disabled or challenged who have come to my office and have asked simply to be allowed to work and then not to lose their health benefits. That is their greatest crisis. In order for them not to be dependent, they need to have this kind of support system. I support this effort that would expand beneficiaries' access to public and private vocational rehabilitation providers and to employment service providers acting as employment networks under the program, and I support particularly the aspect of this bill that allows the disabled to go off and work and then, for example, if there is a problem, they still have the ability to come back within a 60-month period and get the benefits that they need without filing a new application. This is long overdue.

Mr. Speaker, I rise to support this important measure that both allows disabled persons to retain their federal health benefits after they return to work along and authorizes extensions for several tax provisions.

The conference report on H.R. 1180, Work Incentives Improvement Act is a true measure

of bipartisan efforts and includes a compromise version of the original House and Senate bills. This bill would establish the "Ticket to Work and Self-sufficiency Program" that would expand beneficiaries' access to public and private vocational rehabilitation providers and to employment service providers acting as employment networks under the Program.

This bill will allow disabled individuals to receive an expedited reinstatement of benefits if they lose their benefits due to work activity. Disabled individuals would have 60 months after their benefits were terminated during which to request a reinstatement of benefits without having to file a new application. It is imperative that we protect these disabled individuals, and this bill would provide provisional benefits for up to six months while the Social Security Administration determines these requests for reinstatement.

In addition to allowing disabled persons to retain their federal health benefits after they return to work, this bill also includes extensions of various tax provisions, many of which are scheduled to expire at the end of this year. The conference agreement provides approximately \$15.8 billion in tax relief over five years (\$18.4 billion over 10 years) by extending certain tax credits.

More specifically, this measure extends the Research and Development tax credit for five years (this credit would be expanded to include Puerto Rico and possessions of the United States), the Welfare-to-Work and Work Opportunity tax credits for 30 months, and the Generalized System of Preferences through September 30, 2001. Finally, the measure includes approximately \$2.6 billion in revenue offsets over five years (\$2.9 billion over 10 years).

This bill also delays the effective date of the organ procurement and transplantation network final rule. This rider provides people with more time to comment on the rule and for the Secretary to consider these comments. Our organ distribution system requires changes to create a more national system, to diminish the enormous waiting times, and to ensure that those people who are suffering the most receive help in time. The late, great Walter Payton's sorrowful death is just another sad reminder that far too many people in need of organs are trapped on waiting lists.

Finally, the bill requires the National Oceanic and Atmospheric Administration to continue existing contracts for its multi-year program for climate database modernization and utilization.

This measure clearly is important to the American people on many fronts. It is imperative that we pass this important piece of legislation. It is a sign that we are unified on both sides of the aisle, and it proves to the American public that we have put their needs above political posturing.

Mr. ARCHER. Mr. Speaker, I yield 1 minute to the gentleman from California (Mr. OSE).

Mr. OSE. Mr. Speaker, I rise today in strong support of H.R. 1180, the Work Incentives Improvement Act. I want to express my sincere appreciation to the gentleman from Texas (Mr. ARCHER) and to the gentleman from New York (Mr. RANGEL). We have heard much talk this evening about tax credits for R&D and the like and those are very

important. But when I read this bill and I listen to the conversations, I hear freedom. I hear freedom for 5 million people who right now are confined or constrained because the law does not allow them to maintain their health benefits.

Mr. Speaker, if I could say one thing that just sends me home here soon with a light heart, it is that at the end of the 20th century as we did at the end of the 18th century, for over 5 million Americans this bill lets freedom ring. It lets them compete and participate. I applaud my colleagues.

Mr. ARCHER. Mr. Speaker, I yield 2 minutes to the gentleman from Oklahoma (Mr. WATKINS), another respected member of the Committee on Ways and Means.

(Mr. WATKINS asked and was given permission to revise and extend his remarks.)

Mr. WATKINS. Mr. Speaker, I rise in support of the Work Incentives Improvement Act of 1999. First and foremost I say to my committee chairman and ranking minority member that the provisions here on the extenders is one that is going to be of great assistance and help to be able to continue moving the economy forward. The R&D for 5 years is a great need for business and industries that do a lot of research.

I would like to bring out a couple of things that are not highlighted, but I have had a chance of working personally with a number of individuals concerning this. One, the conference agreement would provide a 2-year open season beginning January 1 for clergy to revoke their exemption from Social Security coverage. This is something that a lot of ministers, and I have been associated with a lot of them through the fact that my former father-in-law was a minister, he is deceased now, but it is something I know he was concerned about back years ago.

The other provision is even a little closer. My wife and I have had our home available, licensed for foster children over the years; and I have worked with a lot of foster children. In this bill we have had a simplification of the definition of foster child under the earned income credit program. It provides for the simplification. Under this particular provision, a foster child would be defined as a child who is cared for by the taxpayer as if he or she were the taxpayer's own child; two, has the same principal place of abode as the taxpayer for the taxpayer's entire taxable year; and, three, either is the taxpayer's brother, sister, stepbrother, stepsister or descendant, including an adopted child, of any such relative.

This is something that has been focused. I do not know if any of you have ever tried to work with a lot of the situation dealing with foster children, but it is a very cumbersome problem. This will help eliminate that.

Mr. ARCHER. Mr. Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. WELLER), another respected member of the Committee on Ways and Means.

(Mr. WELLER asked and was given permission to revise and extend his remarks.)

Mr. WELLER. Mr. Speaker, let me begin my comments by just again praising the leadership of our committee's chairman for his efforts in putting together this good package that we are voting on today, a package that deserves bipartisan support, as well as the good ranking member for his efforts in making this a bipartisan effort today.

Mr. Speaker, this is a big victory for a lot of folks back home. The disabled are big winners with the ticket to work provisions in this bill, legislation that helps the disabled enter the workforce and keep their health care benefits. I really want to commend the gentleman from Missouri (Mr. HULSHOF) for his hard work and efforts on this.

It is also a victory for the taxpayers. This Congress said no to the President's \$238 billion in tax increases. This Congress said no to the President's plan to raid the Social Security Trust Fund by \$340 billion. I do want to express my biggest disappointment for this year and that is when the President vetoed our efforts to help 28 million married working couples when the President vetoed our efforts to eliminate the marriage tax penalty.

This legislation is good legislation. It helps folks back home in Illinois. There are three provisions I would like to highlight. Of course, the 5-year extension of the research and development tax credit. That is so important in Illinois, a multiyear commitment to providing this incentive for research into cancer, research into biotechnology, to increase food productivity, to increase the opportunity to grow our new economy, particularly in high technology since Illinois ranks fourth in technology. I also would note that Puerto Rico is included with this extension of the R&D tax credit, extension of the work opportunity tax credit.

We want welfare reform to work. If we want welfare reform to work, of course we want to ensure that there is a job for those on welfare. The work opportunity tax credits help contribute to a 50 percent reduction in the welfare rolls in Illinois. We extend it for 2½ years.

Third and last, I want to note the brownfields tax incentive, a provision that many of us worked on to include in the 1997 budget act. This is successfully working. Of course we extend it. I would point out that the district I represent on the South Side of Chicago, that the former Republic Steel property, the largest brownfield in Illinois, the largest new industrial park in Illinois benefited from this brownfields tax incentive. This is good legislation, and it deserves bipartisan support.

Mr. RANGEL. Mr. Speaker, I yield myself the balance of my time. I would like to take this time to thank the gentleman from Texas for the courtesies he has extended to me. While we

have had major policy differences, he has always been a gentleman, he has been fair, he has been honest, and above all he has been sincere. I want to thank Mr. Singleton and the entire majority staff as well as Janice Mays. We have probably one of the best staffs in the House and they have worked hard and they have worked with us.

While it is my opinion that we did not accomplish too much in this first year, I look forward to working with the gentleman side by side, hand in hand to see what we can do to restore confidence in the Social Security system, the Medicare system, and see what we can do about prescription drugs.

Mr. ARCHER. Mr. Speaker, I yield myself the balance of my time. I thank the gentleman for his comments. We have much work to do next year, where we can work hopefully together on a strong bipartisan basis on Social Security, trade issues, and many other issues before our committee.

Mr. RANGEL. Mr. Speaker, I would like to clarify a provision relating to the rum cover over provision for Puerto Rico. The House-Senate conference agreement calls for an increase in the rum cover over for Puerto Rico from the current level of \$10.50 to \$13.25. It is my understanding that by an agreement between the Administration and the Governor of Puerto Rico, the Honorable Pedro Rossello, one-sixth of the \$2.75 increase in the rum cover over to Puerto Rico will be dedicated to the Puerto Rico Conservation Trust, a private, nonprofit section 501(c)(3) organization operating in Puerto Rico. The Puerto Rico Conservation Trust was created for the protection of natural resources and environmental beauty of Puerto Rico and was established pursuant to a Memorandum of Understanding between the Department of the Interior and Commonwealth of Puerto Rico dated December 24, 1968."

Mr. NEAL of Massachusetts. Mr. Speaker, I am going to vote for this legislation even though it is not paid for because added to the Ticket To Work program are important "must pass" tax provisions vital to all our constituents.

The most important provision in this bill is the extension of the current waiver of the alternative minimum tax rules affecting non-refundable personal credits. Without enactment of this provision, next April approximately 1 million taxpayers will find they owe more money to the federal government than they thought, for an average "stealth" tax increase of about \$900 each. Millions more will have to do the alternative minimum tax calculations, which can take 5 or 6 hours, just to find out they don't owe any more money.

In 1997 Congress approved new credits for children, and for education. We promised our constituents that the federal government would help them with these responsibilities. However, we subjected these credits to the alternative minimum tax. The result is that more and more middle income Americans will be forced into the AMA by our actions—and we will rightly get the blame.

So now we have to fix it. This bill does that for 3 years. But what we really need to do is to fix this problem permanently, because no middle income American should ever by sub-

ject to the alternative minimum tax calculation simply because they decided to send their kids to college.

Mr. Speaker, other members may focus their remarks regarding taxes on the research and development tax credit, or the Subpart F extension, or employer provided educational assistance. All important items. But not items that drive this bill—what is of paramount importance is the AMA fix, and I am pleased that we are finally taking steps to fix this for the immediate future.

Mr. STARK. Mr. Speaker, I rise with regret to oppose what is being called the "Ticket to Work and Work Incentives Improvement Act Conference Report." This title would never pass the "Truth in Labeling" test if it were on a box of food, but you can get still away with such falsehoods here in Congress—especially in the waning hours of the session.

The reason for my regret is that I have worked much of the year to encourage passage of the Work Incentives Improvement Act here in the House. This legislation is vitally important for disabled individuals. Our current system—which actively discourages disabled people from returning to the workforce—simply makes no sense. Allowing disabled people to maintain their health insurance through Medicare when they return to work is something that should have always been law, not something we are finally doing today.

I support that component of this bill which we are here considering today. I am unhappy that it has been weakened from the version that originally passed the House. In that bill, we would have given disabled individuals the ability to keep their Medicare health insurance for 10 years, while the bill before us today only extends that coverage for 8½ years. But, there is no question that this would be a significant improvement from the status quo.

However, there is much more to this bill than the title would suggest. Through late night negotiations, this bill changed. In addition to the provisions relating to the Work Incentive Improvement Act, the bill includes two completely unrelated provisions. The first of these is a 90-day moratorium preventing the Secretary of Health and Human Services from implementing a regulation to improve our organ allocation program in the U.S. Also included is a package of tax extenders that is not fully paid for.

The moratorium on the organ allocation regulation is especially egregious. The regulation is a product of negotiations with the transplant community, patients, and the general public and ensures the sickest patients get organs first—instead of basing life and death decisions on geography.

Republicans included this same 90-day delay of the HHS organ allocation regulations in legislation earlier this year. The President vetoed that bill and cited the organ allocation moratorium as "a highly objectionable provision." After that veto, Congressional budget negotiators and the White House agreed to permit the HHS organ allocation rule to go into effect after a 42-day consultation period. Yet only a few days later, they have decided to renege on that agreement.

Congress has already delayed the HHS rules for over a year—permitting the Institute of Medicine (IoM) to study the current system. The IoM report strongly validates the HHS regulations by calling for broader sharing of organs and for HHS to exercise its "legitimate

oversight responsibilities." Twelve patients die every day while awaiting an organ transplant under the current system. The fact of the matter is this moratorium is a pork barrel project for members of Congress who either represent the federal contractor, or small transplant centers with poorer outcomes who stand to lose under the new regulations. The Secretary's regulation will save lives. This moratorium will cause people to die. Which side do you think is right?

Just like every other bill the Republicans have tried to push through this Congress, the tax extender provisions in the bill give big tax breaks to big business. It includes tens of millions of rifle-shot give-aways to GE—certainly not one of the neediest taxpayers in this country. It also spends \$13 billion to give corporations money for research. Most companies would conduct research on their own regardless of whether or not taxpayers foot the bill. Do you really think that corporations like Schering-Plough would have halted research for their highly profitable drug Claritin if Congress had denied a research tax credit? Companies must conduct research in order to create profits. They don't need tax incentives from Congress to make a profit.

In addition, this bill throws money to the wind through the highly unsuccessful windmill tax credit. There are windmills up and down the highways of California in hopes that they might produce effective forms of electricity. Once again, we're extending \$3 billion in tax breaks to energy companies so that they can continue pouring money into a lofty goal. Coupled with this tax break is one that will provide tax incentives to energy companies who can produce energy from poultry droppings. Why stop at energy? We should give them tax incentives to produce gold from chicken droppings!

Because of these unrelated provisions that were snuck into an otherwise very worthy bill, I am forced to vote against this bill today.

Mr. SENSENBRENNER. Mr. Speaker, I rise in support of H.R. 1180, the Work Incentives Improvement Act of 1999. As Chairman of the Committee on Science, I would like to highlight a provision of the bill that is particularly important to our nation's research base: the Research and Development Tax Credit (R&D tax credit).

H.R. 1180 includes the longest ever extension of the R&D tax credit. While I support a permanent extension of the R&D credit, this five-year extension is a step in the right direction. As federal discretionary spending for R&D is squeezed, incentives must be used to maximize private sector innovation and maintain our global leadership in high-tech, high-growth industries that help keep our economy the strongest in the world.

A long-term extension of the credit will aid the research community by creating incentives for private industry to fund research projects. Congress has extended the R&D Tax Credit repeatedly over a period of 18 years. The credit again lapsed on June 30th of this year. This five-year extension will put an end to the start-and-stop approach that has characterized this extension process.

A 1998 Coopers & Lybrand study found that U.S. companies would spend \$41 billion more (in 1998 dollars) on R&D as a result of extending the credit. This in turn would lead to greater innovation from additional R&D investment and would begin to improve productivity

almost immediately, adding more than \$13 billion a year to the economy's productive capacity by the year 2010. The Coopers & Lybrand report went on to note that the R&D tax credit would ultimately pay for itself. "In the long run," the report states, "\$1.75 of additional tax revenue (on a present value basis) would be generated for each dollar the government spends on the credit, creating a win-win situation for both taxpayers and the government."

Last year, the Science Committee released a National Science Policy Study entitled *Unlocking Our Future: Toward A New National Science Policy*. The *Unlocking Our Future* is the most comprehensive study of federal science policies ever conducted by Congress. And the full House passed a resolution adopting its recommendations. One of the study's primary recommendations was the permanent extension of the R&D tax credit. I am pleased that the House today is taking a concrete step toward enacting the study's recommendations.

Mr. FRELINGHUYSEN. Mr. Speaker, I rise today in support of H.R. 1180, the conference report on the Ticket to Work and Work Incentives Improvement Act.

This bill will provide a true "Ticket-to-Work" for disabled individuals by bringing them back into the workforce while still providing them with a safety net of government services that are needed to help make the transition. It is an important first step toward addressing the disincentives which exist in current law that discourage disabled individuals from working.

According to a Washington Post article published earlier this year, 6.6 million working-age Americans receive disability checks from the Federal Government every month. All too often, these individuals are unable to return to the workforce. Among the barriers they face upon returning to work is they risk the loss of important federal benefits such as Medicare health care coverage. Under this legislation, individuals would be eligible for up to four and a half additional years of Medicare benefits. While I would have preferred to have individuals eligible for Medicare for an additional six years, I believe this is a positive step forward and that further steps should be taken in the future.

In addition, this bill provides a voucher that individuals can exchange for rehabilitation, employment or other necessary services with their provider of choice.

The Ticket to Work bill will change the Social Security Administration's disability programs for the better. As Tony Young of the United Cerebral Palsy Association said in his testimony before the Ways and Means Committee in March, these programs, "are transformed from a safety net into a trampoline; not only catching people with disabilities as they fall out of work, but also giving them a boost back into work as they are ready."

I urge my colleagues to support this legislation, which is an important step toward helping individuals with disabilities be independent, and to become a vital part of the workforce.

Mr. BILIRAKIS. Mr. Speaker, I rise today in support of H.R. 1180, the Work Incentives Improvement Act of 1999. I am a cosponsor of this important legislation and was proud to expeditiously move this proposal through my Subcommittee and support its passage through the House Commerce Committee.

My Subcommittee held a hearing at which we heard from federal, state and local officials, as well as individuals living with disabilities. All

of the witnesses emphasized the need for this legislation. They noted that the current system unfairly forces people to choose between work and health care.

H.R. 1180 was introduced in March by our colleagues RICK LAZIO and HENRY WAXMAN, and this bill underscores the positive power of bipartisanship.

The bill removes barriers for individuals who want to work. By encouraging work over welfare, it also promotes personal dignity and self-sufficiency.

Two federal programs—Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI)—provide cash benefits to people with disabilities. By qualifying for these benefits, individuals are also eligible for health coverage through Medicare and Medicaid. These programs provide comprehensive services that people with disabilities value and need.

Ironically, individuals with disabilities risk losing these health protections if they enter the work force. Under current law, earnings above a minimal amount trigger the loss of both cash benefits and health coverage under Medicare and Medicaid.

H.R. 1180 would allow states to expand the Medicaid buy-in option to persons with disabilities through two optional programs. The bill also creates a trial program to extend Medicare Part A benefits to SSDI recipients. Further, it provides infrastructure and demonstration grants to assist the states in developing their capacity to run these expanded programs.

Finally, the bill creates a new payment system for vocational rehabilitation programs that serve individuals with disabilities. Similar provisions were passed by the House of representatives last year.

As I have emphasized before, H.R. 1180 will help people help themselves. Approval of this bill by the House of Representatives today is an important step in improving the quality of life for millions of Americans who live with disabilities.

Mr. BENTSEN. Mr. Speaker, I rise today in strong support of the conference report of H.R. 1180, the Work Incentives Improvement Act. This bill includes three separate bills, including the conference report for H.R. 1180, the tax extenders legislation, and a provision related to organ transplantation regulations. I strongly support all three of these proposals and urge my colleagues to support this bill.

I am pleased that the conference report for H.R. 1180 does not include certain provisions related to school-based health services. An earlier version of this bill, as approved by the House, included Section 407 to help offset the costs associated with this bill. Section 407 would be detrimental to our local schools districts who have worked to screen children for Medicaid eligibility. According to the U.S. Census Bureau there are 4.4 million children who are eligible for, but not enrolled in, Medicaid. Under existing laws, public schools can receive reimbursements through the Medicaid Administrative Claiming (MAC) program to help screen for these Medicaid eligible children. I learned about these provisions through the efforts of a local school district, the La Porte Independent School District (PISD). PISD is the lead district for a consortium of 200 small and rural Texas school districts participating in the MAC program. After learning about this provision, I also organized a letter

to Speaker HASTERT in opposition to these off-set provisions. I am pleased that the conference committee has removed all provisions related to school-based health programs that would have been harmful.

I support passage of this measure because it ensures that disabled persons can keep their health insurance when they return to work. Under current law, disabled persons who are eligible for Social Security disability benefits are precluded from earning significant income without losing their Medicare or Medicaid health insurance. This bill would permit disabled persons to work while maintaining their health insurance coverage. For many disabled persons, this health insurance is critically important since they can neither afford nor purchase health insurance in the open market. This bill would provide SSDI beneficiaries with Medicare coverage for eight and 1/2 years, instead of the current 4-year term. This legislation also provides vocational rehabilitative services to disabled persons, ensuring their access to the training they need to become more self-sufficient. As an original cosponsor of the underlying bill, I support all of these provisions.

This bill also includes a critically important provision related to organ transplantation policy. This bill would impose a 90-day moratorium on the proposed Department of Health and Human Services (HHS) regulations related to organ transplantation policy that would change the current allocation system from a regionally-based system to a national medical-need system. This provision also includes a requirement that HHS must reopen this proposal for public comment about this issue. I am very concerned about the impact of this proposed regulation on organ transplants done at the Texas Medical Center. The Texas Medical Center and the local organ procurement organization, LifeGift, have done an excellent job of encouraging organ donations in our area. The impact of this regulation would be to override the current system which was developed in consultation with our nation's premier transplantation physicians and practitioners. If this new regulation were implemented, many of these organs could possibly be transferred away from the local patients who need them. I am pleased that Congress has acted to provide itself with sufficient time to reauthorize the National Organ Transplant Act (NOTA). The House has already approved this bill, giving the Senate sufficient time to consider and approve a NOTA measure.

This is an important bill which we should approve and I would urge my colleagues to vote for this bill.

Mr. WAXMAN. Mr. Speaker, I rise in strong support of the basic provisions of H.R. 1180, the Work Incentive Improvement Act. The core program contained in this bill is designed to provide support and health care assistance to severely disabled people who want to work despite the obstacles their disabilities present, indeed who are determined to work and become productive and contributing members of society.

These are people who need to keep their health care coverage through Medicaid and Medicare to enable them to stay in the work force. We owe them nothing less.

It is a testament to the compelling nature of their case that this bill has had such broad and bipartisan support in both the House and the Senate. The President has also been

strongly committed to seeing it enacted, from his call to the Congress to enact this program in his State of the Union message last January to the final negotiations to bring this bill here today. And I want to particularly note the contributions of RICK LAZIO, who I was pleased to join as the original sponsor of the bill, NANCY JOHNSON and BOB MATSUI from the Ways and Means Committee, and JOHN DINGELL and CHARLIE RANGEL who served on the conference committee.

We can all be proud of its enactment. I am especially pleased that the conference report increased the funds available to support demonstrations by States to provide health services to persons with potentially severe disabilities in order to keep their health from deteriorating and to allow them to continue to work. Surely, this is one of the most sensible and cost-effective things we can do.

But it is unfortunate that this exemplary piece of legislation has been used in the closing days of this session to pursue other agendas. The conference report includes a rider added to H.R. 1180 through stealth and political extortion which delays vital reforms of our national organ allocation system.

The one-year moratorium on the Department of Health and Human Service's Final Rule expired last month. Last week, the Administration and the appropriators, including Chairman YOUNG and Mr. OBEY, agreed to a final compromise 42-day comment period on the Final Rule's implementation.

But the defenders of UNOS and the status quo weren't satisfied. They twisted arms behind closed doors. They blocked passage of the Health Research and Quality Act of 1999 and the reauthorization of the Substance Abuse and Mental Health Administration. They blocked enactment of critical medical education payments for children's hospitals. And they subverted the authority of the committees of jurisdiction.

Now, the compromise is being abandoned by the Republican leadership. The commitments made to the Administration and to Members have been broken in bad faith.

And what's the result? The 42 days becomes 90 days.

Mr. Speaker, enough is enough.

There is no excuse for this action. The Final Rule is the result of years of deliberation. It embodies the consensus that organs should be shared more broadly to end unjust racial and geographical disparities.

Every day of delay is another day of unconscionable 200 to 300 percent disparities in transplant and survival rates across the country—disparities which the Final Rule addresses.

Every day delays action on the Institute of Medicine's recommendation "that the Final Rule be implemented" because broader sharing "will result in more opportunities to transplant sicker patients without adversely affecting less sick patients."

And every day condones a status quo of gross racial injustice and unjust, parochial self-interest.

Mr. Speaker, the status quo is slowly killing patients who deserve to live, but are deprived of that right by a system that stacks the odds against them. But in spite of this rider, in spite of the delay and the back-room politics, reforms will come. Therefore, I urge my col-

leagues to support the Final Rule and to oppose the organ allocation rider.

Mr. CRANE. Mr. Speaker, I rise in strong support of the tax relief provisions which have been attached to H.R. 1180.

This tax relief package renews several temporary tax relief provisions and addresses other time sensitive tax items.

For example, we give at least one million American families relief from an increase in their alternative minimum tax that would occur when they take advantage of the child tax credit, the dependent care tax credit, or other tax credits. In addition, we renew and extend the exclusion from income for employer-provided educational assistance.

For businesses, we are extending the very valuable research and experimentation (R&E) tax credit for five years while we extend the creditor to Puerto Rico and the other U.S. territories for the first time. The R&E credit will allow U.S. companies to continue to lead the world in innovative, cutting-edge technology.

In an effort to help get Americans off government assistance and into the workplace, we are extending the Work Opportunity Tax Credit and the Welfare-to-Work Tax Credit through the end of 2001.

One item that I was particularly grateful to have included in this package is an increase in the rum excise tax cover-over to Puerto Rico and the Virgin Islands from the current \$10.50 per proof gallon to \$13.25 per proof gallon. I was, however, disappointed that the provision did not include language to specifically state that a portion of Puerto Rico's increase is designated for the Conservation Trust Fund of Puerto Rico.

Instead, I understand that an agreement has been reached with the Governor of Puerto Rico to provide one-sixth of the increase to the Trust Fund during the time of the increase of the cover-over (July 1, 1999 through December 31, 2001). I appreciate the support of the Governor in this endeavor. The Conservation Trust Fund, which enjoys tremendous support from the people of Puerto Rico, plays an important role in the preservation of the natural resources of the island for the benefit of her future generations.

Mr. Speaker, I applaud the efforts of our Chairman, BILL ARCHER, in putting together this tax relief package and I urge my colleagues to support it.

Mr. PORTMAN. Mr. Speaker, I rise in support of the tax extender and Ticket to Work package. I commend the Chairman and my colleagues RICK LAZIO of New York and KENNY HULSHOF of Missouri for their leadership on this issue.

So many people with disabilities want to work, and technological as well as medical advances now make it possible for many of them to do so. Unfortunately, the current Social Security Disability program has an inherent number of obstacles and disincentives for people to leave the rolls and seek gainful employment because they will lose cash and critical Medicare benefits.

This proposal before us today is designed to eliminate those obstacles and allow beneficiaries to select from a wider choice of rehabilitation and support services. It also extends health benefits for disabled people returning to work, which has been one of the single biggest challenges for helping people to make this transition.

Specifically, it expands state options under the Medicaid program for workers with disabilities, and it extends Medicare coverage for SSDI beneficiaries.

Importantly, this bill not only will well serve the disabled, and also will save millions of Social Security dollars in the coming years. The key to this bill is that it will provide people with the opportunities and means they have asked us for to become productive members of society. This is a good and fiscally responsible bill.

I'd also like to express my support for the important package of tax extenders contained in this legislation. These extenders—like the R&D tax credit and others—are essential elements in our effort to maintain our strong economy.

I urge my colleagues to support this responsible package.

Mr. KLINK. Mr. Speaker, I rise today in opposition to the inclusion of the provision that stops the Department of Health and Human Services from improving the system of organ allocation in this country. The organ provision was only thrown into this bill at the last minute, and it has no place in this bill.

The current system for organ sharing is not fair and needs to be improved. Organ sharing is a matter of life and death. The problem is that every year people die unnecessarily because the current organ allocation system is broken. We can do better and I urge my colleagues not to let parochial interests get in the way of fixing the problem.

Whether or not you get the organ that will save your life should not depend on where you live. Organs do not and should not belong to any geographical or political entity. But, under the current system, depending on where the organ was harvested, it could be given to someone with years to live—while someone in the next town across the wrong border may die waiting for a transplant.

The most difficult organ to transplant is the liver. Pioneered at the University of Pittsburgh, upwards of 90% of all the liver transplant surgeons today were either trained at Pittsburgh or by doctors who were trained there. Yet facilities like Pittsburgh, Mt. Sinai, Cedars-Sinai, Stanford and other highly regarded transplant centers which take on the most difficult and riskiest transplant patients are struggling with the longest waiting times in the country.

While these centers are highly regarded, many of their patients do not come to them because of their reputations. The fact is that many of their patients only seek them out after having been turned down by their local transplant centers. There is strong evidence to suggest that many smaller transplant centers avoid the riskier transplants on the sicker patients because they are more difficult and would adversely impact their reputations should they not be successful.

This isn't right. Whether you live or die should not depend on where you live.

This debate is not about pitting big transplant centers against small ones, or about pitting one region against another. It is about making sure that the

gift of life goes to the person who needs it the most rather than someone who happens to have the good fortune to live in the right state, county or city. Its about helping at least 300 people each year to continue to live.

The fact is that the current system discriminates against people who live near the highly regarded centers with the longer waiting lists. It's not their fault that their local center is willing to take the harder and sicker patients when other centers avoid the sicker patients in favor of patients who may be still able to work, go to school, or even play golf while patients elsewhere are near death without any opportunity to receive that organ because they have the misfortune of being on the wrong side of the Pennsylvania—Ohio line.

All HHS wants to do is: (1) require UNOS to develop policies that would standardize its criteria for listing patients and for determining their medical status, and (2) ensure that medical urgency, not geography, is the main determinant for allocating organs.

HHS should be allowed to proceed. The longer we delay the more lives are at risk. In this day of modern air travel and communications there is no good reason for an organ to stop at the border. There is no good reason why if I passed away while attending the Superbowl in New Orleans that my liver should go to a golfer in Louisiana when I may have a loved one who is in desperate need of a transplant at home.

People are dying because they happen to live in the wrong zip code and because states do not want to share their organs. Nowhere else in society would we allow a monopoly like this to continue. We must put an end to this craziness. There is no room in this country for politics to affect who lives and dies. The patients who need the organs the most should get them. Period.

The SPEAKER pro tempore (Mr. PEASE). Without objection, the previous question is ordered on the conference report.

There was no objection.

The SPEAKER pro tempore. The question is on the conference report.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. ARCHER. Mr. Speaker, I object to the vote on the ground that a quorum is not present and make the point of order that a quorum is not present.

The SPEAKER pro tempore. Evidently a quorum is not present.

The Sergeant at Arms will notify absent Members.

The vote was taken by electronic device, and there were—yeas 418, nays 2, not voting 15, as follows:

[Roll No. 611]

YEAS—418

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|-------------|--------------|-------------|
| Abercrombie | Baldwin | Bentsen |
| Ackerman | Ballenger | Bereuter |
| Aderholt | Barcia | Berkley |
| Allen | Barr | Berman |
| Andrews | Barrett (NE) | Biggart |
| Archer | Barrett (WI) | Bilbray |
| Armey | Bartlett | Bilirakis |
| Baca | Barton | Bishop |
| Bachus | Bass | Blagojevich |
| Baird | Bateman | Bliley |
| Baldacci | Becerra | Blumenauer |

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| Blunt | Gibbons | Luther |
| Boehkert | Gilchrest | Maloney (CT) |
| Boehner | Gillmor | Maloney (NY) |
| Bonilla | Gilman | Manzullo |
| Bonior | Gonzalez | Markey |
| Bono | Goode | Martinez |
| Borski | Goodlatte | Mascara |
| Boswell | Goodling | Matsui |
| Boucher | Gordon | McCarthy (MO) |
| Boyd | Goss | McCarthy (NY) |
| Brady (PA) | Graham | McCollum |
| Brown (FL) | Granger | McCrery |
| Brown (OH) | Green (TX) | McDermott |
| Bryant | Green (WI) | McGovern |
| Burr | Greenwood | McHugh |
| Burton | Gutierrez | McInnis |
| Buyer | Gutknecht | McIntyre |
| Calvert | Hall (OH) | McKeon |
| Camp | Hall (TX) | McKinney |
| Campbell | Hansen | McNulty |
| Canady | Hastert | Meehan |
| Cannon | Hastings (FL) | Meek (FL) |
| Capuano | Hastings (WA) | Meeks (NY) |
| Cardin | Hayes | Menendez |
| Carson | Hayworth | Metcalf |
| Castle | Hefley | Mica |
| Chabot | Herger | Millender- |
| Chambliss | Hill (IN) | McDonald |
| Chenoweth-Hage | Hill (MT) | Miller (FL) |
| Clay | Hillery | Miller, Gary |
| Clayton | Hilliard | Miller, George |
| Clement | Hinche | Minge |
| Clyburn | Hinojosa | Mink |
| Coble | Hobson | Moakley |
| Coburn | Hoefel | Mollohan |
| Collins | Hoekstra | Moore |
| Combest | Holden | Moran (KS) |
| Condit | Holt | Moran (VA) |
| Cook | Hooley | Morella |
| Cooksey | Horn | Murtha |
| Costello | Hostettler | Myrick |
| Cox | Houghton | Nadler |
| Coyne | Hoyer | Napolitano |
| Cramer | Hulshof | Neal |
| Crane | Hunter | Ney |
| Crowley | Hutchinson | Northup |
| Cubin | Hyde | Norwood |
| Cummings | Inslee | Nussle |
| Cunningham | Isakson | Oberstar |
| Danner | Istook | Obey |
| Davis (FL) | Jackson (IL) | Olver |
| Davis (IL) | Jackson-Lee | Ortiz |
| Davis (VA) | (TX) | Ose |
| Deal | Jefferson | Owens |
| DeFazio | Jenkins | Oxley |
| DeGette | John | Packard |
| Delahunt | Johnson (CT) | Pallone |
| DeLauro | Johnson, E. B. | Pascrell |
| DeLay | Johnson, Sam | Pastor |
| DeMint | Jones (NC) | Paul |
| Deutsch | Jones (OH) | Payne |
| Diaz-Balart | Kanjorski | Pease |
| Dickey | Kaptur | Pelosi |
| Dicks | Kasich | Peterson (MN) |
| Dingell | Kelly | Peterson (PA) |
| Dixon | Kennedy | Petri |
| Doggett | Kildee | Phelps |
| Dooley | Kilpatrick | Pickering |
| Doolittle | Kind (WI) | Pickett |
| Doyle | King (NY) | Pitts |
| Dreier | Kingston | Pombo |
| Duncan | Klecza | Pomeroy |
| Dunn | Klink | Porter |
| Edwards | Knollenberg | Portman |
| Ehlers | Kolbe | Price (NC) |
| Ehrlich | Kucinich | Pryce (OH) |
| Emerson | Kuykendall | Quinn |
| Engel | LaFalce | Rahall |
| English | LaHood | Ramstad |
| Eshoo | Lampson | Rangel |
| Etheridge | Lantos | Regula |
| Evans | Largent | Reyes |
| Ewing | Larson | Reynolds |
| Farr | Latham | Riley |
| Fattah | LaTourette | Rivers |
| Filner | Lazio | Rodriguez |
| Foley | Leach | Roemer |
| Forbes | Lee | Rogan |
| Ford | Levin | Rogers |
| Fossella | Lewis (CA) | Rohrabacher |
| Fowler | Lewis (GA) | Ros-Lehtinen |
| Franks (NJ) | Lewis (KY) | Rothman |
| Frelinghuysen | Linder | Roukema |
| Frost | Lipinski | Roybal-Allard |
| Gallely | LoBiondo | Royce |
| Ganske | Lofgren | Rush |
| Gedensson | Lowe | Ryan (WI) |
| Gekas | Lucas (KY) | Ryun (KS) |
| Gephardt | Lucas (OK) | Sabo |

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| Salmon | Souder | Turner |
| Sanchez | Spence | Udall (CO) |
| Sanders | Spratt | Udall (NM) |
| Sandlin | Stabenow | Upton |
| Sanford | Stearns | Velazquez |
| Sawyer | Stenholm | Vento |
| Saxton | Strickland | Visclosky |
| Scarborough | Stump | Vitter |
| Schaffer | Stupak | Walden |
| Schakowsky | Sununu | Walsh |
| Scott | Sweeney | Wamp |
| Sensenbrenner | Talent | Waters |
| Sessions | Tancredo | Watkins |
| Shadegg | Tanner | Watt (NC) |
| Shaw | Tauscher | Watts (OK) |
| Shays | Tauzin | Waxman |
| Sherman | Taylor (MS) | Weiner |
| Sherwood | Taylor (NC) | Weldon (FL) |
| Shimkus | Terry | Weldon (PA) |
| Shows | Thomas | Weller |
| Simpson | Thompson (CA) | Weygand |
| Sisisky | Thompson (MS) | Whitfield |
| Skeen | Thornberry | Wicker |
| Skelton | Thune | Wise |
| Slaughter | Thurman | Wolf |
| Smith (MI) | Tierney | Woolsey |
| Smith (NJ) | Tiahrt | Wu |
| Smith (TX) | Toomey | Wynn |
| Smith (WA) | Towns | Young (AK) |
| Snyder | Trafficant | Young (FL) |

NAYS—2

Berry Stark

NOT VOTING—15

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| Baker | Everett | Radanovich |
| Brady (TX) | Fletcher | Serrano |
| Callahan | Frank (MA) | Shuster |
| Capps | McIntosh | Wexler |
| Conyers | Nethercutt | Wilson |

□ 1903

Mr. BERRY changed his vote from "yea" to "nay."

So the conference report was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mrs. CAPPS. Mr. Speaker, due to a family illness I was unable to attend votes today. Had I been here I would have made the following votes:

Rollcall No. 598—"no"; 599—"yes"; 600—"yes"; 601—"yes"; 602—"yes"; 603—"no"; 604—"no"; 605—"no"; 606—"no"; 607—"yes"; 608—"no"; 609—"yes"; 610—"yes"; 611—"yes".

PRIVILEGES OF THE HOUSE—RETURNING TO THE SENATE S. 4, SOLDIERS', SAILORS', AIRMEN'S, AND MARINES' BILL OF RIGHTS ACT OF 1999

Mr. WELLER. Mr. Speaker, I rise to a question of the privileges of the House, and I offer a privileged resolution (H. Res. 393) and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 393

Resolved, That the bill of the Senate (S. 4) entitled the "Soldiers', Sailors', Airmen's, and Marines' Bill of Rights Act of 1999", in the opinion of this House, contravenes the first clause of the seventh section of the first article of the Constitution of the United

PUBLIC LAW 106-170—DEC. 17, 1999

TICKET TO WORK AND WORK INCENTIVES
IMPROVEMENT ACT OF 1999

Public Law 106–170
106th Congress

An Act

Dec. 17, 1999
[H.R. 1180]

Ticket to Work
and Work
Incentives
Improvement Act
of 1999.
42 USC 1305
note.

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide such individuals with meaningful opportunities to work, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Ticket to Work and Work Incentives Improvement Act of 1999”.

(b) **TABLE OF CONTENTS.**—The table of contents is as follows:

Sec. 1. Short title; table of contents.

Sec. 2. Findings and purposes.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 111. Work activity standard as a basis for review of an individual’s disabled status.

Sec. 112. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 121. Work incentives outreach program.

Sec. 122. State grants for work incentives assistance to disabled beneficiaries.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 201. Expanding State options under the medicaid program for workers with disabilities.

Sec. 202. Extending medicare coverage for OASDI disability benefit recipients.

Sec. 203. Grants to develop and establish State infrastructures to support working individuals with disabilities.

Sec. 204. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.

Sec. 205. Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Extension of disability insurance program demonstration project authority.

Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics.

Sec. 402. Treatment of prisoners.

- Sec. 403. Revocation by members of the clergy of exemption from social security coverage.
- Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
- Sec. 405. Authorization for State to permit annual wage reports.
- Sec. 406. Assessment on attorneys who receive their fees via the Social Security Administration.
- Sec. 407. Extension of authority of State medicaid fraud control units.
- Sec. 408. Climate database modernization.
- Sec. 409. Special allowance adjustment for student loans.
- Sec. 410. Schedule for payments under SSI state supplementation agreements.
- Sec. 411. Bonus commodities.
- Sec. 412. Simplification of definition of foster child under EIC.
- Sec. 413. Delay of effective date of organ procurement and transplantation network final rule.

TITLE V—TAX RELIEF EXTENSION ACT OF 1999

- Sec. 500. Short title of title.

Subtitle A—Extensions

- Sec. 501. Allowance of nonrefundable personal credits against regular and minimum tax liability.
- Sec. 502. Research credit.
- Sec. 503. Subpart F exemption for active financing income.
- Sec. 504. Taxable income limit on percentage depletion for marginal production.
- Sec. 505. Work opportunity credit and welfare-to-work credit.
- Sec. 506. Employer-provided educational assistance.
- Sec. 507. Extension and modification of credit for producing electricity from certain renewable resources.
- Sec. 508. Extension of duty-free treatment under Generalized System of Preferences.
- Sec. 509. Extension of credit for holders of qualified zone academy bonds.
- Sec. 510. Extension of first-time homebuyer credit for District of Columbia.
- Sec. 511. Extension of expensing of environmental remediation costs.
- Sec. 512. Temporary increase in amount of rum excise tax covered over to Puerto Rico and Virgin Islands.

Subtitle B—Other Time-Sensitive Provisions

- Sec. 521. Advance pricing agreements treated as confidential taxpayer information.
- Sec. 522. Authority to postpone certain tax-related deadlines by reason of Y2K failures.
- Sec. 523. Inclusion of certain vaccines against streptococcus pneumoniae to list of taxable vaccines.
- Sec. 524. Delay in effective date of requirement for approved diesel or kerosene terminals.
- Sec. 525. Production flexibility contract payments.

Subtitle C—Revenue Offsets

PART I—GENERAL PROVISIONS

- Sec. 531. Modification of estimated tax safe harbor.
- Sec. 532. Clarification of tax treatment of income and loss on derivatives.
- Sec. 533. Expansion of reporting of cancellation of indebtedness income.
- Sec. 534. Limitation on conversion of character of income from constructive ownership transactions.
- Sec. 535. Treatment of excess pension assets used for retiree health benefits.
- Sec. 536. Modification of installment method and repeal of installment method for accrual method taxpayers.
- Sec. 537. Denial of charitable contribution deduction for transfers associated with split-dollar insurance arrangements.
- Sec. 538. Distributions by a partnership to a corporate partner of stock in another corporation.

PART II—PROVISIONS RELATING TO REAL ESTATE INVESTMENT TRUSTS

SUBPART A—TREATMENT OF INCOME AND SERVICES PROVIDED BY TAXABLE REIT
SUBSIDIARIES

- Sec. 541. Modifications to asset diversification test.
- Sec. 542. Treatment of income and services provided by taxable REIT subsidiaries.
- Sec. 543. Taxable REIT subsidiary.
- Sec. 544. Limitation on earnings stripping.

- Sec. 545. 100 percent tax on improperly allocated amounts.
 Sec. 546. Effective date.
 Sec. 547. Study relating to taxable REIT subsidiaries.

SUBPART B—HEALTH CARE REITS

- Sec. 551. Health care REITs.

SUBPART C—CONFORMITY WITH REGULATED INVESTMENT COMPANY RULES

- Sec. 556. Conformity with regulated investment company rules.

SUBPART D—CLARIFICATION OF EXCEPTION FROM IMPERMISSIBLE TENANT SERVICE INCOME

- Sec. 561. Clarification of exception for independent operators.

SUBPART E—MODIFICATION OF EARNINGS AND PROFITS RULES

- Sec. 566. Modification of earnings and profits rules.

SUBPART F—MODIFICATION OF ESTIMATED TAX RULES

- Sec. 571. Modification of estimated tax rules for closely held real estate investment trusts.

42 USC 1320b-19 note.

SEC. 2. FINDINGS AND PURPOSES.

(a) **FINDINGS.**—The Congress makes the following findings:

(1) It is the policy of the United States to provide assistance to individuals with disabilities to lead productive work lives.

(2) Health care is important to all Americans.

(3) Health care is particularly important to individuals with disabilities and special health care needs who often cannot afford the insurance available to them through the private market, are uninsurable by the plans available in the private sector, and are at great risk of incurring very high and economically devastating health care costs.

(4) Americans with significant disabilities often are unable to obtain health care insurance that provides coverage of the services and supports that enable them to live independently and enter or rejoin the workforce. Personal assistance services (such as attendant services, personal assistance with transportation to and from work, reader services, job coaches, and related assistance) remove many of the barriers between significant disability and work. Coverage for such services, as well as for prescription drugs, durable medical equipment, and basic health care are powerful and proven tools for individuals with significant disabilities to obtain and retain employment.

(5) For individuals with disabilities, the fear of losing health care and related services is one of the greatest barriers keeping the individuals from maximizing their employment, earning potential, and independence.

(6) Social Security Disability Insurance and Supplemental Security Income beneficiaries risk losing medicare or medicaid coverage that is linked to their cash benefits, a risk that is an equal, or greater, work disincentive than the loss of cash benefits associated with working.

(7) Individuals with disabilities have greater opportunities for employment than ever before, aided by important public policy initiatives such as the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.), advancements in public understanding of disability, and innovations in assistive technology, medical treatment, and rehabilitation.

(8) Despite such historic opportunities and the desire of millions of disability recipients to work and support themselves, fewer than one-half of one percent of Social Security Disability

Insurance and Supplemental Security Income beneficiaries leave the disability rolls and return to work.

(9) In addition to the fear of loss of health care coverage, beneficiaries cite financial disincentives to work and earn income and lack of adequate employment training and placement services as barriers to employment.

(10) Eliminating such barriers to work by creating financial incentives to work and by providing individuals with disabilities real choice in obtaining the services and technology they need to find, enter, and maintain employment can greatly improve their short and long-term financial independence and personal well-being.

(11) In addition to the enormous advantages such changes promise for individuals with disabilities, redesigning government programs to help individuals with disabilities return to work may result in significant savings and extend the life of the Social Security Disability Insurance Trust Fund.

(12) If only an additional one-half of one percent of the current Social Security Disability Insurance and Supplemental Security Income recipients were to cease receiving benefits as a result of employment, the savings to the Social Security Trust Funds and to the Treasury in cash assistance would total \$3,500,000,000 over the worklife of such individuals, far exceeding the cost of providing incentives and services needed to assist them in entering work and achieving financial independence to the best of their abilities.

(b) PURPOSES.—The purposes of this Act are as follows:

(1) To provide health care and employment preparation and placement services to individuals with disabilities that will enable those individuals to reduce their dependency on cash benefit programs.

(2) To encourage States to adopt the option of allowing individuals with disabilities to purchase medicaid coverage that is necessary to enable such individuals to maintain employment.

(3) To provide individuals with disabilities the option of maintaining medicare coverage while working.

(4) To establish a return to work ticket program that will allow individuals with disabilities to seek the services necessary to obtain and retain employment and reduce their dependency on cash benefit programs.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) IN GENERAL.—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding at the end the following new section:

“THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

Establishment.
42 USC 1320b-
19.

“SEC. 1148. (a) IN GENERAL.—The Commissioner shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary’s choice and which is willing to provide such services to such beneficiary.

“(b) TICKET SYSTEM.—

“(1) DISTRIBUTION OF TICKETS.—The Commissioner may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

“(2) ASSIGNMENT OF TICKETS.—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary’s choice which is serving under the Program and is willing to accept the assignment.

“(3) TICKET TERMS.—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner’s agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the employment network may provide to the beneficiary.

“(4) PAYMENTS TO EMPLOYMENT NETWORKS.—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

“(c) STATE PARTICIPATION.—

“(1) IN GENERAL.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.) may elect to participate in the Program as an employment network with respect to a disabled beneficiary. If the State agency does elect to participate in the Program, the State agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system in accordance with subsection (h)(1). With respect to a disabled beneficiary that the State agency does not elect to have participate in the Program, the State agency shall be paid for services provided to that beneficiary under the system for payment applicable under section 222(d) and subsections (d) and (e) of section 1615. The Commissioner shall provide for periodic opportunities for exercising such elections.

“(2) EFFECT OF PARTICIPATION BY STATE AGENCY.—

“(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under that paragraph to participate in the Program, the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets

to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973 (29 U.S.C. 720 et seq.).

“(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

“(3) AGREEMENTS BETWEEN STATE AGENCIES AND EMPLOYMENT NETWORKS.—State agencies and employment networks shall enter into agreements regarding the conditions under which services will be provided when an individual is referred by an employment network to a State agency for services. The Commissioner shall establish by regulations the timeframe within which such agreements must be entered into and the mechanisms for dispute resolution between State agencies and employment networks with respect to such agreements.

“(d) RESPONSIBILITIES OF THE COMMISSIONER.—

“(1) SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.—The Commissioner shall enter into agreements with 1 or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

“(2) TENURE, RENEWAL, AND EARLY TERMINATION.—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include—

“(A) measures for ease of access by beneficiaries to services; and

“(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement; and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) SELECTION OF EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks

shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(B) ALTERNATE PARTICIPANTS.—In any State where the Program is being implemented, the Commissioner shall enter into an agreement with any alternate participant that is operating under the authority of section 222(d)(2) in the State as of the date of the enactment of this section and chooses to serve as an employment network under the Program.

“(5) TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) QUALITY ASSURANCE.—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall solicit and consider the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure that the periodic surveys of beneficiaries receiving services under the Program are designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks without being deemed to have rejected services under the Program. When such a change occurs, the program manager shall reassign the ticket based on the choice of the beneficiary. Upon the request of the employment network, the program manager shall make a determination of the allocation of the outcome or milestone-outcome payments based on the services provided by each employment network. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible formats.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager’s agreement, including rural areas.

“(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Services provided under the Program may include case management, work incentives planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are available in each service area.

“(f) EMPLOYMENT NETWORKS.—

“(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, that assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b).

“(B) ONE-STOP DELIVERY SYSTEMS.—An employment network serving under the Program may consist of a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998 (29 U.S.C. 2811 et seq.).

“(C) COMPLIANCE WITH SELECTION CRITERIA.—No employment network may serve under the Program unless it meets and maintains compliance with both general selection criteria (such as professional and educational qualifications, where applicable) and specific selection criteria (such as substantial expertise and experience in providing relevant employment services and supports).

“(D) SINGLE OR ASSOCIATED PROVIDERS ALLOWED.—An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

“(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

“(A) serve prescribed service areas; and

“(B) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) REQUIREMENTS.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subparagraph (C);

“(B) develop and implement each such individual work plan, in partnership with each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal;

“(C) ensure that each individual work plan includes at least—

“(i) a statement of the vocational goal developed with the beneficiary, including, as appropriate, goals for earnings and job advancement;

“(ii) a statement of the services and supports that have been deemed necessary for the beneficiary to accomplish that goal;

“(iii) a statement of any terms and conditions related to the provision of such services and supports; and

“(iv) a statement of understanding regarding the beneficiary’s rights under the Program (such as the right to retrieve the ticket to work and self-sufficiency if the beneficiary is dissatisfied with the services being provided by the employment network) and remedies available to the individual, including information on the availability of advocacy services and assistance in resolving disputes through the State grant program authorized under section 1150;

“(D) provide a beneficiary the opportunity to amend the individual work plan if a change in circumstances necessitates a change in the plan; and

“(E) make each beneficiary’s individual work plan available to the beneficiary in, as appropriate, an accessible format chosen by the beneficiary.

“(2) EFFECTIVE UPON WRITTEN APPROVAL.—A beneficiary’s individual work plan shall take effect upon written approval by the beneficiary or a representative of the beneficiary and a representative of the employment network that, in providing such written approval, acknowledges assignment of the beneficiary’s ticket to work and self-sufficiency.

“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

“(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

“(B) NO CHANGE IN METHOD OF PAYMENT FOR BENEFICIARIES WITH TICKETS ALREADY ASSIGNED TO THE EMPLOYMENT NETWORKS.—Any election of a payment system by an employment network that would result in a change in the method of payment to the employment network for services provided to a beneficiary who is receiving services from the employment network at the time of the election shall not be effective with respect to payment for services provided to that beneficiary and the method of payment previously selected shall continue to apply with respect to such services.

“(2) OUTCOME PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual’s outcome payment period, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual because of work or earnings.

“(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

“(i) the payment for each month during the outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs; and

“(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

“(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.—The outcome-milestone payment system shall provide for 1 or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, that are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure that provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

“(C) LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

“(4) DEFINITIONS.—In this subsection:

“(A) PAYMENT CALCULATION BASE.—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable

under section 223 for all beneficiaries for months during the preceding calendar year; and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained 18 years of age but have not attained 65 years of age.

“(B) OUTCOME PAYMENT PERIOD.—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity; and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNTS OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration

would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, or other reliable sources.

Deadline.

“(C) REPORT ON THE ADEQUACY OF INCENTIVES.—The Commissioner shall submit to the Congress not later than 36 months after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999 a report with recommendations for a method or methods to adjust payment rates under subparagraphs (A) and (B), that would ensure adequate incentives for the provision of services by employment networks of—

“(i) individuals with a need for ongoing support and services;

“(ii) individuals with a need for high-cost accommodations;

“(iii) individuals who earn a subminimum wage; and

“(iv) individuals who work and receive partial cash benefits.

The Commissioner shall consult with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 during the development and evaluation of the study. The Commissioner shall implement the necessary adjusted payment rates prior to full implementation of the Ticket to Work and Self-Sufficiency Program.

“(i) SUSPENSION OF DISABILITY REVIEWS.—During any period for which an individual is using, as defined by the Commissioner, a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) AUTHORIZATIONS.—

“(1) PAYMENTS TO EMPLOYMENT NETWORKS.—

“(A) TITLE II DISABILITY BENEFICIARIES.—There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums as may be necessary to make payments to employment networks under this section. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund.

“(B) TITLE XVI DISABILITY BENEFICIARIES.—Amounts authorized to be appropriated to the Social Security

Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

“(2) ADMINISTRATIVE EXPENSES.—The costs of administering this section (other than payments to employment networks) shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among such amounts as appropriate.

“(k) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(3) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(4) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

“(5) SUPPLEMENTAL SECURITY INCOME BENEFIT.—The term ‘supplemental security income benefit under title XVI’ means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

“(l) REGULATIONS.—Not later than 1 year after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999, the Commissioner shall prescribe such regulations as are necessary to carry out the provisions of this section.”. Deadline.

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(i) of the Social Security Act (42 U.S.C. 421(i)) is amended by adding at the end the following new paragraph:

“(5) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”.

(B) Section 222(a) of such Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of such Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of such Act (42 U.S.C. 425(b)(1)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section

1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of such Act (42 U.S.C. 1382d(a)) is amended to read as follows:

“SEC. 1615. (a) In the case of any blind or disabled individual who—

“(1) has not attained age 16; and

“(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.”.

(B) Section 1615(c) of such Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of such Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(D) Section 1633(c) of such Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting “(1)” after “(c)”; and

(ii) by adding at the end the following new paragraph:

“(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”.

42 USC 1320b-19 note.

(c) EFFECTIVE DATE.—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following 1 year after the date of the enactment of this Act.

42 USC 1320b-19 note.
Deadline.

(d) GRADUATED IMPLEMENTATION OF PROGRAM.—

(1) IN GENERAL.—Not later than 1 year after the date of the enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) REQUIREMENTS.—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) FULL IMPLEMENTATION.—The Commissioner shall ensure that ability to provide tickets and services to individuals under the Program exists in every State as soon as practicable on or after the effective date specified in subsection (c) but not later than 3 years after such date.

(4) ONGOING EVALUATION OF PROGRAM.—

(A) IN GENERAL.—The Commissioner shall provide for independent evaluations to assess the effectiveness of the activities carried out under this section and the amendments made thereby. Such evaluations shall address the cost-effectiveness of such activities, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) CONSULTATION.—Evaluations shall be conducted under this paragraph after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program and in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of this Act, the Comptroller General of the United States, other agencies of the Federal Government, and private organizations with appropriate expertise.

(C) METHODOLOGY.—

(i) IMPLEMENTATION.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of this Act, shall ensure that plans for evaluations and data collection methods under the Program are appropriately designed to obtain detailed employment information.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to)—

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving

tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of individuals in possession of tickets under the Program who are not accepted for services and, to the extent reasonably determinable, the reasons for which such beneficiaries were not accepted for services;

(VII) the characteristics of providers whose services are provided within an employment network under the Program;

(VIII) the extent (if any) to which employment networks display a greater willingness to provide services to beneficiaries with a range of disabilities;

(IX) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome payment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(X) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(XI) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(D) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) of the Social Security Act (42 U.S.C. 422(a)) for prompt referrals to a State agency; and

(ii) the authority of the Commissioner under section 222(d)(2) of such Act (42 U.S.C. 422(d)(2)) to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals, shall apply in such State.

(B) EXISTING AGREEMENTS.—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act (42 U.S.C. 422(d)(2)) before the date of the enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to services (if any) to be provided after 3 years after the effective date provided in subsection (c).

(e) SPECIFIC REGULATIONS REQUIRED.—

(1) IN GENERAL.—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.—The matters which shall be addressed in such regulations shall include—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1148(b)(1) of the Social Security Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program pursuant to section 1148(c)(1) of such Act and provision for periodic opportunities for exercising such elections;

(D) the status of State agencies under section 1148(c)(1) of such Act at the time that State agencies exercise elections under that section;

(E) the terms of agreements to be entered into with program managers pursuant to section 1148(d) of such Act, including—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1148(d)(3) of such Act;

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1148(d) of such Act and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1148(e) of such Act; and

(iii) the format under which dispute resolution will operate under section 1148(d)(7) of such Act;

(F) the terms of agreements to be entered into with employment networks pursuant to section 1148(d)(4) of such Act, including—

(i) the manner in which service areas are specified pursuant to section 1148(f)(2)(A) of such Act;

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1148(f)(1)(C) of such Act in selecting service providers;

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1148(f)(3) of such Act; and

42 USC 1320b-19 note.

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1148(f)(4) of such Act;

(G) standards which must be met by individual work plans pursuant to section 1148(g) of such Act;

(H) standards which must be met by payment systems required under section 1148(h) of such Act, including—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1148(h)(1)(A) of such Act;

(ii) the terms which must be met by an outcome payment system under section 1148(h)(2) of such Act;

(iii) the terms which must be met by an outcome-milestone payment system under section 1148(h)(3) of such Act;

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1148(h) of such Act or the period of time specified in paragraph (4)(B) of such section 1148(h) of such Act; and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

42 USC 1320b-19 note.

(f) THE TICKET TO WORK AND WORK INCENTIVES ADVISORY PANEL.—

(1) ESTABLISHMENT.—There is established within the Social Security Administration a panel to be known as the “Ticket to Work and Work Incentives Advisory Panel” (in this subsection referred to as the “Panel”).

(2) DUTIES OF PANEL.—It shall be the duty of the Panel to—

(A) advise the President, the Congress, and the Commissioner of Social Security on issues related to work incentives programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act (42 U.S.C. 401 et seq., 1301 et seq., 1381 et seq., 1395 et seq., 1396 et seq.); and

(B) with respect to the Ticket to Work and Self-Sufficiency Program established under section 1148 of such Act—

(i) advise the Commissioner of Social Security with respect to establishing phase-in sites for such Program and fully implementing the Program thereafter, the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems, and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program;

(ii) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to section 302 of this Act;

(iii) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1148(d)(6) of the Social Security Act; and

(iv) furnish progress reports on the Program to the Commissioner and each House of Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 12 members as follows:

(i) four members appointed by the President, not more than two of whom may be of the same political party;

(ii) two members appointed by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means of the House of Representatives;

(iii) two members appointed by the minority leader of the House of Representatives, in consultation with the ranking member of the Committee on Ways and Means of the House of Representatives;

(iv) two members appointed by the majority leader of the Senate, in consultation with the Chairman of the Committee on Finance of the Senate; and

(v) two members appointed by the minority leader of the Senate, in consultation with the ranking member of the Committee on Finance of the Senate.

(B) REPRESENTATION.—

(i) IN GENERAL.—The members appointed under subparagraph (A) shall have experience or expert knowledge as a recipient, provider, employer, or employee in the fields of, or related to, employment services, vocational rehabilitation services, and other support services.

(ii) REQUIREMENT.—At least one-half of the members appointed under subparagraph (A) shall be individuals with disabilities, or representatives of individuals with disabilities, with consideration given to current or former title II disability beneficiaries or title XVI disability beneficiaries (as such terms are defined in section 1148(k) of the Social Security Act (as added by subsection (a))).

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of the enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—Of the members first appointed under each clause of subparagraph (A), as designated by the appointing authority for each such clause—

(I) one-half of such members shall be appointed for a term of 2 years; and

(II) the remaining members shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Panel shall be filled in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—Eight members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Chairperson, and paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(B) STAFF.—Subject to rules prescribed by the Commissioner of Social Security, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Commissioner of Social Security, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this Act.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places, and take such testimony and evidence as the Panel considers appropriate.

(B) POWERS OF MEMBERS AND AGENTS.—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this section.

(C) MAILS.—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(6) REPORTS.—

(A) INTERIM REPORTS.—The Panel shall submit to the President and the Congress interim reports at least annually.

(B) FINAL REPORT.—The Panel shall transmit a final report to the President and the Congress not later than eight years after the date of the enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislation and administrative actions which the Panel considers appropriate.

(7) TERMINATION.—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated from the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the general fund of the Treasury, as appropriate, such sums as are necessary to carry out this subsection.

Subtitle B—Elimination of Work Disincentives

SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN INDIVIDUAL'S DISABLED STATUS.

(a) IN GENERAL.—Section 221 of the Social Security Act (42 U.S.C. 421) is amended by adding at the end the following new subsection:

“(m)(1) In any case where an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual's disability (as defined in section 223(d)) has received such benefits for at least 24 months—

“(A) no continuing disability review conducted by the Commissioner may be scheduled for the individual solely as a result of the individual's work activity;

“(B) no work activity engaged in by the individual may be used as evidence that the individual is no longer disabled; and

“(C) no cessation of work activity by the individual may give rise to a presumption that the individual is unable to engage in work.

“(2) An individual to which paragraph (1) applies shall continue to be subject to—

“(A) continuing disability reviews on a regularly scheduled basis that is not triggered by work; and

“(B) termination of benefits under this title in the event that the individual has earnings that exceed the level of earnings established by the Commissioner to represent substantial gainful activity.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on January 1, 2002. 42 USC 421 note.

SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS.

(a) OASDI BENEFITS.—Section 223 of the Social Security Act (42 U.S.C. 423) is amended—

- (1) by redesignating subsection (i) as subsection (j); and
- (2) by inserting after subsection (h) the following new subsection:

“Reinstatement of Entitlement

“(i)(1)(A) Entitlement to benefits described in subparagraph (B)(i)(I) shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of such entitlement shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was entitled to benefits under this section or section 202 on the basis of disability pursuant to an application filed therefor; and

“(II) such entitlement terminated due to the performance of substantial gainful activity;

“(ii) the individual is under a disability and the physical or mental impairment that is the basis for the finding of disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of disability that gave rise to the entitlement described in clause (i); and

“(iii) the individual’s disability renders the individual unable to perform substantial gainful activity.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was entitled to a benefit described in subparagraph (B)(i)(I) prior to the entitlement termination described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) and (iii) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not entitled to reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of subsection (f) shall apply.

“(4)(A)(i) Subject to clause (ii), entitlement to benefits reinstated under this subsection shall commence with the benefit payable for the month in which a request for reinstatement is filed.

“(ii) An individual whose entitlement to a benefit for any month would have been reinstated under this subsection had the individual filed a request for reinstatement before the end of such month

shall be entitled to such benefit for such month if such request for reinstatement is filed before the end of the twelfth month immediately succeeding such month.

“(B)(i) Subject to clauses (ii) and (iii), the amount of the benefit payable for any month pursuant to the reinstatement of entitlement under this subsection shall be determined in accordance with the provisions of this title.

“(ii) For purposes of computing the primary insurance amount of an individual whose entitlement to benefits under this section is reinstated under this subsection, the date of onset of the individual’s disability shall be the date of onset used in determining the individual’s most recent period of disability arising in connection with such benefits payable on the basis of an application.

“(iii) Benefits under this section or section 202 payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) No benefit shall be payable pursuant to an entitlement reinstated under this subsection to an individual for any month in which the individual engages in substantial gainful activity.

“(D) The entitlement of any individual that is reinstated under this subsection shall end with the benefits payable for the month preceding whichever of the following months is the earliest:

“(i) The month in which the individual dies.

“(ii) The month in which the individual attains retirement age.

“(iii) The third month following the month in which the individual’s disability ceases.

“(5) Whenever an individual’s entitlement to benefits under this section is reinstated under this subsection, entitlement to benefits payable on the basis of such individual’s wages and self-employment income may be reinstated with respect to any person previously entitled to such benefits on the basis of an application if the Commissioner determines that such person satisfies all the requirements for entitlement to such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated entitlement of any such person to the same extent that they apply to the reinstated entitlement of such individual.

“(6) An individual to whom benefits are payable under this section or section 202 pursuant to a reinstatement of entitlement under this subsection for 24 months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) and the determination, if appropriate, of the termination month in accordance with subsection (a)(1) of this section, or subsection (d)(1), (e)(1), or (f)(1) of section 202, to be entitled to such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be entitled to provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner

shall be final and not subject to review under subsection (b) or (g) of section 205.

“(B) The amount of a provisional benefit for a month shall equal the amount of the last monthly benefit payable to the individual under this title on the basis of an application increased by an amount equal to the amount, if any, by which such last monthly benefit would have been increased as a result of the operation of section 215(i).

“(C)(i) Provisional benefits shall begin with the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s entitlement to reinstated benefits;

“(II) the fifth month following the month described in clause (i);

“(III) the month in which the individual performs substantial gainful activity; or

“(IV) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not entitled to reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).”.

(b) SSI BENEFITS.—

(1) IN GENERAL.—Section 1631 of the Social Security Act (42 U.S.C. 1383) is amended by adding at the end the following new subsection:

“Reinstatement of Eligibility on the Basis of Blindness or Disability

“(p)(1)(A) Eligibility for benefits under this title shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of eligibility shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was eligible for benefits under this title on the basis of blindness or disability pursuant to an application filed therefor; and

“(II) the individual thereafter was ineligible for such benefits due to earned income (or earned and unearned income) for a period of 12 or more consecutive months;

“(ii) the individual is blind or disabled and the physical or mental impairment that is the basis for the finding of blindness or disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of blindness or disability that gave rise to the eligibility described in clause (i);

“(iii) the individual’s blindness or disability renders the individual unable to perform substantial gainful activity; and

“(iv) the individual satisfies the nonmedical requirements for eligibility for benefits under this title.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was eligible for a benefit under this title (including section 1619) prior to the period of ineligibility described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) through (iv) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not eligible for reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of section 1614(a)(4) shall apply.

“(4)(A) Eligibility for benefits reinstated under this subsection shall commence with the benefit payable for the month following the month in which a request for reinstatement is filed.

“(B)(i) Subject to clause (ii), the amount of the benefit payable for any month pursuant to the reinstatement of eligibility under this subsection shall be determined in accordance with the provisions of this title.

“(ii) The benefit under this title payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) Except as otherwise provided in this subsection, eligibility for benefits under this title reinstated pursuant to a request filed under paragraph (2) shall be subject to the same terms and conditions as eligibility established pursuant to an application filed therefor.

“(5) Whenever an individual’s eligibility for benefits under this title is reinstated under this subsection, eligibility for such benefits shall be reinstated with respect to the individual’s spouse if such spouse was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements for eligibility for such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated eligibility of the spouse to the same extent that they apply to the reinstated eligibility of such individual.

“(6) An individual to whom benefits are payable under this title pursuant to a reinstatement of eligibility under this subsection for twenty-four months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be

deemed for purposes of paragraph (1)(B)(i)(I) to be eligible for such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be eligible for provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under paragraph (1) or (3) of subsection (c).

“(B)(i) Except as otherwise provided in clause (ii), the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual under this title with the same kind and amount of income.

“(ii) If the individual has a spouse who was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements of section 1614(b) except requirements related to the filing of an application, the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual and eligible spouse under this title with the same kind and amount of income.

“(C)(i) Provisional benefits shall begin with the month following the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s eligibility for reinstated benefits;

“(II) the fifth month following the month for which provisional benefits are first payable under clause (i); or

“(III) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not eligible for reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).

“(8) For purposes of this subsection other than paragraph (7), the term ‘benefits under this title’ includes State supplementary payments made pursuant to an agreement under section 1616(a) of this Act or section 212(b) of Public Law 93-66.”.

(2) CONFORMING AMENDMENTS.—

(A) Section 1631(j)(1) of such Act (42 U.S.C. 1383(j)(1)) is amended by striking the period and inserting “, or has filed a request for reinstatement of eligibility under subsection (p)(2) and been determined to be eligible for reinstatement.”.

(B) Section 1631(j)(2)(A)(i)(I) of such Act (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by inserting “(other than pursuant to a request for reinstatement under subsection (p))” after “eligible”.

(c) EFFECTIVE DATE.—

(1) **IN GENERAL.**—The amendments made by this section shall take effect on the first day of the thirteenth month beginning after the date of the enactment of this Act.

(2) **LIMITATION.**—No benefit shall be payable under title II or XVI on the basis of a request for reinstatement filed under section 223(i) or 1631(p) of the Social Security Act (42 U.S.C. 423(i), 1383(p)) before the effective date described in paragraph (1).

Subtitle C—Work Incentives Planning, Assistance, and Outreach

SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 101 of this Act, is amended by adding after section 1148 the following new section:

“WORK INCENTIVES OUTREACH PROGRAM

“SEC. 1149. (a) **ESTABLISHMENT.**—

“(1) **IN GENERAL.**—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, shall establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

“(2) **GRANTS, COOPERATIVE AGREEMENTS, CONTRACTS, AND OUTREACH.**—Under the program established under this section, the Commissioner shall—

“(A) establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including individuals participating in the Ticket to Work and Self-Sufficiency Program established under section 1148, the program established under section 1619, and other programs that are designed to encourage disabled beneficiaries to work;

“(B) conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and to the families of such beneficiaries) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work, including—

“(i) preparing and disseminating information explaining such programs; and

“(ii) working in cooperation with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling;

“(C) establish a corps of trained, accessible, and responsive work incentives specialists within the Social Security

42 USC 1320b-20.

Administration who will specialize in disability work incentives under titles II and XVI for the purpose of disseminating accurate information with respect to inquiries and issues relating to work incentives to—

“(i) disabled beneficiaries;

“(ii) benefit applicants under titles II and XVI;

and

“(iii) individuals or entities awarded grants under subparagraphs (A) or (B); and

“(D) provide—

“(i) training for work incentives specialists and individuals providing planning assistance described in subparagraph (C); and

“(ii) technical assistance to organizations and entities that are designed to encourage disabled beneficiaries to return to work.

“(3) COORDINATION WITH OTHER PROGRAMS.—The responsibilities of the Commissioner established under this section shall be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries including the program under section 1619, the plans for achieving self-support program (PASS), and any other Federal or State work incentives programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, transition services (as defined in, and provided in accordance with, the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)), a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998 (29 U.S.C. 2811 et seq.), and other services.

“(b) CONDITIONS.—

“(1) SELECTION OF ENTITIES.—

“(A) APPLICATION.—An entity shall submit an application for a grant, cooperative agreement, or contract to provide benefits planning and assistance to the Commissioner at such time, in such manner, and containing such information as the Commissioner may determine is necessary to meet the requirements of this section.

“(B) STATEWIDENESS.—The Commissioner shall ensure that the planning, assistance, and information described in paragraph (2) shall be available on a statewide basis.

“(C) ELIGIBILITY OF STATES AND PRIVATE ORGANIZATIONS.—

“(i) IN GENERAL.—The Commissioner may award a grant, cooperative agreement, or contract under this section to a State or a private agency or organization (other than Social Security Administration Field Offices and the State agency administering the State medicaid program under title XIX, including any agency or entity described in clause (ii), that the Commissioner determines is qualified to provide the planning, assistance, and information described in paragraph (2)).

“(ii) AGENCIES AND ENTITIES DESCRIBED.—The agencies and entities described in this clause are the following:

“(I) Any public or private agency or organization (including Centers for Independent Living established under title VII of the Rehabilitation Act of 1973 (29 U.S.C. 796 et seq.), protection and advocacy organizations, client assistance programs established in accordance with section 112 of the Rehabilitation Act of 1973 (29 U.S.C. 732), and State Developmental Disabilities Councils established in accordance with section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6024)) that the Commissioner determines satisfies the requirements of this section.

“(II) The State agency administering the State program funded under part A of title IV.

“(D) EXCLUSION FOR CONFLICT OF INTEREST.—The Commissioner may not award a grant, cooperative agreement, or contract under this section to any entity that the Commissioner determines would have a conflict of interest if the entity were to receive a grant, cooperative agreement, or contract under this section.

“(2) SERVICES PROVIDED.—A recipient of a grant, cooperative agreement, or contract to provide benefits planning and assistance shall select individuals who will act as planners and provide information, guidance, and planning to disabled beneficiaries on the—

“(A) availability and interrelation of any Federal or State work incentives programs designed to assist disabled beneficiaries that the individual may be eligible to participate in;

“(B) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual; and

“(C) availability of protection and advocacy services for disabled beneficiaries and how to access such services.

“(3) AMOUNT OF GRANTS, COOPERATIVE AGREEMENTS, OR CONTRACTS.—

“(A) BASED ON POPULATION OF DISABLED BENEFICIARIES.—Subject to subparagraph (B), the Commissioner shall award a grant, cooperative agreement, or contract under this section to an entity based on the percentage of the population of the State where the entity is located who are disabled beneficiaries.

“(B) LIMITATIONS.—

“(i) PER GRANT.—No entity shall receive a grant, cooperative agreement, or contract under this section for a fiscal year that is less than \$50,000 or more than \$300,000.

“(ii) TOTAL AMOUNT FOR ALL GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS.—The total amount of all grants, cooperative agreements, and contracts awarded under this section for a fiscal year may not exceed \$23,000,000.

“(4) ALLOCATION OF COSTS.—The costs of carrying out this section shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(c) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(d) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$23,000,000 for each of the fiscal years 2000 through 2004.”

SEC. 122. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 121 of this Act, is amended by adding after section 1149 the following new section:

“STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

42 USC 1320b-21.

“SEC. 1150. (a) IN GENERAL.—Subject to subsection (c), the Commissioner may make payments in each State to the protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.) for the purpose of providing services to disabled beneficiaries.

“(b) SERVICES PROVIDED.—Services provided to disabled beneficiaries pursuant to a payment made under this section may include—

“(1) information and advice about obtaining vocational rehabilitation and employment services; and

“(2) advocacy or other services that a disabled beneficiary may need to secure or regain gainful employment.

“(c) APPLICATION.—In order to receive payments under this section, a protection and advocacy system shall submit an application to the Commissioner, at such time, in such form and manner, and accompanied by such information and assurances as the Commissioner may require.

“(d) AMOUNT OF PAYMENTS.—

“(1) IN GENERAL.—Subject to the amount appropriated for a fiscal year for making payments under this section, a protection and advocacy system shall not be paid an amount that is less than—

“(A) in the case of a protection and advocacy system located in a State (including the District of Columbia and Puerto Rico) other than Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, the greater of—

“(i) \$100,000; or

“(ii) $\frac{1}{3}$ of 1 percent of the amount available for payments under this section; and

“(B) in the case of a protection and advocacy system located in Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, \$50,000.

“(2) INFLATION ADJUSTMENT.—For each fiscal year in which the total amount appropriated to carry out this section exceeds the total amount appropriated to carry out this section in the preceding fiscal year, the Commissioner shall increase each minimum payment under subparagraphs (A) and (B) of paragraph (1) by a percentage equal to the percentage increase in the total amount so appropriated to carry out this section.

“(e) ANNUAL REPORT.—Each protection and advocacy system that receives a payment under this section shall submit an annual report to the Commissioner and the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 on the services provided to individuals by the system.

“(f) FUNDING.—

“(1) ALLOCATION OF PAYMENTS.—Payments under this section shall be made from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(2) CARRYOVER.—Any amounts allotted for payment to a protection and advocacy system under this section for a fiscal year shall remain available for payment to or on behalf of the protection and advocacy system until the end of the succeeding fiscal year.

“(g) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(3) PROTECTION AND ADVOCACY SYSTEM.—The term ‘protection and advocacy system’ means a protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.).

“(h) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated to carry out this section \$7,000,000 for each of the fiscal years 2000 through 2004.”.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

SEC. 201. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES.

(a) IN GENERAL.—

(1) STATE OPTION TO ELIMINATE INCOME, ASSETS, AND RESOURCE LIMITATIONS FOR WORKERS WITH DISABILITIES BUYING INTO MEDICAID.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

(A) in subclause (XIII), by striking “or” at the end;

(B) in subclause (XIV), by adding “or” at the end;

and

(C) by adding at the end the following new subclause:

“(XV) who, but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income, who is at least 16, but less than

65, years of age, and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish;”.

(2) STATE OPTION TO PROVIDE OPPORTUNITY FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY TO BUY INTO MEDICAID.—

(A) ELIGIBILITY.—Section 1902(a)(10) (A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as amended by paragraph (1), is amended—

(i) in subclause (XIV), by striking “or” at the end;

(ii) in subclause (XV), by adding “or” at the end;

and

(iii) by adding at the end the following new subclause:

“(XVI) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XV);”.

(B) DEFINITION OF EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY.—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following new subsection:

“(v)(1) The term ‘employed individual with a medically improved disability’ means an individual who—

“(A) is at least 16, but less than 65, years of age;

“(B) is employed (as defined in paragraph (2));

“(C) ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XV) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and

“(D) continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.

“(2) For purposes of paragraph (1), an individual is considered to be ‘employed’ if the individual—

“(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

“(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.”.

(C) CONFORMING AMENDMENT.—Section 1905(a) of such Act (42 U.S.C. 1396d(a)) is amended in the matter preceding paragraph (1)—

(i) in clause (x), by striking “or” at the end;

(ii) in clause (xi), by adding “or” at the end; and

(iii) by inserting after clause (xi), the following new clause:

“(xii) employed individuals with a medically improved disability (as defined in subsection (v)),”.

(3) STATE AUTHORITY TO IMPOSE INCOME-RELATED PREMIUMS AND COST-SHARING.—Section 1916 of such Act (42 U.S.C. 1396o) is amended—

(A) in subsection (a), by striking “The State plan” and inserting “Subject to subsection (g), the State plan”; and

(B) by adding at the end the following new subsection:
“(g) With respect to individuals provided medical assistance only under subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii)—
“(1) a State may (in a uniform manner for individuals described in either such subclause)—

“(A) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and

“(B) require payment of 100 percent of such premiums for such year in the case of such an individual who has income for a year that exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved, except that in the case of such an individual who has income for a year that does not exceed 450 percent of such poverty line, such requirement may only apply to the extent such premiums do not exceed 7.5 percent of such income; and

“(2) such State shall require payment of 100 percent of such premiums for a year by such an individual whose adjusted gross income (as defined in section 62 of the Internal Revenue Code of 1986) for such year exceeds \$75,000, except that a State may choose to subsidize such premiums by using State funds which may not be federally matched under this title. In the case of any calendar year beginning after 2000, the dollar amount specified in paragraph (2) shall be increased in accordance with the provisions of section 215(i)(2)(A)(ii).”

(4) PROHIBITION AGAINST SUPPLANTATION OF STATE FUNDS AND STATE FAILURE TO MAINTAIN EFFORT.—Section 1903(i) of such Act (42 U.S.C. 1396b(i)) is amended—

(A) by striking the period at the end of paragraph (19) and inserting “; or”; and

(B) by inserting after such paragraph the following new paragraph:

“(20) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended for such programs during the most recent State fiscal year ending before the date of the enactment of this paragraph.”

(b) CONFORMING AMENDMENTS.—Section 1903(f)(4) of the Social Security Act (42 U.S.C. 1396b(f)(4)) is amended in the matter preceding subparagraph (A) by inserting “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI),” before “1905(p)(1).”

(c) GAO REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress regarding the amendments made by this section that examines—

Deadline.
42 USC 1396a
note.

(1) the extent to which higher health care costs for individuals with disabilities at higher income levels deter employment or progress in employment;

(2) whether such individuals have health insurance coverage or could benefit from the State option established under such amendments to provide a medicaid buy-in; and

(3) how the States are exercising such option, including—

(A) how such States are exercising the flexibility afforded them with regard to income disregards;

(B) what income and premium levels have been set;

(C) the degree to which States are subsidizing premiums above the dollar amount specified in section 1916(g)(2) of the Social Security Act (42 U.S.C. 1396o(g)(2)); and

(D) the extent to which there exists any crowd-out effect.

42 USC 1396a
note.

(d) **EFFECTIVE DATE.**—The amendments made by this section apply to medical assistance for items and services furnished on or after October 1, 2000.

SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS.

(a) **IN GENERAL.**—The next to last sentence of section 226(b) of the Social Security Act (42 U.S.C. 426) is amended by striking “24” and inserting “78”.

42 USC 426 note.

(b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall be effective on and after October 1, 2000.

42 USC 426 note.

(c) **GAO REPORT.**—Not later than 5 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress that—

(1) examines the effectiveness and cost of the amendment made by subsection (a);

(2) examines the necessity and effectiveness of providing continuation of medicare coverage under section 226(b) of the Social Security Act (42 U.S.C. 426(b)) to individuals whose annual income exceeds the contribution and benefit base (as determined under section 230 of such Act (42 U.S.C. 430));

(3) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a sliding scale premium for individuals whose annual income exceeds such contribution and benefit base;

(4) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a premium buy-in by the beneficiary’s employer in lieu of coverage under private health insurance;

(5) examines the interrelation between the use of the continuation of medicare coverage under such section 226(b) and the use of private health insurance coverage by individuals during the extended period; and

(6) recommends such legislative or administrative changes relating to the continuation of medicare coverage for recipients of social security disability benefits as the Comptroller General determines are appropriate.

42 USC 1320b-
22.

SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES.

(a) **ESTABLISHMENT.**—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall award grants described in subsection (b) to States to support the design, establishment, and operation of State infrastructures that provide items and services to support working individuals with disabilities.

(2) APPLICATION.—In order to be eligible for an award of a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary shall require.

(3) DEFINITION OF STATE.—In this section, the term “State” means each of the 50 States, the District of Columbia, Puerto Rico, Guam, the United States Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) GRANTS FOR INFRASTRUCTURE AND OUTREACH.—

(1) IN GENERAL.—Out of the funds appropriated under subsection (e), the Secretary shall award grants to States to—

(A) support the establishment, implementation, and operation of the State infrastructures described in subsection (a); and

(B) conduct outreach campaigns regarding the existence of such infrastructures.

(2) ELIGIBILITY FOR GRANTS.—

(A) IN GENERAL.—No State may receive a grant under this subsection unless the State demonstrates to the satisfaction of the Secretary that the State makes personal assistance services available under the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to the extent necessary to enable individuals with disabilities to remain employed, including individuals described in section 1902(a)(10)(A)(ii)(XIII) of such Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) if the State has elected to provide medical assistance under such plan to such individuals.

(B) DEFINITIONS.—In this section:

(i) EMPLOYED.—The term “employed” means—

(I) earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

(II) being engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined and approved by the Secretary.

(ii) PERSONAL ASSISTANCE SERVICES.—The term “personal assistance services” means a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability. Such services shall be designed to increase the individual’s control in life and ability to perform everyday activities on or off the job.

(3) DETERMINATION OF AWARDS.—

(A) IN GENERAL.—Subject to subparagraph (B), the Secretary shall develop a methodology for awarding grants

to States under this section for a fiscal year in a manner that—

(i) rewards States for their efforts in encouraging individuals described in paragraph (2)(A) to be employed; and

(ii) does not provide a State that has not elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) with proportionally more funds for a fiscal year than a State that has exercised such election.

(B) AWARD LIMITS.—

(i) MINIMUM AWARDS.—

(I) IN GENERAL.—Subject to subclause (II), no State with an approved application under this section shall receive a grant for a fiscal year that is less than \$500,000.

(II) PRO RATA REDUCTIONS.—If the funds appropriated under subsection (e) for a fiscal year are not sufficient to pay each State with an application approved under this section the minimum amount described in subclause (I), the Secretary shall pay each such State an amount equal to the pro rata share of the amount made available.

(ii) MAXIMUM AWARDS.—

(I) STATES THAT ELECTED OPTIONAL MEDICAID ELIGIBILITY.—No State that has an application that has been approved under this section and that has elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of such Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)) shall receive a grant for a fiscal year that exceeds 10 percent of the total expenditures by the State (including the reimbursed Federal share of such expenditures) for medical assistance provided under such title for such individuals, as estimated by the State and approved by the Secretary.

(II) OTHER STATES.—The Secretary shall determine, consistent with the limit described in subclause (I), a maximum award limit for a grant for a fiscal year for a State that has an application that has been approved under this section but that has not elected to provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)).

(c) AVAILABILITY OF FUNDS.—

(1) FUNDS AWARDED TO STATES.—Funds awarded to a State under a grant made under this section for a fiscal year shall remain available until expended.

(2) FUNDS NOT AWARDED TO STATES.—Funds not awarded to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for awarding by the Secretary.

(d) ANNUAL REPORT.—A State that is awarded a grant under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include the percentage increase in the number of title II disability beneficiaries, as defined in section 1148(k)(3) of the Social Security Act (as added by section 101(a) of this Act) in the State, and title XVI disability beneficiaries, as defined in section 1148(k)(4) of the Social Security Act (as so added) in the State who return to work.

(e) APPROPRIATION.—

(1) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to make grants under this section—

(A) for fiscal year 2001, \$20,000,000;

(B) for fiscal year 2002, \$25,000,000;

(C) for fiscal year 2003, \$30,000,000;

(D) for fiscal year 2004, \$35,000,000;

(E) for fiscal year 2005, \$40,000,000; and

(F) for each of fiscal years 2006 through 2011, the amount appropriated for the preceding fiscal year increased by the percentage increase (if any) in the Consumer Price Index for All Urban Consumers (United States city average) for the preceding fiscal year.

(2) BUDGET AUTHORITY.—This subsection constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under paragraph (1).

(f) RECOMMENDATION.—Not later than October 1, 2010, the Secretary, in consultation with the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of this Act, shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the grant program established under this section should be continued after fiscal year 2011.

Deadline.

SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES.

42 USC 1396a note.

(a) STATE APPLICATION.—A State may apply to the Secretary of Health and Human Services (in this section referred to as the “Secretary”) for approval of a demonstration project (in this section referred to as a “demonstration project”) under which up to a specified maximum number of individuals who are workers with a potentially severe disability (as defined in subsection (b)(1)) are provided medical assistance equal to—

(1) that provided under section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)) to individuals described in section 1902(a)(10)(A)(ii)(XIII) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XIII)); or

(2) in the case of a State that has not elected to provide medical assistance under that section to such individuals, such medical assistance as the Secretary determines is an appropriate equivalent to the medical assistance described in paragraph (1).

(b) WORKER WITH A POTENTIALLY SEVERE DISABILITY DEFINED.—For purposes of this section—

(1) IN GENERAL.—The term “worker with a potentially severe disability” means, with respect to a demonstration project, an individual who—

(A) is at least 16, but less than 65, years of age;

(B) has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected, but for the receipt of items and services described in section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)), to become blind or disabled (as defined under section 1614(a) of the Social Security Act (42 U.S.C. 1382c(a))); and

(C) is employed (as defined in paragraph (2)).

(2) DEFINITION OF EMPLOYED.—An individual is considered to be “employed” if the individual—

(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or

(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined under the demonstration project and approved by the Secretary.

(c) APPROVAL OF DEMONSTRATION PROJECTS.—

(1) IN GENERAL.—Subject to paragraph (3), the Secretary shall approve applications under subsection (a) that meet the requirements of paragraph (2) and such additional terms and conditions as the Secretary may require. The Secretary may waive the requirement of section 1902(a)(1) of the Social Security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-State demonstrations.

(2) TERMS AND CONDITIONS OF DEMONSTRATION PROJECTS.—The Secretary may not approve a demonstration project under this section unless the State provides assurances satisfactory to the Secretary that the following conditions are or will be met:

(A) MAINTENANCE OF STATE EFFORT.—Federal funds paid to a State pursuant to this section must be used to supplement, but not supplant, the level of State funds expended for workers with potentially severe disabilities under programs in effect for such individuals at the time the demonstration project is approved under this section.

(B) INDEPENDENT EVALUATION.—The State provides for an independent evaluation of the project.

(3) LIMITATIONS ON FEDERAL FUNDING.—

(A) APPROPRIATION.—

(i) IN GENERAL.—Out of any funds in the Treasury not otherwise appropriated, there is appropriated to carry out this section—

(I) \$42,000,000 for each of fiscal years 2001 through 2004; and

(II) \$41,000,000 for each of fiscal years 2005 and 2006.

(ii) BUDGET AUTHORITY.—Clause (i) constitutes budget authority in advance of appropriations Acts and represents the obligation of the Federal Government to provide for the payment of the amounts appropriated under clause (i).

(B) LIMITATION ON PAYMENTS.—In no case may—

(i) the aggregate amount of payments made by the Secretary to States under this section exceed \$250,000,000;

(ii) the aggregate amount of payments made by the Secretary to States for administrative expenses relating to annual reports required under subsection (d) exceed \$2,000,000 of such \$250,000,000; or

(iii) payments be provided by the Secretary for a fiscal year after fiscal year 2009.

(C) FUNDS ALLOCATED TO STATES.—The Secretary shall allocate funds to States based on their applications and the availability of funds. Funds allocated to a State under a grant made under this section for a fiscal year shall remain available until expended.

(D) FUNDS NOT ALLOCATED TO STATES.—Funds not allocated to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for allocation by the Secretary using the allocation formula established under this section.

(E) PAYMENTS TO STATES.—The Secretary shall pay to each State with a demonstration project approved under this section, from its allocation under subparagraph (C), an amount for each quarter equal to the Federal medical assistance percentage (as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1395d(b))) of expenditures in the quarter for medical assistance provided to workers with a potentially severe disability.

(d) ANNUAL REPORT.—A State with a demonstration project approved under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include enrollment and financial statistics on—

(1) the total population of workers with potentially severe disabilities served by the demonstration project; and

(2) each population of such workers with a specific physical or mental impairment described in subsection (b)(1)(B) served by such project.

(e) RECOMMENDATION.—Not later than October 1, 2004, the Secretary shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the demonstration project established under this section should be continued after fiscal year 2006. Deadline.

(f) STATE DEFINED.—In this section, the term “State” has the meaning given such term for purposes of title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) IN GENERAL.—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting “or paragraph (6)” after “this paragraph”; and

(2) by adding at the end the following new paragraph:
 “(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended

at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss.”.

42 USC 1395ss
note.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

SEC. 301. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) EXTENSION OF AUTHORITY.—Title II of the Social Security Act (42 U.S.C. 401 et seq.) is amended by adding at the end the following new section:

“DEMONSTRATION PROJECT AUTHORITY

42 USC 434.

“SEC. 234. (a) AUTHORITY.—

“(1) IN GENERAL.—The Commissioner of Social Security (in this section referred to as the ‘Commissioner’) shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of—

“(A) various alternative methods of treating the work activity of individuals entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)), including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of such individuals;

“(B) altering other limitations and conditions applicable to such individuals (including lengthening the trial work period (as defined in section 222(c)), altering the 24-month waiting period for hospital insurance benefits under section 226, altering the manner in which the program under this title is administered, earlier referral of such individuals for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation); and

“(C) implementing sliding scale benefit offsets using variations in—

“(i) the amount of the offset as a proportion of earned income;

“(ii) the duration of the offset period; and

“(iii) the method of determining the amount of income earned by such individuals,

to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of this title.

“(2) **AUTHORITY FOR EXPANSION OF SCOPE.**—The Commissioner may expand the scope of any such experiment or demonstration project to include any group of applicants for benefits under the program established under this title with impairments that reasonably may be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.

“(b) **REQUIREMENTS.**—The experiments and demonstration projects developed under subsection (a) shall be of sufficient scope and shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration while giving assurance that the results derived from the experiments and projects will obtain generally in the operation of the disability insurance program under this title without committing such program to the adoption of any particular system either locally or nationally.

“(c) **AUTHORITY TO WAIVE COMPLIANCE WITH BENEFITS REQUIREMENTS.**—In the case of any experiment or demonstration project conducted under subsection (a), the Commissioner may waive compliance with the benefit requirements of this title and the requirements of section 1148 as they relate to the program established under this title, and the Secretary may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

“(d) **REPORTS.**—

“(1) **INTERIM REPORTS.**—On or before June 9 of each year, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate an annual interim report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials that the Commissioner may consider appropriate.

Deadline.

“(2) **TERMINATION AND FINAL REPORT.**—The authority under the preceding provisions of this section (including any waiver granted pursuant to subsection (c)) shall terminate 5 years after the date of the enactment of this Act. Not later than 90 days after the termination of any experiment or demonstration project carried out under this section, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate a final report with respect to that experiment or demonstration project.”.

(b) CONFORMING AMENDMENTS; TRANSFER OF PRIOR AUTHORITY.—

(1) CONFORMING AMENDMENTS.—

(A) REPEAL OF PRIOR AUTHORITY.—Paragraphs (1) through (4) of subsection (a) and subsection (c) of section 505 of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) are repealed.

(B) CONFORMING AMENDMENT REGARDING FUNDING.—Section 201(k) of the Social Security Act (42 U.S.C. 401(k)) is amended by striking “section 505(a) of the Social Security Disability Amendments of 1980” and inserting “section 234”.

42 USC 1310
note.

(2) TRANSFER OF PRIOR AUTHORITY.—With respect to any experiment or demonstration project being conducted under section 505(a) of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) as of the date of the enactment of this Act, the authority to conduct such experiment or demonstration project (including the terms and conditions applicable to the experiment or demonstration project) shall be treated as if that authority (and such terms and conditions) had been established under section 234 of the Social Security Act, as added by subsection (a).

42 USC 434 note.

SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.

(a) AUTHORITY.—The Commissioner of Social Security shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1148(k)(3) of the Social Security Act) under which benefits payable under section 223 of such Act, or under section 202 of such Act based on the beneficiary’s disability, are reduced by \$1 for each \$2 of the beneficiary’s earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(b) SCOPE AND SCALE AND MATTERS TO BE DETERMINED.—

(1) IN GENERAL.—The demonstration projects developed under subsection (a) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(A) the effects, if any, of induced entry into the project and reduced exit from the project;

(B) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act; and

(C) the savings that accrue to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Ticket to Work and Work Incentives Advisory Panel pursuant to section 101(f)(2)(B)(ii) of this Act.

(2) ADDITIONAL MATTERS.—The Commissioner shall also determine with respect to each project—

(A) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project;

(B) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project; and

(C) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project.

The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(c) WAIVERS.—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act (42 U.S.C. 401 et seq.), and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of such Act (42 U.S.C. 1395 et seq.), insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

Reports.

(d) INTERIM REPORTS.—Not later than 2 years after the date of the enactment of this Act, and annually thereafter, the Commissioner of Social Security shall submit to the Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials that the Commissioner of Social Security may consider appropriate.

Deadline.

(e) FINAL REPORT.—The Commissioner of Social Security shall submit to the Congress a final report with respect to all demonstration projects carried out under this section not later than 1 year after their completion.

Deadline.

(f) EXPENDITURES.—Expenditures made for demonstration projects under this section shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

SEC. 303. STUDIES AND REPORTS.

(a) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.—

42 USC 1201
note.

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.) and other Federal laws. In such study, the Comptroller General shall specifically address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities.

Deadline.

(2) REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

42 USC 401 note.

(b) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.—

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act (42 U.S.C. 401 et seq.) and the supplemental security income program under title XVI of such Act (42 U.S.C. 1381 et seq.), as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of such Act (42 U.S.C. 1395 et seq., 1396 et seq.).

(2) REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

42 USC 434 note.

(c) STUDY BY GENERAL ACCOUNTING OFFICE OF THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON RETURN TO WORK.—

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study of the substantial gainful activity level applicable as of that date to recipients of benefits under section 223 of the Social Security Act (42 U.S.C. 423) and under section 202 of such Act (42 U.S.C. 402) on the basis of a recipient having a disability, and the effect of such level as a disincentive for those recipients to return to work. In the study, the Comptroller General also shall address the merits of increasing the substantial gainful activity level

applicable to such recipients of benefits and the rationale for not yearly indexing that level to inflation.

(2) REPORT.—Not later than 2 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate. Deadline.

(d) REPORT ON DISREGARDS UNDER THE DI AND SSI PROGRAMS.—Not later than 90 days after the date of the enactment of this Act, the Commissioner of Social Security shall submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report that— Deadline.

(1) identifies all income, assets, and resource disregards (imposed under statutory or regulatory authority) that are applicable to individuals receiving benefits under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.);

(2) with respect to each such disregard—

(A) specifies the most recent statutory or regulatory modification of the disregard; and

(B) recommends whether further statutory or regulatory modification of the disregard would be appropriate; and

(3) with respect to the disregard described in section 1612(b)(7) of such Act (42 U.S.C. 1382a(b)(7)) (relating to grants, scholarships, or fellowships received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution)—

(A) identifies the number of individuals receiving benefits under title XVI of such Act (42 U.S.C. 1381 et seq.) who have attained age 22 and have not had any portion of any grant, scholarship, or fellowship received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution excluded from their income in accordance with that section;

(B) recommends whether the age at which such grants, scholarships, or fellowships are excluded from income for purposes of determining eligibility under title XVI of such Act (42 U.S.C. 1381 et seq.) should be increased to age 25; and

(C) recommends whether such disregard should be expanded to include any such grant, scholarship, or fellowship received for use in paying the cost of room and board at any such institution.

(e) STUDY BY THE GENERAL ACCOUNTING OFFICE OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY INSURANCE PROGRAM DEMONSTRATION AUTHORITY.— 42 USC 434 note.

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess the results of the Social Security Administration's efforts to conduct disability demonstrations authorized under prior law as well as under

section 234 of the Social Security Act (as added by section 301 of this Act).

Deadline.

(2) REPORT.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this section, together with a recommendation as to whether the demonstration authority authorized under section 234 of the Social Security Act (as added by section 301 of this Act) should be made permanent.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended—

(1) in subparagraph (A), by striking “by the Commissioner of Social Security” and “by the Commissioner”; and

(2) by adding at the end the following new subparagraph:

“(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

“(i) there is pending a request for either administrative or judicial review with respect to such claim; or

“(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

“(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) shall not apply to such redetermination.”.

(b) CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5)(B) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended to read as follows:

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act; or

“(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).”.

(c) **EFFECTIVE DATES.**—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104-121; 110 Stat. 852 et seq.).

42 USC 405 note.

SEC. 402. TREATMENT OF PRISONERS.

(a) **IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.**—

(1) **IN GENERAL.**—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”; and

(B) by adding at the end the following new subparagraph:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, Social Security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1) and other provisions of this title; and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual’s confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II).

“(iv) The Commissioner shall maintain, and shall provide on a reimbursable basis, information obtained pursuant to agreements entered into under this paragraph to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility and other administrative purposes under such program.”

(2) CONFORMING AMENDMENTS TO THE PRIVACY ACT.—Section 552a(a)(8)(B) of title 5, United States Code, is amended—

- (A) in clause (vi), by striking “or” at the end;
- (B) in clause (vii), by adding “or” at the end; and
- (C) by adding at the end the following new clause:
 - “(viii) matches performed pursuant to section 202(x)(3) or 1611(e)(1) of the Social Security Act (42 U.S.C. 402(x)(3), 1382(e)(1));”.

(3) CONFORMING AMENDMENTS TO TITLE XVI.—

(A) Section 1611(e)(1)(I)(i)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)(I)) is amended by striking “; and” and inserting “and the other provisions of this title; and”.

(B) Section 1611(e)(1)(I)(ii)(II) of such Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amended by striking “is authorized to provide, on a reimbursable basis,” and inserting “shall maintain, and shall provide on a reimbursable basis,”.

42 USC 402 note.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during which” and inserting “ending with or during or beginning with or during a period of more than 30 days throughout all of which”;

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

42 USC 402 note.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) FIFTY PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv) respectively; and

(C) by inserting after clause (i) the following new clause:

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”.

(2) EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii).”.

(3) ELIMINATION OF OVERLY BROAD EXEMPTION.—Section 1611(e)(1)(I)(iii) of such Act (42 U.S.C. 1382(e)(1)(I)(iii)) (as redesignated by paragraph (1)(B)) is amended further—

(A) by striking “(I) The provisions” and all that follows through “(II)”; and

(B) by striking “eligibility purposes” and inserting “eligibility and other administrative purposes under such program”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104-193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) of the Social Security Act in section 1611(e)(1)(I)(i) of the Social Security Act, as amended by paragraph (2) of this subsection, shall be deemed a reference to such section 202(x)(1)(A)(ii) of such Act as amended by subsection (b)(1)(C) of this section.

42 USC 1382
note.

(d) CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following new clause:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”.

(2) CONFORMING AMENDMENT.—Section 202(x)(1)(B)(ii) of such Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii)”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of the enactment of this Act.

42 USC 402 note.

26 USC 1402
note.

SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) **IN GENERAL.**—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefor (in such form and manner, and with such official, as may be prescribed by the Commissioner of Internal Revenue), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant's second taxable year beginning after December 31, 1999. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act (42 U.S.C. 401 et seq.)), as specified in the application, either with respect to the applicant's first taxable year beginning after December 31, 1999, or with respect to the applicant's second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant's Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant's income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding paragraphs (4) and (5) of section 1402(c)) except for the exemption under section 1402(e)(1) of such Code.

(b) **EFFECTIVE DATE.**—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under title II on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual's application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) **IN GENERAL.**—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking "title XVI" and inserting "title II or XVI".

(b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103-296; 108 Stat. 1464).

42 USC 1310
note.

SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL WAGE REPORTS.

(a) **IN GENERAL.**—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended by inserting before the semicolon the following: “, and except that in the case of wage reports with respect to domestic service employment, a State may permit employers (as so defined) that make returns with respect to such employment on a calendar year basis pursuant to section 3510 of the Internal Revenue Code of 1986 to make such reports on an annual basis”.

(b) **TECHNICAL AMENDMENTS.**—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b-7(a)(3)) is amended—

(1) by striking “(as defined in section 453A(a)(2)(B)(iii))”;

and

(2) by inserting “(as defined in section 453A(a)(2)(B))” after “employers”.

(c) **EFFECTIVE DATE.**—The amendments made by this section shall apply to wage reports required to be submitted on and after the date of the enactment of this Act.

42 USC 1320b-7
note.

SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE THEIR FEES VIA THE SOCIAL SECURITY ADMINISTRATION.

(a) **ASSESSMENT ON ATTORNEYS.**—

(1) **IN GENERAL.**—Section 206 of the Social Security Act (42 U.S.C. 406) is amended by adding at the end the following new subsection:

“(d) **ASSESSMENT ON ATTORNEYS.**—

“(1) **IN GENERAL.**—Whenever a fee for services is required to be certified for payment to an attorney from a claimant’s past-due benefits pursuant to subsection (a)(4) or (b)(1), the Commissioner shall impose on the attorney an assessment calculated in accordance with paragraph (2).

“(2) **AMOUNT.**—

“(A) The amount of an assessment under paragraph (1) shall be equal to the product obtained by multiplying the amount of the representative’s fee that would be required to be so certified by subsection (a)(4) or (b)(1) before the application of this subsection, by the percentage specified in subparagraph (B).

“(B) The percentage specified in this subparagraph is—

“(i) for calendar years before 2001, 6.3 percent,

and

“(ii) for calendar years after 2000, such percentage rate as the Commissioner determines is necessary in order to achieve full recovery of the costs of determining and certifying fees to attorneys from the past-due benefits of claimants, but not in excess of 6.3 percent.

“(3) **COLLECTION.**—The Commissioner may collect the assessment imposed on an attorney under paragraph (1) by offset from the amount of the fee otherwise required by subsection (a)(4) or (b)(1) to be certified for payment to the attorney from a claimant’s past-due benefits.

“(4) **PROHIBITION ON CLAIMANT REIMBURSEMENT.**—An attorney subject to an assessment under paragraph (1) may not, directly or indirectly, request or otherwise obtain

reimbursement for such assessment from the claimant whose claim gave rise to the assessment.

“(5) DISPOSITION OF ASSESSMENTS.—Assessments on attorneys collected under this subsection shall be credited to the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate.

“(6) AUTHORIZATION OF APPROPRIATIONS.—The assessments authorized under this section shall be collected and available for obligation only to the extent and in the amount provided in advance in appropriations Acts. Amounts so appropriated are authorized to remain available until expended, for administrative expenses in carrying out this title and related laws.”.

(2) CONFORMING AMENDMENTS.—

(A) Section 206(a)(4)(A) of such Act (42 U.S.C. 406(a)(4)(A)) is amended by inserting “and subsection (d)” after “subparagraph (B)”.

(B) Section 206(b)(1)(A) of such Act (42 U.S.C. 406(b)(1)(A)) is amended by inserting “, but subject to subsection (d) of this section” after “section 205(i)”.

(b) ELIMINATION OF 15-DAY WAITING PERIOD FOR PAYMENT OF FEES.—Section 206(a)(4) of such Act (42 U.S.C. 406(a)(4)), as amended by subsection (a)(2)(A) of this section, is amended—

(1) by striking “(4)(A)” and inserting “(4)”;

(2) by striking “subparagraph (B) and”; and

(3) by striking subparagraph (B).

(c) GAO STUDY AND REPORT.—

(1) STUDY.—The Comptroller General of the United States shall conduct a study that—

(A) examines the costs incurred by the Social Security Administration in administering the provisions of subsection (a)(4) and (b)(1) of section 206 of the Social Security Act (42 U.S.C. 406) and itemizes the components of such costs, including the costs of determining fees to attorneys from the past-due benefits of claimants before the Commissioner of Social Security and of certifying such fees;

(B) identifies efficiencies that the Social Security Administration could implement to reduce such costs;

(C) examines the feasibility and advisability of linking the payment of, or the amount of, the assessment under section 206(d) of the Social Security Act (42 U.S.C. 406(d)) to the timeliness of the payment of the fee to the attorney as certified by the Commissioner of Social Security pursuant to subsection (a)(4) or (b)(1) of section 206 of such Act (42 U.S.C. 406);

(D) determines whether the provisions of subsection (a)(4) and (b)(1) of section 206 of such Act (42 U.S.C. 406) should be applied to claimants under title XVI of such Act (42 U.S.C. 1381 et seq.);

(E) determines the feasibility and advisability of stating fees under section 206(d) of such Act (42 U.S.C. 406(d)) in terms of a fixed dollar amount as opposed to a percentage;

(F) determines whether the dollar limit specified in section 206(a)(2)(A)(ii)(II) of such Act (42 U.S.C. 406(a)(2)(A)(ii)(II)) should be raised; and

(G) determines whether the assessment on attorneys required under section 206(d) of such Act (42 U.S.C. 406(d))

42 USC 406 note.

(as added by subsection (a)(1) of this section) impairs access to legal representation for claimants.

(2) REPORT.—Not later than 1 year after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate on the study conducted under paragraph (1), together with any recommendations for legislation that the Comptroller General determines to be appropriate as a result of such study. Deadline.

(d) EFFECTIVE DATE.—The amendments made by this section shall apply in the case of any attorney with respect to whom a fee for services is required to be certified for payment from a claimant's past-due benefits pursuant to subsection (a)(4) or (b)(1) of section 206 of the Social Security Act after the later of— 42 USC 406 note.

(1) December 31, 1999, or

(2) the last day of the first month beginning after the month in which this Act is enacted.

SEC. 407. EXTENSION OF AUTHORITY OF STATE MEDICAID FRAUD CONTROL UNITS.

(a) EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE FRAUD IN OTHER FEDERAL HEALTH CARE PROGRAMS.—Section 1903(q)(3) of the Social Security Act (42 U.S.C. 1396b(q)(3)) is amended—

(1) by inserting “(A)” after “in connection with”; and

(2) by striking “title.” and inserting “title; and (B) upon the approval of the Inspector General of the relevant Federal agency, any aspect of the provision of health care services and activities of providers of such services under any Federal health care program (as defined in section 1128B(f)(1)), if the suspected fraud or violation of law in such case or investigation is primarily related to the State plan under this title.”.

(b) RECOUPMENT OF FUNDS.—Section 1903(q)(5) of such Act (42 U.S.C. 1396b(q)(5)) is amended—

(1) by inserting “or under any Federal health care program (as so defined)” after “plan”; and

(2) by adding at the end the following: “All funds collected in accordance with this paragraph shall be credited exclusively to, and available for expenditure under, the Federal health care program (including the State plan under this title) that was subject to the activity that was the basis for the collection.”.

(c) EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID BOARD AND CARE FACILITIES.—Section 1903(q)(4) of such Act (42 U.S.C. 1396b(q)(4)) is amended to read as follows:

“(4)(A) The entity has—

“(i) procedures for reviewing complaints of abuse or neglect of patients in health care facilities which receive payments under the State plan under this title;

“(ii) at the option of the entity, procedures for reviewing complaints of abuse or neglect of patients residing in board and care facilities; and

“(iii) procedures for acting upon such complaints under the criminal laws of the State or for referring such complaints to other State agencies for action.

“(B) For purposes of this paragraph, the term ‘board and care facility’ means a residential setting which receives payment (regardless of whether such payment is made under the State plan under this title) from or on behalf of two or more unrelated adults who reside in such facility, and for whom one or both of the following is provided:

“(i) Nursing care services provided by, or under the supervision of, a registered nurse, licensed practical nurse, or licensed nursing assistant.

“(ii) A substantial amount of personal care services that assist residents with the activities of daily living, including personal hygiene, dressing, bathing, eating, toileting, ambulation, transfer, positioning, self-medication, body care, travel to medical services, essential shopping, meal preparation, laundry, and housework.”

42 USC 1396b
note.

(d) EFFECTIVE DATE.—The amendments made by this section take effect on the date of the enactment of this Act.

SEC. 408. CLIMATE DATABASE MODERNIZATION.

Notwithstanding any other provision of law, the National Oceanic and Atmospheric Administration shall initiate a new competitive contract procurement for its multi-year program for key entry of valuable climate records, archive services, and database development in accordance with existing Federal procurement laws and regulations.

SEC. 409. SPECIAL ALLOWANCE ADJUSTMENT FOR STUDENT LOANS.

(a) AMENDMENT.—Section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087-1(b)(2)) is amended—

(1) in subparagraph (A), by striking “(G), and (H)” and inserting “(G), (H), and (I)”;

(2) in subparagraph (B)(iv), by striking “(G), or (H)” and inserting “(G), (H), or (I)”;

(3) in subparagraph (C)(ii), by striking “(G) and (H)” and inserting “(G), (H), and (I)”;

(4) in the heading of subparagraph (H), by striking “JULY 1, 2003” and inserting “JANUARY 1, 2000”;

(5) in subparagraph (H), by striking “July 1, 2003,” each place it appears and inserting “January 1, 2000,”; and

(6) by inserting after subparagraph (H) the following new subparagraph:

“(I) LOANS DISBURSED ON OR AFTER JANUARY 1, 2000, AND BEFORE JULY 1, 2003.—

“(i) IN GENERAL.—Notwithstanding subparagraphs (G) and (H), but subject to paragraph (4) and clauses (ii), (iii), and (iv) of this subparagraph, and except as provided in subparagraph (B), the special allowance paid pursuant to this subsection on loans for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, shall be computed—

“(I) by determining the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period;

“(II) by subtracting the applicable interest rates on such loans from such average bond equivalent rate;

“(III) by adding 2.34 percent to the resultant percent; and

“(IV) by dividing the resultant percent by 4.

“(ii) IN SCHOOL AND GRACE PERIOD.—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(2), clause (i)(III) of this subparagraph shall be applied by substituting ‘1.74 percent’ for ‘2.34 percent’.

“(iii) PLUS LOANS.—In the case of any loan for which the first disbursement is made on or after January 1, 2000, and before July 1, 2003, and for which the applicable rate of interest is described in section 427A(k)(3), clause (i)(III) of this subparagraph shall be applied by substituting ‘2.64 percent’ for ‘2.34 percent’, subject to clause (v) of this subparagraph.

“(iv) CONSOLIDATION LOANS.—In the case of any consolidation loan for which the application is received by an eligible lender on or after January 1, 2000, and before July 1, 2003, and for which the applicable interest rate is determined under section 427A(k)(4), clause (i)(III) of this subparagraph shall be applied by substituting ‘2.64 percent’ for ‘2.34 percent’, subject to clause (vi) of this subparagraph.

“(v) LIMITATION ON SPECIAL ALLOWANCES FOR PLUS LOANS.—In the case of PLUS loans made under section 428B and first disbursed on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(3), a special allowance shall not be paid for such loan during any 12-month period beginning on July 1 and ending on June 30 unless, on the June 1 preceding such July 1—

“(I) the bond equivalent rate of 91-day Treasury bills auctioned at the final auction held prior to such June 1 (as determined by the Secretary for purposes of such section); plus

“(II) 3.1 percent,

exceeds 9.0 percent.

“(vi) LIMITATION ON SPECIAL ALLOWANCES FOR CONSOLIDATION LOANS.—In the case of consolidation loans made under section 428C and for which the application is received on or after January 1, 2000, and before July 1, 2003, for which the interest rate is determined under section 427A(k)(4), a special allowance shall not be paid for such loan during any 3-month period ending March 31, June 30, September 30, or December 31 unless—

“(I) the average of the bond equivalent rates of the quotes of the 3-month commercial paper (financial) rates in effect for each of the days in such quarter as reported by the Federal Reserve in Publication H-15 (or its successor) for such 3-month period; plus

Applicability.
20 USC 1087-1
note.

“(II) 2.64 percent,
exceeds the rate determined under section 427A(k)(4).”.

(b) **EFFECTIVE DATE.**—Subparagraph (I) of section 438(b)(2) of the Higher Education Act of 1965 (20 U.S.C. 1087-1(b)(2)) as added by subsection (a) of this section shall apply with respect to any payment pursuant to such section with respect to any 3-month period beginning on or after January 1, 2000, for loans for which the first disbursement is made after such date.

SEC. 410. SCHEDULE FOR PAYMENTS UNDER SSI STATE SUPPLEMENTATION AGREEMENTS.

(a) **SCHEDULE FOR SSI SUPPLEMENTATION PAYMENTS.**—

(1) **IN GENERAL.**—Section 1616(d) of the Social Security Act (42 U.S.C. 1382e(d)) is amended—

(A) in paragraph (1), by striking “at such times and in such installments as may be agreed upon between the Commissioner of Social Security and such State” and inserting “in accordance with paragraph (5)”; and

(B) by adding at the end the following new paragraph:
“(5)(A)(i) Any State which has entered into an agreement with the Commissioner of Social Security under this section shall remit the payments and fees required under this subsection with respect to monthly benefits paid to individuals under this title no later than—

“(I) the business day preceding the date that the Commissioner pays such monthly benefits; or

“(II) with respect to such monthly benefits paid for the month that is the last month of the State’s fiscal year, the fifth business day following such date.

“(ii) The Commissioner may charge States a penalty in an amount equal to 5 percent of the payment and the fees due if the remittance is received after the date required by clause (i).

(B) The Cash Management Improvement Act of 1990 shall not apply to any payments or fees required under this subsection that are paid by a State before the date required by subparagraph (A)(i).

(C) Notwithstanding subparagraph (A)(i), the Commissioner may make supplementary payments on behalf of a State with funds appropriated for payment of benefits under this title, and subsequently to be reimbursed for such payments by the State at such times as the Commissioner and State may agree. Such authority may be exercised only if extraordinary circumstances affecting a State’s ability to make payment when required by subparagraph (A)(i) are determined by the Commissioner to exist.”.

(2) **AMENDMENT TO SECTION 212.**—Section 212 of Public Law 93-66 (42 U.S.C. 1382 note) is amended—

(A) in subsection (b)(3)(A), by striking “at such times and in such installments as may be agreed upon between the Secretary and the State” and inserting “in accordance with subparagraph (E)”; and

(B) by adding at the end of subsection (b)(3) the following new subparagraph:

“(E)(i) Any State which has entered into an agreement with the Commissioner of Social Security under this section shall remit the payments and fees required under this paragraph with respect to monthly benefits paid to individuals under title XVI of the Social Security Act no later than—

Deadlines.

“(I) the business day preceding the date that the Commissioner pays such monthly benefits; or

“(II) with respect to such monthly benefits paid for the month that is the last month of the State’s fiscal year, the fifth business day following such date.

“(ii) The Cash Management Improvement Act of 1990 shall not apply to any payments or fees required under this paragraph that are paid by a State before the date required by clause (i).

“(iii) Notwithstanding clause (i), the Commissioner may make supplementary payments on behalf of a State with funds appropriated for payment of supplemental security income benefits under title XVI of the Social Security Act, and subsequently to be reimbursed for such payments by the State at such times as the Commissioner and State may agree. Such authority may be exercised only if extraordinary circumstances affecting a State’s ability to make payment when required by clause (i) are determined by the Commissioner to exist.”; and

(C) by striking “Secretary of Health, Education, and Welfare” and “Secretary” each place such term appear and inserting “Commissioner of Social Security”.

(b) **EFFECTIVE DATE.**—The amendments made by subsection (a) shall apply to payments and fees arising under an agreement between a State and the Commissioner of Social Security under section 1616 of the Social Security Act (42 U.S.C. 1382e) or under section 212 of Public Law 93-66 (42 U.S.C. 1382 note) with respect to monthly benefits paid to individuals under title XVI of the Social Security Act for months after September 2009 (October 2009 in the case of a State with a fiscal year that coincides with the Federal fiscal year), without regard to whether the agreement has been modified to reflect such amendments or the Commissioner has promulgated regulations implementing such amendments.

Applicability.
42 USC 1382e
note.

SEC. 411. BONUS COMMODITIES.

Section 6(e)(1) of the Richard B. Russell National School Lunch Act (42 U.S.C. 1755(e)(1)) is amended—

(1) by striking “in the form of commodity assistance” and inserting “in the form of—

“(A) commodity assistance”;

(2) by striking the period at the end and inserting “; or”; and

(3) by adding at the end the following:

“(B) during the period beginning October 1, 2000, and ending September 30, 2009, commodities provided by the Secretary under any provision of law.”.

SEC. 412. SIMPLIFICATION OF DEFINITION OF FOSTER CHILD UNDER EIC.

(a) **IN GENERAL.**—Section 32(c)(3)(B)(iii) of the Internal Revenue Code of 1986 (defining eligible foster child) is amended by redesignating subclauses (I) and (II) as subclauses (II) and (III), respectively, and by inserting before subclause (II), as so redesignated, the following:

26 USC 32.

“(I) is a brother, sister, stepbrother, or step-sister of the taxpayer (or a descendant of any such relative) or is placed with the taxpayer by an authorized placement agency.”.

(b) **EFFECTIVE DATE.**—The amendments made by this section shall apply to taxable years beginning after December 31, 1999.

Applicability.
26 USC 32 note.

SEC. 413. DELAY OF EFFECTIVE DATE OF ORGAN PROCUREMENT AND TRANSPLANTATION NETWORK FINAL RULE.

(a) IN GENERAL.—The final rule entitled “Organ Procurement and Transplantation Network”, promulgated by the Secretary of Health and Human Services on April 2, 1998 (63 Fed. Reg. 16295 et seq.) (relating to part 121 of title 42, Code of Federal Regulations), together with the amendments to such rules promulgated on October 20, 1999 (64 Fed. Reg. 56649 et seq.) shall not become effective before the expiration of the 90-day period beginning on the date of the enactment of this Act.

(b) NOTICE AND REVIEW.—For purposes of subsection (a):

Deadline. (1) Not later than 3 days after the date of the enactment of this Act, the Secretary of Health and Human Services (referred to in this subsection as the “Secretary”) shall publish in the Federal Register a notice providing that the period within which comments on the final rule may be submitted to the Secretary is 60 days after the date of such publication of the notice.

Deadline. (2) Not later than 21 days after the expiration of such 60-day period, the Secretary shall complete the review of the comments submitted pursuant to paragraph (1) and shall amend the final rule with any revisions appropriate according to the review by the Secretary of such comments. The final rule may be in the form of amendments to the rule referred to in subsection (a) that was promulgated on April 2, 1998, and in the form of amendments to the rule referred to in such subsection that was promulgated on October 20, 1999.

Tax Relief
Extension Act of
1999.

TITLE V—TAX RELIEF EXTENSION ACT OF 1999

26 USC 1 note.

SEC. 500. SHORT TITLE OF TITLE.

This title may be cited as the “Tax Relief Extension Act of 1999”.

Subtitle A—Extensions

SEC. 501. ALLOWANCE OF NONREFUNDABLE PERSONAL CREDITS AGAINST REGULAR AND MINIMUM TAX LIABILITY.

26 USC 26. (a) IN GENERAL.—Subsection (a) of section 26 of the Internal Revenue Code of 1986 (relating to limitation based on amount of tax) is amended to read as follows:

“(a) LIMITATION BASED ON AMOUNT OF TAX.—

“(1) IN GENERAL.—The aggregate amount of credits allowed by this subpart for the taxable year shall not exceed the excess (if any) of—

“(A) the taxpayer’s regular tax liability for the taxable year, over

“(B) the tentative minimum tax for the taxable year (determined without regard to the alternative minimum tax foreign tax credit).

For purposes of subparagraph (B), the taxpayer’s tentative minimum tax for any taxable year beginning during 1999 shall be treated as being zero.”.

“(2) SPECIAL RULE FOR 2000 AND 2001.—For purposes of any taxable year beginning during 2000 or 2001, the aggregate amount of credits allowed by this subpart for the taxable year shall not exceed the sum of—

“(A) the taxpayer’s regular tax liability for the taxable year reduced by the foreign tax credit allowable under section 27(a), and

“(B) the tax imposed by section 55(a) for the taxable year.”.

(b) CONFORMING AMENDMENTS.—

(1) Section 24(d)(2) of such Code is amended by striking “1998” and inserting “2001”. 26 USC 24.

(2) Section 904(h) of such Code is amended by adding at the end the following: “This subsection shall not apply to taxable years beginning during 2000 or 2001.”. 26 USC 904.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 1998. Applicability. 26 USC 24 note.

SEC. 502. RESEARCH CREDIT.

(a) EXTENSION.—

(1) IN GENERAL.—Paragraph (1) of section 41(h) of the Internal Revenue Code of 1986 (relating to termination) is amended— 26 USC 41.

(A) by striking “June 30, 1999” and inserting “June 30, 2004”; and

(B) by striking the material following subparagraph (B).

(2) TECHNICAL AMENDMENT.—Subparagraph (D) of section 45C(b)(1) of such Code is amended by striking “June 30, 1999” and inserting “June 30, 2004”. 26 USC 45C.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply to amounts paid or incurred after June 30, 1999. Applicability. 26 USC 41 note.

(b) INCREASE IN PERCENTAGES UNDER ALTERNATIVE INCREMENTAL CREDIT.—

(1) IN GENERAL.—Subparagraph (A) of section 41(c)(4) of such Code is amended—

(A) by striking “1.65 percent” and inserting “2.65 percent”;

(B) by striking “2.2 percent” and inserting “3.2 percent”; and

(C) by striking “2.75 percent” and inserting “3.75 percent”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to taxable years beginning after June 30, 1999. Applicability. 26 USC 41 note.

(c) EXTENSION OF RESEARCH CREDIT TO RESEARCH IN PUERTO RICO AND THE POSSESSIONS OF THE UNITED STATES.—

(1) IN GENERAL.—Subsections (c)(6) and (d)(4)(F) of section 41 of such Code (relating to foreign research) are each amended by inserting “, the Commonwealth of Puerto Rico, or any possession of the United States” after “United States”.

(2) DENIAL OF DOUBLE BENEFIT.—Section 280C(c)(1) of such Code is amended by inserting “or credit” after “deduction” each place it appears. 26 USC 280C.

Applicability.
26 USC 41 note.

26 USC 41 note.

(3) **EFFECTIVE DATE.**—The amendments made by this subsection shall apply to amounts paid or incurred after June 30, 1999.

(d) **SPECIAL RULE.**—

(1) **IN GENERAL.**—For purposes of the Internal Revenue Code of 1986, the credit determined under section 41 of such Code which is otherwise allowable under such Code—

(A) shall not be taken into account prior to October 1, 2000, to the extent such credit is attributable to the first suspension period; and

(B) shall not be taken into account prior to October 1, 2001, to the extent such credit is attributable to the second suspension period.

On or after the earliest date that an amount of credit may be taken into account, such amount may be taken into account through the filing of an amended return, an application for expedited refund, an adjustment of estimated taxes, or other means allowed by such Code.

(2) **SUSPENSION PERIODS.**—For purposes of this subsection—

(A) the first suspension period is the period beginning on July 1, 1999, and ending on September 30, 2000; and

(B) the second suspension period is the period beginning on October 1, 2000, and ending on September 30, 2001.

(3) **EXPEDITED REFUNDS.**—

(A) **IN GENERAL.**—If there is an overpayment of tax with respect to a taxable year by reason of paragraph (1), the taxpayer may file an application for a tentative refund of such overpayment. Such application shall be in such manner and form, and contain such information, as the Secretary may prescribe.

(B) **DEADLINE FOR APPLICATIONS.**—Subparagraph (A) shall apply only to an application filed before the date which is 1 year after the close of the suspension period to which the application relates.

Deadline.

(C) **ALLOWANCE OF ADJUSTMENTS.**—Not later than 90 days after the date on which an application is filed under this paragraph, the Secretary shall—

(i) review the application;

(ii) determine the amount of the overpayment; and

(iii) apply, credit, or refund such overpayment, in a manner similar to the manner provided in section 6411(b) of such Code.

(D) **CONSOLIDATED RETURNS.**—The provisions of section 6411(c) of such Code shall apply to an adjustment under this paragraph in such manner as the Secretary may provide.

(4) **CREDIT ATTRIBUTABLE TO SUSPENSION PERIOD.**—

(A) **IN GENERAL.**—For purposes of this subsection, in the case of a taxable year which includes a portion of the suspension period, the amount of credit determined under section 41 of such Code for such taxable year which is attributable to such period is the amount which bears the same ratio to the amount of credit determined under such section 41 for such taxable year as the number of months in the suspension period which are during such

taxable year bears to the number of months in such taxable year.

(B) WAIVER OF ESTIMATED TAX PENALTIES.—No addition to tax shall be made under section 6654 or 6655 of such Code for any period before July 1, 1999, with respect to any underpayment of tax imposed by such Code to the extent such underpayment was created or increased by reason of subparagraph (A).

(5) SECRETARY.—For purposes of this subsection, the term “Secretary” means the Secretary of the Treasury (or such Secretary’s delegate).

SEC. 503. SUBPART F EXEMPTION FOR ACTIVE FINANCING INCOME.

(a) IN GENERAL.—Sections 953(e)(10) and 954(h)(9) of the Internal Revenue Code of 1986 (relating to application) are each amended— 26 USC 953, 954.

(1) by striking “the first taxable year” and inserting “taxable years”;

(2) by striking “January 1, 2000” and inserting “January 1, 2002”; and

(3) by striking “within which such” and inserting “within which any such”.

(b) TECHNICAL AMENDMENT.—Paragraph (10) of section 953(e) of such Code is amended by adding at the end the following new sentence: “If this subsection does not apply to a taxable year of a foreign corporation beginning after December 31, 2001 (and taxable years of United States shareholders ending with or within such taxable year), then, notwithstanding the preceding sentence, subsection (a) shall be applied to such taxable years in the same manner as it would if the taxable year of the foreign corporation began in 1998.”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 1999. Applicability. 26 USC 953 note.

SEC. 504. TAXABLE INCOME LIMIT ON PERCENTAGE DEPLETION FOR MARGINAL PRODUCTION.

(a) IN GENERAL.—Subparagraph (H) of section 613A(c)(6) of the Internal Revenue Code of 1986 (relating to temporary suspension of taxable limit with respect to marginal production) is amended by striking “January 1, 2000” and inserting “January 1, 2002”. 26 USC 613A.

(b) EFFECTIVE DATE.—The amendment made by this section shall apply to taxable years beginning after December 31, 1999. 26 USC 613A note.

SEC. 505. WORK OPPORTUNITY CREDIT AND WELFARE-TO-WORK CREDIT.

(a) TEMPORARY EXTENSION.—Sections 51(c)(4)(B) and 51A(f) of the Internal Revenue Code of 1986 (relating to termination) are each amended by striking “June 30, 1999” and inserting “December 31, 2001”. 26 USC 51, 51A.

(b) CLARIFICATION OF FIRST YEAR OF EMPLOYMENT.—Paragraph (2) of section 51(i) of such Code is amended by striking “during which he was not a member of a targeted group”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to individuals who begin work for the employer after June 30, 1999. Applicability. 26 USC 51 note.

SEC. 506. EMPLOYER-PROVIDED EDUCATIONAL ASSISTANCE.

26 USC 127. (a) **IN GENERAL.**—Subsection (d) of section 127 of the Internal Revenue Code of 1986 (relating to termination) is amended by striking “May 31, 2000” and inserting “December 31, 2001”.

Applicability.
26 USC 127 note. (b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall apply to courses beginning after May 31, 2000.

SEC. 507. EXTENSION AND MODIFICATION OF CREDIT FOR PRODUCING ELECTRICITY FROM CERTAIN RENEWABLE RESOURCES.

26 USC 45. (a) **EXTENSION AND MODIFICATION OF PLACED-IN-SERVICE RULES.**—Paragraph (3) of section 45(c) of the Internal Revenue Code of 1986 is amended to read as follows:

“(3) **QUALIFIED FACILITY.**—

“(A) **WIND FACILITY.**—In the case of a facility using wind to produce electricity, the term ‘qualified facility’ means any facility owned by the taxpayer which is originally placed in service after December 31, 1993, and before January 1, 2002.

“(B) **CLOSED-LOOP BIOMASS FACILITY.**—In the case of a facility using closed-loop biomass to produce electricity, the term ‘qualified facility’ means any facility owned by the taxpayer which is originally placed in service after December 31, 1992, and before January 1, 2002.

“(C) **POULTRY WASTE FACILITY.**—In the case of a facility using poultry waste to produce electricity, the term ‘qualified facility’ means any facility of the taxpayer which is originally placed in service after December 31, 1999, and before January 1, 2002.”.

(b) **EXPANSION OF QUALIFIED ENERGY RESOURCES.**—

(1) **IN GENERAL.**—Section 45(c)(1) of such Code (defining qualified energy resources) is amended by striking “and” at the end of subparagraph (A), by striking the period at the end of subparagraph (B) and inserting “, and”, and by adding at the end the following new subparagraph:

“(C) poultry waste.”.

(2) **DEFINITION.**—Section 45(c) of such Code is amended by adding at the end the following new paragraph:

“(4) **POULTRY WASTE.**—The term ‘poultry waste’ means poultry manure and litter, including wood shavings, straw, rice hulls, and other bedding material for the disposition of manure.”.

(c) **SPECIAL RULES.**—Section 45(d) of such Code (relating to definitions and special rules) is amended by adding at the end the following new paragraphs:

“(6) **CREDIT ELIGIBILITY IN THE CASE OF GOVERNMENT-OWNED FACILITIES USING POULTRY WASTE.**—In the case of a facility using poultry waste to produce electricity and owned by a governmental unit, the person eligible for the credit under subsection (a) is the lessee or the operator of such facility.

“(7) **CREDIT NOT TO APPLY TO ELECTRICITY SOLD TO UTILITIES UNDER CERTAIN CONTRACTS.**—

“(A) **IN GENERAL.**—The credit determined under subsection (a) shall not apply to electricity—

“(i) produced at a qualified facility described in paragraph (3)(A) which is placed in service by the taxpayer after June 30, 1999, and

“(ii) sold to a utility pursuant to a contract originally entered into before January 1, 1987 (whether or not amended or restated after that date).

“(B) EXCEPTION.—Subparagraph (A) shall not apply if—

“(i) the prices for energy and capacity from such facility are established pursuant to an amendment to the contract referred to in subparagraph (A)(ii),

“(ii) such amendment provides that the prices set forth in the contract which exceed avoided cost prices determined at the time of delivery shall apply only to annual quantities of electricity (prorated for partial years) which do not exceed the greater of—

“(I) the average annual quantity of electricity sold to the utility under the contract during calendar years 1994, 1995, 1996, 1997, and 1998, or

“(II) the estimate of the annual electricity production set forth in the contract, or, if there is no such estimate, the greatest annual quantity of electricity sold to the utility under the contract in any of the calendar years 1996, 1997, or 1998, and

“(iii) such amendment provides that energy and capacity in excess of the limitation in clause (ii) may be—

“(I) sold to the utility only at prices that do not exceed avoided cost prices determined at the time of delivery, or

“(II) sold to a third party subject to a mutually agreed upon advance notice to the utility.

For purposes of this subparagraph, avoided cost prices shall be determined as provided for in 18 CFR 292.304(d)(1) or any successor regulation.”.

(d) EFFECTIVE DATE.—The amendments made by this section shall take effect on the date of the enactment of this Act. 26 USC 45 note.

SEC. 508. EXTENSION OF DUTY-FREE TREATMENT UNDER GENERALIZED SYSTEM OF PREFERENCES.

(a) IN GENERAL.—Section 505 of the Trade Act of 1974 (19 U.S.C. 2465) is amended by striking “June 30, 1999” and inserting “September 30, 2001”.

(b) EFFECTIVE DATE.—

(1) IN GENERAL.—The amendment made by this section applies to articles entered on or after the date of the enactment of this Act. 19 USC 2465 note.

(2) RETROACTIVE APPLICATION FOR CERTAIN LIQUIDATIONS AND RELIQUIDATIONS.—

(A) GENERAL RULE.—Notwithstanding section 514 of the Tariff Act of 1930 or any other provision of law, and subject to paragraph (3), any entry—

(i) of an article to which duty-free treatment under title V of the Trade Act of 1974 would have applied if such entry had been made on July 1, 1999, and such title had been in effect on July 1, 1999; and

(ii) that was made—

(I) after June 30, 1999; and

(II) before the date of the enactment of this Act, shall be liquidated or reliquidated as free of duty, and the Secretary of the Treasury shall refund any duty paid with respect to such entry.

(B) ENTRY.—As used in this paragraph, the term “entry” includes a withdrawal from warehouse for consumption.

(3) REQUESTS.—Liquidation or reliquidation may be made under paragraph (2) with respect to an entry only if a request therefore is filed with the Customs Service, within 180 days after the date of the enactment of this Act, that contains sufficient information to enable the Customs Service—

(A) to locate the entry; or

(B) to reconstruct the entry if it cannot be located.

SEC. 509. EXTENSION OF CREDIT FOR HOLDERS OF QUALIFIED ZONE ACADEMY BONDS.

26 USC 1397E. (a) IN GENERAL.—Section 1397E(e)(1) of the Internal Revenue Code of 1986 (relating to national limitation) is amended by striking “and 1999” and inserting “, 1999, 2000, and 2001”.

(b) LIMITATION ON CARRYOVER PERIODS.—Paragraph (4) of section 1397E(e) of such Code is amended by adding at the end the following flush sentences:

“Any carryforward of a limitation amount may be carried only to the first 2 years (3 years for carryforwards from 1998 or 1999) following the unused limitation year. For purposes of the preceding sentence, a limitation amount shall be treated as used on a first-in first-out basis.”

SEC. 510. EXTENSION OF FIRST-TIME HOMEBUYER CREDIT FOR DISTRICT OF COLUMBIA.

26 USC 1400C. Section 1400C(i) of the Internal Revenue Code of 1986 is amended by striking “2001” and inserting “2002”.

SEC. 511. EXTENSION OF EXPENSING OF ENVIRONMENTAL REMEDIATION COSTS.

26 USC 198. Section 198(h) of the Internal Revenue Code of 1986 is amended by striking “2000” and inserting “2001”.

SEC. 512. TEMPORARY INCREASE IN AMOUNT OF RUM EXCISE TAX COVERED OVER TO PUERTO RICO AND VIRGIN ISLANDS.

26 USC 7652. (a) IN GENERAL.—Section 7652(f)(1) of the Internal Revenue Code of 1986 (relating to limitation on cover over of tax on distilled spirits) is amended to read as follows:

“(1) \$10.50 (\$13.25 in the case of distilled spirits brought into the United States after June 30, 1999, and before January 1, 2002), or”.

Applicability.
26 USC 7652
note.

(b) SPECIAL COVER OVER TRANSFER RULES.—Notwithstanding section 7652 of the Internal Revenue Code of 1986, the following rules shall apply with respect to any transfer before October 1, 2000, of amounts relating to the increase in the cover over of taxes by reason of the amendment made by subsection (a):

(1) INITIAL TRANSFER OF INCREMENTAL INCREASE IN COVER OVER.—The Secretary of the Treasury shall, within 15 days after the date of the enactment of this Act, transfer an amount equal to the lesser of—

(A) the amount of such increase otherwise required to be covered over after June 30, 1999, and before the date of the enactment of this Act; or

(B) \$20,000,000.

(2) TRANSFER OF INCREMENTAL INCREASE FOR FISCAL YEAR 2001.—The Secretary of the Treasury shall on October 1, 2000, transfer an amount equal to the excess of—

(A) the amount of such increase otherwise required to be covered over after June 30, 1999, and before October 1, 2000, over

(B) the amount of the transfer described in paragraph (1).

(c) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on July 1, 1999. 26 USC 7652 note.

Subtitle B—Other Time-Sensitive Provisions

SEC. 521. ADVANCE PRICING AGREEMENTS TREATED AS CONFIDENTIAL TAXPAYER INFORMATION.

(a) IN GENERAL.—

(1) TREATMENT AS RETURN INFORMATION.—Paragraph (2) of section 6103(b) of the Internal Revenue Code of 1986 (defining return information) is amended by striking “and” at the end of subparagraph (A), by inserting “and” at the end of subparagraph (B), and by inserting after subparagraph (B) the following new subparagraph: 26 USC 6103.

“(C) any advance pricing agreement entered into by a taxpayer and the Secretary and any background information related to such agreement or any application for an advance pricing agreement.”

(2) EXCEPTION FROM PUBLIC INSPECTION AS WRITTEN DETERMINATION.—Paragraph (1) of section 6110(b) of such Code (defining written determination) is amended by adding at the end the following new sentence: “Such term shall not include any advance pricing agreement entered into by a taxpayer and the Secretary and any background information related to such agreement or any application for an advance pricing agreement.” 26 USC 6110.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall take effect on the date of the enactment of this Act. 26 USC 6103 note.

(b) ANNUAL REPORT REGARDING ADVANCE PRICING AGREEMENTS.—

(1) IN GENERAL.—Not later than 90 days after the end of each calendar year, the Secretary of the Treasury shall prepare and publish a report regarding advance pricing agreements. Deadline.

(2) CONTENTS OF REPORT.—The report shall include the following for the calendar year to which such report relates:

(A) Information about the structure, composition, and operation of the advance pricing agreement program office.

(B) A copy of each model advance pricing agreement.

(C) The number of—

(i) applications filed during such calendar year for advance pricing agreements;

(ii) advance pricing agreements executed cumulatively to date and during such calendar year;

(iii) renewals of advance pricing agreements issued;

(iv) pending requests for advance pricing agreements;

(v) pending renewals of advance pricing agreements;

(vi) for each of the items in clauses (ii) through (v), the number that are unilateral, bilateral, and multilateral, respectively;

(vii) advance pricing agreements revoked or canceled, and the number of withdrawals from the advance pricing agreement program; and

(viii) advance pricing agreements finalized or renewed by industry.

(D) General descriptions of—

(i) the nature of the relationships between the related organizations, trades, or businesses covered by advance pricing agreements;

(ii) the covered transactions and the business functions performed and risks assumed by such organizations, trades, or businesses;

(iii) the related organizations, trades, or businesses whose prices or results are tested to determine compliance with transfer pricing methodologies prescribed in advance pricing agreements;

(iv) methodologies used to evaluate tested parties and transactions and the circumstances leading to the use of those methodologies;

(v) critical assumptions made and sources of comparables used;

(vi) comparable selection criteria and the rationale used in determining such criteria;

(vii) the nature of adjustments to comparables or tested parties;

(viii) the nature of any ranges agreed to, including information regarding when no range was used and why, when interquartile ranges were used, and when there was a statistical narrowing of the comparables;

(ix) adjustment mechanisms provided to rectify results that fall outside of the agreed upon advance pricing agreement range;

(x) the various term lengths for advance pricing agreements, including rollback years, and the number of advance pricing agreements with each such term length;

(xi) the nature of documentation required; and

(xii) approaches for sharing of currency or other risks.

(E) Statistics regarding the amount of time taken to complete new and renewal advance pricing agreements.

(F) A detailed description of the Secretary of the Treasury's efforts to ensure compliance with existing advance pricing agreements.

(3) CONFIDENTIALITY.—The reports required by this subsection shall be treated as authorized by the Internal Revenue

Code of 1986 for purposes of section 6103 of such Code, but the reports shall not include information—

(A) which would not be permitted to be disclosed under section 6110(c) of such Code if such report were a written determination as defined in section 6110 of such Code; or

(B) which can be associated with, or otherwise identify, directly or indirectly, a particular taxpayer.

(4) **FIRST REPORT.**—The report for calendar year 1999 shall include prior calendar years after 1990.

(c) **REGULATIONS.**—The Secretary of the Treasury or the Secretary's delegate shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of section 6103(b)(2)(C), and the last sentence of section 6110(b)(1), of the Internal Revenue Code of 1986, as added by this section. 26 USC 6103.

SEC. 522. AUTHORITY TO POSTPONE CERTAIN TAX-RELATED DEADLINES BY REASON OF Y2K FAILURES. 26 USC 7508A note.

(a) **IN GENERAL.**—In the case of a taxpayer determined by the Secretary of the Treasury (or the Secretary's delegate) to be affected by a Y2K failure, the Secretary may disregard a period of up to 90 days in determining, under the internal revenue laws, in respect of any tax liability (including any interest, penalty, additional amount, or addition to the tax) of such taxpayer—

(1) whether any of the acts described in paragraph (1) of section 7508(a) of the Internal Revenue Code of 1986 (without regard to the exceptions in parentheses in subparagraphs (A) and (B)) were performed within the time prescribed therefor; and

(2) the amount of any credit or refund.

(b) **APPLICABILITY OF CERTAIN RULES.**—For purposes of this section, rules similar to the rules of subsections (b) and (e) of section 7508 of the Internal Revenue Code of 1986 shall apply.

SEC. 523. INCLUSION OF CERTAIN VACCINES AGAINST STREPTOCOCCUS PNEUMONIAE TO LIST OF TAXABLE VACCINES.

(a) **INCLUSION OF VACCINES.**—

(1) **IN GENERAL.**—Section 4132(a)(1) of the Internal Revenue Code of 1986 (defining taxable vaccine) is amended by adding at the end the following new subparagraph: 26 USC 4132.

“(L) Any conjugate vaccine against streptococcus pneumoniae.”

(2) **EFFECTIVE DATE.**—

(A) **SALES.**—The amendment made by this subsection shall apply to vaccine sales after the date of the enactment of this Act, but shall not take effect if subsection (b) does not take effect. 26 USC 4132 note.

(B) **DELIVERIES.**—For purposes of subparagraph (A), in the case of sales on or before the date described in such subparagraph for which delivery is made after such date, the delivery date shall be considered the sale date.

(b) **VACCINE TAX AND TRUST FUND AMENDMENTS.**—

(1) Sections 1503 and 1504 of the Vaccine Injury Compensation Program Modification Act (and the amendments made by such sections) are hereby repealed. 26 USC 4132 and note, 9510 and note.

(2) Subparagraph (A) of section 9510(c)(1) of such Code is amended by striking “August 5, 1997” and inserting “December 31, 1999”. 26 USC 9510.

26 USC 4132 note.

(3) The amendments made by this subsection shall take effect as if included in the provisions of the Omnibus Consolidated and Emergency Supplemental Appropriations Act, 1999 to which they relate.

Deadline.

(c) REPORT.—Not later than January 31, 2000, the Comptroller General of the United States shall prepare and submit a report to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate on the operation of the Vaccine Injury Compensation Trust Fund and on the adequacy of such Fund to meet future claims made under the Vaccine Injury Compensation Program.

SEC. 524. DELAY IN EFFECTIVE DATE OF REQUIREMENT FOR APPROVED DIESEL OR KEROSENE TERMINALS.

26 USC 4041 note.

Paragraph (2) of section 1032(f) of the Taxpayer Relief Act of 1997 is amended by striking “July 1, 2000” and inserting “January 1, 2002”.

7 USC 7212 note.

SEC. 525. PRODUCTION FLEXIBILITY CONTRACT PAYMENTS.

Any option to accelerate the receipt of any payment under a production flexibility contract which is payable under the Federal Agriculture Improvement and Reform Act of 1996 (7 U.S.C. 7200 et seq.), as in effect on the date of the enactment of this Act, shall be disregarded in determining the taxable year for which such payment is properly includible in gross income for purposes of the Internal Revenue Code of 1986.

Subtitle C—Revenue Offsets

PART I—GENERAL PROVISIONS

SEC. 531. MODIFICATION OF ESTIMATED TAX SAFE HARBOR.

26 USC 6654.

(a) IN GENERAL.—The table contained in clause (i) of section 6654(d)(1)(C) of the Internal Revenue Code of 1986 (relating to limitation on use of preceding year’s tax) is amended by striking the items relating to 1999 and 2000 and inserting the following new items:

| | |
|-------------|-------|
| “1999 | 108.6 |
| 2000 | 110”. |

Applicability. 26 USC 6654.

(b) EFFECTIVE DATE.—The amendment made by this section shall apply with respect to any installment payment for taxable years beginning after December 31, 1999.

SEC. 532. CLARIFICATION OF TAX TREATMENT OF INCOME AND LOSS ON DERIVATIVES.

26 USC 1221.

(a) IN GENERAL.—Section 1221 of the Internal Revenue Code of 1986 (defining capital assets) is amended—

(1) by striking “For purposes” and inserting the following:

“(a) IN GENERAL.—For purposes”;

(2) by striking the period at the end of paragraph (5) and inserting a semicolon; and

(3) by adding at the end the following:

“(6) any commodities derivative financial instrument held by a commodities derivatives dealer, unless—

“(A) it is established to the satisfaction of the Secretary that such instrument has no connection to the activities of such dealer as a dealer, and

“(B) such instrument is clearly identified in such dealer’s records as being described in subparagraph (A) before the close of the day on which it was acquired, originated, or entered into (or such other time as the Secretary may by regulations prescribe);

“(7) any hedging transaction which is clearly identified as such before the close of the day on which it was acquired, originated, or entered into (or such other time as the Secretary may by regulations prescribe); or

“(8) supplies of a type regularly used or consumed by the taxpayer in the ordinary course of a trade or business of the taxpayer.

“(b) DEFINITIONS AND SPECIAL RULES.—

“(1) COMMODITIES DERIVATIVE FINANCIAL INSTRUMENTS.—

For purposes of subsection (a)(6)—

“(A) COMMODITIES DERIVATIVES DEALER.—The term ‘commodities derivatives dealer’ means a person which regularly offers to enter into, assume, offset, assign, or terminate positions in commodities derivative financial instruments with customers in the ordinary course of a trade or business.

“(B) COMMODITIES DERIVATIVE FINANCIAL INSTRUMENT.—

“(i) IN GENERAL.—The term ‘commodities derivative financial instrument’ means any contract or financial instrument with respect to commodities (other than a share of stock in a corporation, a beneficial interest in a partnership or trust, a note, bond, debenture, or other evidence of indebtedness, or a section 1256 contract (as defined in section 1256(b)), the value or settlement price of which is calculated by or determined by reference to a specified index.

“(ii) SPECIFIED INDEX.—The term ‘specified index’ means any one or more or any combination of—

“(I) a fixed rate, price, or amount, or

“(II) a variable rate, price, or amount,

which is based on any current, objectively determinable financial or economic information with respect to commodities which is not within the control of any of the parties to the contract or instrument and is not unique to any of the parties’ circumstances.

“(2) HEDGING TRANSACTION.—

“(A) IN GENERAL.—For purposes of this section, the term ‘hedging transaction’ means any transaction entered into by the taxpayer in the normal course of the taxpayer’s trade or business primarily—

“(i) to manage risk of price changes or currency fluctuations with respect to ordinary property which is held or to be held by the taxpayer,

“(ii) to manage risk of interest rate or price changes or currency fluctuations with respect to borrowings made or to be made, or ordinary obligations incurred or to be incurred, by the taxpayer, or

“(iii) to manage such other risks as the Secretary may prescribe in regulations.

- Regulations. “(B) TREATMENT OF NONIDENTIFICATION OR IMPROPER IDENTIFICATION OF HEDGING TRANSACTIONS.—Notwithstanding subsection (a)(7), the Secretary shall prescribe regulations to properly characterize any income, gain, expense, or loss arising from a transaction—
- “ (i) which is a hedging transaction but which was not identified as such in accordance with subsection (a)(7), or
- “ (ii) which was so identified but is not a hedging transaction.
- “(3) REGULATIONS.—The Secretary shall prescribe such regulations as are appropriate to carry out the purposes of paragraph (6) and (7) of subsection (a) in the case of transactions involving related parties.”.
- (b) MANAGEMENT OF RISK.—
- 26 USC 475. (1) Section 475(c)(3) of such Code is amended by striking “reduces” and inserting “manages”.
- 26 USC 871. (2) Section 871(h)(4)(C)(iv) of such Code is amended by striking “to reduce” and inserting “to manage”.
- 26 USC 988. (3) Clauses (i) and (ii) of section 988(d)(2)(A) of such Code are each amended by striking “to reduce” and inserting “to manage”.
- 26 USC 1256. (4) Paragraph (2) of section 1256(e) of such Code is amended to read as follows:
- “(2) DEFINITION OF HEDGING TRANSACTION.—For purposes of this subsection, the term ‘hedging transaction’ means any hedging transaction (as defined in section 1221(b)(2)(A)) if, before the close of the day on which such transaction was entered into (or such earlier time as the Secretary may prescribe by regulations), the taxpayer clearly identifies such transaction as being a hedging transaction.”.
- (c) CONFORMING AMENDMENTS.—
- (1) Each of the following sections of such Code are amended by striking “section 1221” and inserting “section 1221(a)”:
- 26 USC 170. (A) Section 170(e)(3)(A).
- (B) Section 170(e)(4)(B).
- 26 USC 367. (C) Section 367(a)(3)(B)(i).
- 26 USC 818. (D) Section 818(c)(3).
- 26 USC 865. (E) Section 865(i)(1).
- 26 USC 1092. (F) Section 1092(a)(3)(B)(ii)(II).
- 26 USC 1231. (G) Subparagraphs (C) and (D) of section 1231(b)(1).
- 26 USC 1234. (H) Section 1234(a)(3)(A).
- (2) Each of the following sections of such Code are amended by striking “section 1221(1)” and inserting “section 1221(a)(1)”:
- 26 USC 198. (A) Section 198(c)(1)(A)(i).
- 26 USC 263. (B) Section 263A(b)(2)(A).
- 26 USC 267. (C) Clauses (i) and (iii) of section 267(f)(3)(B).
- 26 USC 341. (D) Section 341(d)(3).
- 26 USC 543. (E) Section 543(a)(1)(D)(i).
- 26 USC 751. (F) Section 751(d)(1).
- 26 USC 775. (G) Section 775(c).
- 26 USC 856. (H) Section 856(c)(2)(D).
- (I) Section 856(c)(3)(C).
- (J) Section 856(e)(1).
- (K) Section 856(j)(2)(B).
- 26 USC 857. (L) Section 857(b)(4)(B)(i).
- (M) Section 857(b)(6)(B)(iii).

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| (N) Section 864(c)(4)(B)(iii). | 26 USC 864. |
| (O) Section 864(d)(3)(A). | |
| (P) Section 864(d)(6)(A). | |
| (Q) Section 954(c)(1)(B)(iii). | 26 USC 954. |
| (R) Section 995(b)(1)(C). | 26 USC 995. |
| (S) Section 1017(b)(3)(E)(i). | 26 USC 1017. |
| (T) Section 1362(d)(3)(C)(ii). | 26 USC 1362. |
| (U) Section 4662(c)(2)(C). | 26 USC 4662. |
| (V) Section 7704(c)(3). | 26 USC 7704. |
| (W) Section 7704(d)(1)(D). | |
| (X) Section 7704(d)(1)(G). | |
| (Y) Section 7704(d)(5). | |

(3) Section 818(b)(2) of such Code is amended by striking “section 1221(2)” and inserting “section 1221(a)(2)”. 26 USC 818.

(4) Section 1397B(e)(2) of such Code is amended by striking “section 1221(4)” and inserting “section 1221(a)(4)”. 26 USC 1397B note.

(d) EFFECTIVE DATE.—The amendments made by this section shall apply to any instrument held, acquired, or entered into, any transaction entered into, and supplies held or acquired on or after the date of the enactment of this Act. 26 USC 170 note.

SEC. 533. EXPANSION OF REPORTING OF CANCELLATION OF INDEBTEDNESS INCOME.

(a) IN GENERAL.—Paragraph (2) of section 6050P(c) of the Internal Revenue Code of 1986 (relating to definitions and special rules) is amended by striking “and” at the end of subparagraph (B), by striking the period at the end of subparagraph (C) and inserting “, and”, and by inserting after subparagraph (C) the following new subparagraph: 26 USC 6050P.

“(D) any organization a significant trade or business of which is the lending of money.”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to discharges of indebtedness after December 31, 1999. 26 USC 6050P note.

SEC. 534. LIMITATION ON CONVERSION OF CHARACTER OF INCOME FROM CONSTRUCTIVE OWNERSHIP TRANSACTIONS.

(a) IN GENERAL.—Part IV of subchapter P of chapter 1 of the Internal Revenue Code of 1986 (relating to special rules for determining capital gains and losses) is amended by inserting after section 1259 the following new section:

“SEC. 1260. GAINS FROM CONSTRUCTIVE OWNERSHIP TRANSACTIONS. 26 USC 1260.

“(a) IN GENERAL.—If the taxpayer has gain from a constructive ownership transaction with respect to any financial asset and such gain would (without regard to this section) be treated as a long-term capital gain—

“(1) such gain shall be treated as ordinary income to the extent that such gain exceeds the net underlying long-term capital gain, and

“(2) to the extent such gain is treated as a long-term capital gain after the application of paragraph (1), the determination of the capital gain rate (or rates) applicable to such gain under section 1(h) shall be determined on the basis of the respective rate (or rates) that would have been applicable to the net underlying long-term capital gain.

“(b) INTEREST CHARGE ON DEFERRAL OF GAIN RECOGNITION.—

“(1) IN GENERAL.—If any gain is treated as ordinary income for any taxable year by reason of subsection (a)(1), the tax

imposed by this chapter for such taxable year shall be increased by the amount of interest determined under paragraph (2) with respect to each prior taxable year during any portion of which the constructive ownership transaction was open. Any amount payable under this paragraph shall be taken into account in computing the amount of any deduction allowable to the taxpayer for interest paid or accrued during such taxable year.

“(2) AMOUNT OF INTEREST.—The amount of interest determined under this paragraph with respect to a prior taxable year is the amount of interest which would have been imposed under section 6601 on the underpayment of tax for such year which would have resulted if the gain (which is treated as ordinary income by reason of subsection (a)(1)) had been included in gross income in the taxable years in which it accrued (determined by treating the income as accruing at a constant rate equal to the applicable Federal rate as in effect on the day the transaction closed). The period during which such interest shall accrue shall end on the due date (without extensions) for the return of tax imposed by this chapter for the taxable year in which such transaction closed.

“(3) APPLICABLE FEDERAL RATE.—For purposes of paragraph (2), the applicable Federal rate is the applicable Federal rate determined under section 1274(d) (compounded semiannually) which would apply to a debt instrument with a term equal to the period the transaction was open.

“(4) NO CREDITS AGAINST INCREASE IN TAX.—Any increase in tax under paragraph (1) shall not be treated as tax imposed by this chapter for purposes of determining—

“(A) the amount of any credit allowable under this chapter, or

“(B) the amount of the tax imposed by section 55.

“(c) FINANCIAL ASSET.—For purposes of this section—

“(1) IN GENERAL.—The term ‘financial asset’ means—

“(A) any equity interest in any pass-thru entity, and

“(B) to the extent provided in regulations—

“(i) any debt instrument, and

“(ii) any stock in a corporation which is not a pass-thru entity.

“(2) PASS-THRU ENTITY.—For purposes of paragraph (1), the term ‘pass-thru entity’ means—

“(A) a regulated investment company,

“(B) a real estate investment trust,

“(C) an S corporation,

“(D) a partnership,

“(E) a trust,

“(F) a common trust fund,

“(G) a passive foreign investment company (as defined in section 1297 without regard to subsection (e) thereof),

“(H) a foreign personal holding company,

“(I) a foreign investment company (as defined in section 1246(b)), and

“(J) a REMIC.

“(d) CONSTRUCTIVE OWNERSHIP TRANSACTION.—For purposes of this section—

“(1) IN GENERAL.—The taxpayer shall be treated as having entered into a constructive ownership transaction with respect to any financial asset if the taxpayer—

“(A) holds a long position under a notional principal contract with respect to the financial asset,

“(B) enters into a forward or futures contract to acquire the financial asset,

“(C) is the holder of a call option, and is the grantor of a put option, with respect to the financial asset and such options have substantially equal strike prices and substantially contemporaneous maturity dates, or

“(D) to the extent provided in regulations prescribed by the Secretary, enters into one or more other transactions (or acquires one or more positions) that have substantially the same effect as a transaction described in any of the preceding subparagraphs.

“(2) EXCEPTION FOR POSITIONS WHICH ARE MARKED TO MARKET.—This section shall not apply to any constructive ownership transaction if all of the positions which are part of such transaction are marked to market under any provision of this title or the regulations thereunder.

“(3) LONG POSITION UNDER NOTIONAL PRINCIPAL CONTRACT.—A person shall be treated as holding a long position under a notional principal contract with respect to any financial asset if such person—

“(A) has the right to be paid (or receive credit for) all or substantially all of the investment yield (including appreciation) on such financial asset for a specified period, and

“(B) is obligated to reimburse (or provide credit for) all or substantially all of any decline in the value of such financial asset.

“(4) FORWARD CONTRACT.—The term ‘forward contract’ means any contract to acquire in the future (or provide or receive credit for the future value of) any financial asset.

“(e) NET UNDERLYING LONG-TERM CAPITAL GAIN.—For purposes of this section, in the case of any constructive ownership transaction with respect to any financial asset, the term ‘net underlying long-term capital gain’ means the aggregate net capital gain that the taxpayer would have had if—

“(1) the financial asset had been acquired for fair market value on the date such transaction was opened and sold for fair market value on the date such transaction was closed, and

“(2) only gains and losses that would have resulted from the deemed ownership under paragraph (1) were taken into account.

The amount of the net underlying long-term capital gain with respect to any financial asset shall be treated as zero unless the amount thereof is established by clear and convincing evidence.

“(f) SPECIAL RULE WHERE TAXPAYER TAKES DELIVERY.—Except as provided in regulations prescribed by the Secretary, if a constructive ownership transaction is closed by reason of taking delivery, this section shall be applied as if the taxpayer had sold all the contracts, options, or other positions which are part of such transaction for fair market value on the closing date. The amount of gain recognized under the preceding sentence shall not exceed the

amount of gain treated as ordinary income under subsection (a). Proper adjustments shall be made in the amount of any gain or loss subsequently realized for gain recognized and treated as ordinary income under this subsection.

“(g) REGULATIONS.—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this section, including regulations—

“(1) to permit taxpayers to mark to market constructive ownership transactions in lieu of applying this section, and

“(2) to exclude certain forward contracts which do not convey substantially all of the economic return with respect to a financial asset.”.

(b) CLERICAL AMENDMENT.—The table of sections for part IV of subchapter P of chapter 1 of such Code is amended by adding at the end the following new item:

“Sec. 1260. Gains from constructive ownership transactions.”.

26 USC 1260
note.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to transactions entered into after July 11, 1999.

SEC. 535. TREATMENT OF EXCESS PENSION ASSETS USED FOR RETIREE HEALTH BENEFITS.

(a) EXTENSION.—

26 USC 420.

(1) IN GENERAL.—Paragraph (5) of section 420(b) of the Internal Revenue Code of 1986 (relating to expiration) is amended by striking “in any taxable year beginning after December 31, 2000” and inserting “made after December 31, 2005”.

(2) CONFORMING AMENDMENTS.—

(A) Section 101(e)(3) of the Employee Retirement Income Security Act of 1974 (29 U.S.C. 1021(e)(3)) is amended by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.

(B) Section 403(c)(1) of such Act (29 U.S.C. 1103(c)(1)) is amended by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.

(C) Paragraph (13) of section 408(b) of such Act (29 U.S.C. 1108(b)(13)) is amended—

(i) by striking “in a taxable year beginning before January 1, 2001” and inserting “made before January 1, 2006”; and

(ii) by striking “January 1, 1995” and inserting “the date of the enactment of the Tax Relief Extension Act of 1999”.

(b) APPLICATION OF MINIMUM COST REQUIREMENTS.—

(1) IN GENERAL.—Paragraph (3) of section 420(c) of the Internal Revenue Code of 1986 is amended to read as follows:

“(3) MINIMUM COST REQUIREMENTS.—

“(A) IN GENERAL.—The requirements of this paragraph are met if each group health plan or arrangement under which applicable health benefits are provided provides that the applicable employer cost for each taxable year during the cost maintenance period shall not be less than the higher of the applicable employer costs for each of the

2 taxable years immediately preceding the taxable year of the qualified transfer.

“(B) APPLICABLE EMPLOYER COST.—For purposes of this paragraph, the term ‘applicable employer cost’ means, with respect to any taxable year, the amount determined by dividing—

“(i) the qualified current retiree health liabilities of the employer for such taxable year determined—

“(I) without regard to any reduction under subsection (e)(1)(B), and

“(II) in the case of a taxable year in which there was no qualified transfer, in the same manner as if there had been such a transfer at the end of the taxable year, by

“(ii) the number of individuals to whom coverage for applicable health benefits was provided during such taxable year.

“(C) ELECTION TO COMPUTE COST SEPARATELY.—An employer may elect to have this paragraph applied separately with respect to individuals eligible for benefits under title XVIII of the Social Security Act at any time during the taxable year and with respect to individuals not so eligible.

“(D) COST MAINTENANCE PERIOD.—For purposes of this paragraph, the term ‘cost maintenance period’ means the period of 5 taxable years beginning with the taxable year in which the qualified transfer occurs. If a taxable year is in two or more overlapping cost maintenance periods, this paragraph shall be applied by taking into account the highest applicable employer cost required to be provided under subparagraph (A) for such taxable year.

“(E) REGULATIONS.—The Secretary shall prescribe such regulations as may be necessary to prevent an employer who significantly reduces retiree health coverage during the cost maintenance period from being treated as satisfying the minimum cost requirement of this subsection.”.

(2) CONFORMING AMENDMENTS.—

(A) Clause (iii) of section 420(b)(1)(C) of such Code is amended by striking “benefits” and inserting “cost”. 26 USC 420.

(B) Subparagraph (D) of section 420(e)(1) of such Code is amended by striking “and shall not be subject to the minimum benefit requirements of subsection (c)(3)” and inserting “or in calculating applicable employer cost under subsection (c)(3)(B)”.

(c) EFFECTIVE DATES.—

(1) IN GENERAL.—The amendments made by this section shall apply to qualified transfers occurring after the date of the enactment of this Act.

(2) TRANSITION RULE.—If the cost maintenance period for any qualified transfer after the date of the enactment of this Act includes any portion of a benefit maintenance period for any qualified transfer on or before such date, the amendments made by subsection (b) shall not apply to such portion of the cost maintenance period (and such portion shall be treated as a benefit maintenance period).

26 USC 420 note.

**SEC. 536. MODIFICATION OF INSTALLMENT METHOD AND REPEAL OF
INSTALLMENT METHOD FOR ACCRUAL METHOD TAX-
PAYERS.**

(a) REPEAL OF INSTALLMENT METHOD FOR ACCRUAL BASIS TAX-
PAYERS.—

26 USC 453.

(1) IN GENERAL.—Subsection (a) of section 453 of the Internal Revenue Code of 1986 (relating to installment method) is amended to read as follows:

“(a) USE OF INSTALLMENT METHOD.—

“(1) IN GENERAL.—Except as otherwise provided in this section, income from an installment sale shall be taken into account for purposes of this title under the installment method.

“(2) ACCRUAL METHOD TAXPAYER.—The installment method shall not apply to income from an installment sale if such income would be reported under an accrual method of accounting without regard to this section. The preceding sentence shall not apply to a disposition described in subparagraph (A) or (B) of subsection (1)(2).”.

(2) CONFORMING AMENDMENTS.—Sections 453(d)(1), 453(i)(1), and 453(k) of such Code are each amended by striking “(a)” each place it appears and inserting “(a)(1)”.

26 USC 453A.

(b) MODIFICATION OF PLEDGE RULES.—Paragraph (4) of section 453A(d) of such Code (relating to pledges, etc., of installment obligations) is amended by adding at the end the following: “A payment shall be treated as directly secured by an interest in an installment obligation to the extent an arrangement allows the taxpayer to satisfy all or a portion of the indebtedness with the installment obligation.”.

26 USC 453 note.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to sales or other dispositions occurring on or after the date of the enactment of this Act.

**SEC. 537. DENIAL OF CHARITABLE CONTRIBUTION DEDUCTION FOR
TRANSFERS ASSOCIATED WITH SPLIT-DOLLAR INSUR-
ANCE ARRANGEMENTS.**

26 USC 170.

(a) IN GENERAL.—Subsection (f) of section 170 of the Internal Revenue Code of 1986 (relating to disallowance of deduction in certain cases and special rules) is amended by adding at the end the following new paragraph:

“(10) SPLIT-DOLLAR LIFE INSURANCE, ANNUITY, AND ENDOW-
MENT CONTRACTS.—

“(A) IN GENERAL.—Nothing in this section or in section 545(b)(2), 556(b)(2), 642(c), 2055, 2106(a)(2), or 2522 shall be construed to allow a deduction, and no deduction shall be allowed, for any transfer to or for the use of an organization described in subsection (c) if in connection with such transfer—

“(i) the organization directly or indirectly pays, or has previously paid, any premium on any personal benefit contract with respect to the transferor, or

“(ii) there is an understanding or expectation that any person will directly or indirectly pay any premium on any personal benefit contract with respect to the transferor.

“(B) PERSONAL BENEFIT CONTRACT.—For purposes of subparagraph (A), the term ‘personal benefit contract’ means, with respect to the transferor, any life insurance,

annuity, or endowment contract if any direct or indirect beneficiary under such contract is the transferor, any member of the transferor's family, or any other person (other than an organization described in subsection (c)) designated by the transferor.

“(C) APPLICATION TO CHARITABLE REMAINDER TRUSTS.—

In the case of a transfer to a trust referred to in subparagraph (E), references in subparagraphs (A) and (F) to an organization described in subsection (c) shall be treated as a reference to such trust.

“(D) EXCEPTION FOR CERTAIN ANNUITY CONTRACTS.—

If, in connection with a transfer to or for the use of an organization described in subsection (c), such organization incurs an obligation to pay a charitable gift annuity (as defined in section 501(m)) and such organization purchases any annuity contract to fund such obligation, persons receiving payments under the charitable gift annuity shall not be treated for purposes of subparagraph (B) as indirect beneficiaries under such contract if—

“(i) such organization possesses all of the incidents of ownership under such contract,

“(ii) such organization is entitled to all the payments under such contract, and

“(iii) the timing and amount of payments under such contract are substantially the same as the timing and amount of payments to each such person under such obligation (as such obligation is in effect at the time of such transfer).

“(E) EXCEPTION FOR CERTAIN CONTRACTS HELD BY CHARITABLE REMAINDER TRUSTS.—A person shall not be treated for purposes of subparagraph (B) as an indirect beneficiary under any life insurance, annuity, or endowment contract held by a charitable remainder annuity trust or a charitable remainder unitrust (as defined in section 664(d)) solely by reason of being entitled to any payment referred to in paragraph (1)(A) or (2)(A) of section 664(d) if—

“(i) such trust possesses all of the incidents of ownership under such contract, and

“(ii) such trust is entitled to all the payments under such contract.

“(F) EXCISE TAX ON PREMIUMS PAID.—

“(i) IN GENERAL.—There is hereby imposed on any organization described in subsection (c) an excise tax equal to the premiums paid by such organization on any life insurance, annuity, or endowment contract if the payment of premiums on such contract is in connection with a transfer for which a deduction is not allowable under subparagraph (A), determined without regard to when such transfer is made.

“(ii) PAYMENTS BY OTHER PERSONS.—For purposes of clause (i), payments made by any other person pursuant to an understanding or expectation referred to in subparagraph (A) shall be treated as made by the organization.

“(iii) REPORTING.—Any organization on which tax is imposed by clause (i) with respect to any premium shall file an annual return which includes—

“(I) the amount of such premiums paid during the year and the name and TIN of each beneficiary under the contract to which the premium relates, and

“(II) such other information as the Secretary may require.

The penalties applicable to returns required under section 6033 shall apply to returns required under this clause. Returns required under this clause shall be furnished at such time and in such manner as the Secretary shall by forms or regulations require.

“(iv) CERTAIN RULES TO APPLY.—The tax imposed by this subparagraph shall be treated as imposed by chapter 42 for purposes of this title other than subchapter B of chapter 42.

“(G) SPECIAL RULE WHERE STATE REQUIRES SPECIFICATION OF CHARITABLE GIFT ANNUITANT IN CONTRACT.—In the case of an obligation to pay a charitable gift annuity referred to in subparagraph (D) which is entered into under the laws of a State which requires, in order for the charitable gift annuity to be exempt from insurance regulation by such State, that each beneficiary under the charitable gift annuity be named as a beneficiary under an annuity contract issued by an insurance company authorized to transact business in such State, the requirements of clauses (i) and (ii) of subparagraph (D) shall be treated as met if—

“(i) such State law requirement was in effect on February 8, 1999,

“(ii) each such beneficiary under the charitable gift annuity is a bona fide resident of such State at the time the obligation to pay a charitable gift annuity is entered into, and

“(iii) the only persons entitled to payments under such contract are persons entitled to payments as beneficiaries under such obligation on the date such obligation is entered into.

“(H) MEMBER OF FAMILY.—For purposes of this paragraph, an individual’s family consists of the individual’s grandparents, the grandparents of such individual’s spouse, the lineal descendants of such grandparents, and any spouse of such a lineal descendant.

“(I) REGULATIONS.—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this paragraph, including regulations to prevent the avoidance of such purposes.”.

26 USC 170 note.

(b) EFFECTIVE DATES.—

(1) IN GENERAL.—Except as otherwise provided in this section, the amendment made by this section shall apply to transfers made after February 8, 1999.

(2) EXCISE TAX.—Except as provided in paragraph (3) of this subsection, section 170(f)(10)(F) of the Internal Revenue Code of 1986 (as added by this section) shall apply to premiums paid after the date of the enactment of this Act.

(3) REPORTING.—Clause (iii) of such section 170(f)(10)(F) shall apply to premiums paid after February 8, 1999 (determined as if the tax imposed by such section applies to premiums paid after such date).

SEC. 538. DISTRIBUTIONS BY A PARTNERSHIP TO A CORPORATE PARTNER OF STOCK IN ANOTHER CORPORATION.

(a) IN GENERAL.—Section 732 of the Internal Revenue Code of 1986 (relating to basis of distributed property other than money) is amended by adding at the end the following new subsection:

26 USC 732.

“(f) CORRESPONDING ADJUSTMENT TO BASIS OF ASSETS OF A DISTRIBUTED CORPORATION CONTROLLED BY A CORPORATE PARTNER.—

“(1) IN GENERAL.—If—

“(A) a corporation (hereafter in this subsection referred to as the ‘corporate partner’) receives a distribution from a partnership of stock in another corporation (hereafter in this subsection referred to as the ‘distributed corporation’),

“(B) the corporate partner has control of the distributed corporation immediately after the distribution or at any time thereafter, and

“(C) the partnership’s adjusted basis in such stock immediately before the distribution exceeded the corporate partner’s adjusted basis in such stock immediately after the distribution,

then an amount equal to such excess shall be applied to reduce (in accordance with subsection (c)) the basis of property held by the distributed corporation at such time (or, if the corporate partner does not control the distributed corporation at such time, at the time the corporate partner first has such control).

“(2) EXCEPTION FOR CERTAIN DISTRIBUTIONS BEFORE CONTROL ACQUIRED.—Paragraph (1) shall not apply to any distribution of stock in the distributed corporation if—

“(A) the corporate partner does not have control of such corporation immediately after such distribution, and

“(B) the corporate partner establishes to the satisfaction of the Secretary that such distribution was not part of a plan or arrangement to acquire control of the distributed corporation.

“(3) LIMITATIONS ON BASIS REDUCTION.—

“(A) IN GENERAL.—The amount of the reduction under paragraph (1) shall not exceed the amount by which the sum of the aggregate adjusted bases of the property and the amount of money of the distributed corporation exceeds the corporate partner’s adjusted basis in the stock of the distributed corporation.

“(B) REDUCTION NOT TO EXCEED ADJUSTED BASIS OF PROPERTY.—No reduction under paragraph (1) in the basis of any property shall exceed the adjusted basis of such property (determined without regard to such reduction).

“(4) GAIN RECOGNITION WHERE REDUCTION LIMITED.—If the amount of any reduction under paragraph (1) (determined after the application of paragraph (3)(A)) exceeds the aggregate adjusted bases of the property of the distributed corporation—

“(A) such excess shall be recognized by the corporate partner as long-term capital gain, and

“(B) the corporate partner’s adjusted basis in the stock of the distributed corporation shall be increased by such excess.

“(5) CONTROL.—For purposes of this subsection, the term ‘control’ means ownership of stock meeting the requirements of section 1504(a)(2).

“(6) INDIRECT DISTRIBUTIONS.—For purposes of paragraph (1), if a corporation acquires (other than in a distribution from a partnership) stock the basis of which is determined (by reason of being distributed from a partnership) in whole or in part by reference to subsection (a)(2) or (b), the corporation shall be treated as receiving a distribution of such stock from a partnership.

“(7) SPECIAL RULE FOR STOCK IN CONTROLLED CORPORATION.—If the property held by a distributed corporation is stock in a corporation which the distributed corporation controls, this subsection shall be applied to reduce the basis of the property of such controlled corporation. This subsection shall be reapplied to any property of any controlled corporation which is stock in a corporation which it controls.

“(8) REGULATIONS.—The Secretary shall prescribe such regulations as may be necessary to carry out the purposes of this subsection, including regulations to avoid double counting and to prevent the abuse of such purposes.”

26 USC 732 note.

(b) EFFECTIVE DATES.—

(1) IN GENERAL.—Except as provided in paragraph (2), the amendment made by this section shall apply to distributions made after July 14, 1999.

(2) PARTNERSHIPS IN EXISTENCE ON JULY 14, 1999.—In the case of a corporation which is a partner in a partnership as of July 14, 1999, the amendment made by this section shall apply to any distribution made (or treated as made) to such partner from such partnership after June 30, 2001, except that this paragraph shall not apply to any distribution after the date of the enactment of this Act unless the partner makes an election to have this paragraph apply to such distribution on the partner’s return of Federal income tax for the taxable year in which such distribution occurs.

PART II—PROVISIONS RELATING TO REAL ESTATE INVESTMENT TRUSTS

Subpart A—Treatment of Income and Services Provided by Taxable REIT Subsidiaries

SEC. 541. MODIFICATIONS TO ASSET DIVERSIFICATION TEST.

26 USC 856.

(a) IN GENERAL.—Subparagraph (B) of section 856(c)(4) of the Internal Revenue Code of 1986 is amended to read as follows:

“(B)(i) not more than 25 percent of the value of its total assets is represented by securities (other than those includible under subparagraph (A)),

“(ii) not more than 20 percent of the value of its total assets is represented by securities of one or more taxable REIT subsidiaries, and

“(iii) except with respect to a taxable REIT subsidiary and securities includible under subparagraph (A)—

“(I) not more than 5 percent of the value of its total assets is represented by securities of any one issuer,

“(II) the trust does not hold securities possessing more than 10 percent of the total voting power of the outstanding securities of any one issuer, and

“(III) the trust does not hold securities having a value of more than 10 percent of the total value of the outstanding securities of any one issuer.”.

(b) EXCEPTION FOR STRAIGHT DEBT SECURITIES.—Subsection (c) of section 856 of such Code is amended by adding at the end the following new paragraph:

“(7) STRAIGHT DEBT SAFE HARBOR IN APPLYING PARAGRAPH

(4).—Securities of an issuer which are straight debt (as defined in section 1361(c)(5) without regard to subparagraph (B)(iii) thereof) shall not be taken into account in applying paragraph (4)(B)(ii)(III) if—

“(A) the issuer is an individual, or

“(B) the only securities of such issuer which are held by the trust or a taxable REIT subsidiary of the trust are straight debt (as so defined), or

“(C) the issuer is a partnership and the trust holds at least a 20 percent profits interest in the partnership.”.

SEC. 542. TREATMENT OF INCOME AND SERVICES PROVIDED BY TAXABLE REIT SUBSIDIARIES.

(a) INCOME FROM TAXABLE REIT SUBSIDIARIES NOT TREATED AS IMPERMISSIBLE TENANT SERVICE INCOME.—Clause (i) of section 856(d)(7)(C) of the Internal Revenue Code of 1986 (relating to exceptions to impermissible tenant service income) is amended by inserting “or through a taxable REIT subsidiary of such trust” after “income”.

(b) CERTAIN INCOME FROM TAXABLE REIT SUBSIDIARIES NOT EXCLUDED FROM RENTS FROM REAL PROPERTY.—

(1) IN GENERAL.—Subsection (d) of section 856 of such Code (relating to rents from real property defined) is amended by adding at the end the following new paragraphs:

“(8) SPECIAL RULE FOR TAXABLE REIT SUBSIDIARIES.—For purposes of this subsection, amounts paid to a real estate investment trust by a taxable REIT subsidiary of such trust shall not be excluded from rents from real property by reason of paragraph (2)(B) if the requirements of either of the following subparagraphs are met:

“(A) LIMITED RENTAL EXCEPTION.—The requirements of this subparagraph are met with respect to any property if at least 90 percent of the leased space of the property is rented to persons other than taxable REIT subsidiaries of such trust and other than persons described in section 856(d)(2)(B). The preceding sentence shall apply only to the extent that the amounts paid to the trust as rents from real property (as defined in paragraph (1) without regard to paragraph (2)(B)) from such property are substantially comparable to such rents made by the other tenants of the trust’s property for comparable space.

“(B) EXCEPTION FOR CERTAIN LODGING FACILITIES.—The requirements of this subparagraph are met with respect to an interest in real property which is a qualified

lodging facility leased by the trust to a taxable REIT subsidiary of the trust if the property is operated on behalf of such subsidiary by a person who is an eligible independent contractor.

“(9) ELIGIBLE INDEPENDENT CONTRACTOR.—For purposes of paragraph (8)(B)—

“(A) IN GENERAL.—The term ‘eligible independent contractor’ means, with respect to any qualified lodging facility, any independent contractor if, at the time such contractor enters into a management agreement or other similar service contract with the taxable REIT subsidiary to operate the facility, such contractor (or any related person) is actively engaged in the trade or business of operating qualified lodging facilities for any person who is not a related person with respect to the real estate investment trust or the taxable REIT subsidiary.

“(B) SPECIAL RULES.—Solely for purposes of this paragraph and paragraph (8)(B), a person shall not fail to be treated as an independent contractor with respect to any qualified lodging facility by reason of any of the following:

“(i) The taxable REIT subsidiary bears the expenses for the operation of the facility pursuant to the management agreement or other similar service contract.

“(ii) The taxable REIT subsidiary receives the revenues from the operation of such facility, net of expenses for such operation and fees payable to the operator pursuant to such agreement or contract.

“(iii) The real estate investment trust receives income from such person with respect to another property that is attributable to a lease of such other property to such person that was in effect as of the later of—

“(I) January 1, 1999, or

“(II) the earliest date that any taxable REIT subsidiary of such trust entered into a management agreement or other similar service contract with such person with respect to such qualified lodging facility.

“(C) RENEWALS, ETC., OF EXISTING LEASES.—For purposes of subparagraph (B)(iii)—

“(i) a lease shall be treated as in effect on January 1, 1999, without regard to its renewal after such date, so long as such renewal is pursuant to the terms of such lease as in effect on whichever of the dates under subparagraph (B)(iii) is the latest, and

“(ii) a lease of a property entered into after whichever of the dates under subparagraph (B)(iii) is the latest shall be treated as in effect on such date if—

“(I) on such date, a lease of such property from the trust was in effect, and

“(II) under the terms of the new lease, such trust receives a substantially similar or lesser benefit in comparison to the lease referred to in subclause (I).

“(D) QUALIFIED LODGING FACILITY.—For purposes of this paragraph—

“(i) IN GENERAL.—The term ‘qualified lodging facility’ means any lodging facility unless wagering activities are conducted at or in connection with such facility by any person who is engaged in the business of accepting wagers and who is legally authorized to engage in such business at or in connection with such facility.

“(ii) LODGING FACILITY.—The term ‘lodging facility’ means a hotel, motel, or other establishment more than one-half of the dwelling units in which are used on a transient basis.

“(iii) CUSTOMARY AMENITIES AND FACILITIES.—The term ‘lodging facility’ includes customary amenities and facilities operated as part of, or associated with, the lodging facility so long as such amenities and facilities are customary for other properties of a comparable size and class owned by other owners unrelated to such real estate investment trust.

“(E) OPERATE INCLUDES MANAGE.—References in this paragraph to operating a property shall be treated as including a reference to managing the property.

“(F) RELATED PERSON.—Persons shall be treated as related to each other if such persons are treated as a single employer under subsection (a) or (b) of section 52.”.

(2) CONFORMING AMENDMENT.—Subparagraph (B) of section 856(d)(2) of such Code is amended by inserting “except as provided in paragraph (8),” after “(B)”.

(3) DETERMINING RENTS FROM REAL PROPERTY.—

(A)(i) Paragraph (1) of section 856(d) of such Code is amended by striking “adjusted bases” each place it occurs and inserting “fair market values”.

(ii) The amendment made by this subparagraph shall apply to taxable years beginning after December 31, 2000.

(B)(i) Clause (i) of section 856(d)(2)(B) of such Code is amended by striking “number” and inserting “value”.

(ii) The amendment made by this subparagraph shall apply to amounts received or accrued in taxable years beginning after December 31, 2000, except for amounts paid pursuant to leases in effect on July 12, 1999, or pursuant to a binding contract in effect on such date and at all times thereafter.

Applicability.
Effective date.

26 USC 856 note.

26 USC 856 note.

SEC. 543. TAXABLE REIT SUBSIDIARY.

(a) IN GENERAL.—Section 856 of the Internal Revenue Code of 1986 is amended by adding at the end the following new subsection:

“(1) TAXABLE REIT SUBSIDIARY.—For purposes of this part—

“(1) IN GENERAL.—The term ‘taxable REIT subsidiary’ means, with respect to a real estate investment trust, a corporation (other than a real estate investment trust) if—

“(A) such trust directly or indirectly owns stock in such corporation, and

“(B) such trust and such corporation jointly elect that such corporation shall be treated as a taxable REIT subsidiary of such trust for purposes of this part.

Such an election, once made, shall be irrevocable unless both such trust and corporation consent to its revocation. Such election, and any revocation thereof, may be made without the consent of the Secretary.

“(2) THIRTY-FIVE PERCENT OWNERSHIP IN ANOTHER TAXABLE REIT SUBSIDIARY.—The term ‘taxable REIT subsidiary’ includes, with respect to any real estate investment trust, any corporation (other than a real estate investment trust) with respect to which a taxable REIT subsidiary of such trust owns directly or indirectly—

“(A) securities possessing more than 35 percent of the total voting power of the outstanding securities of such corporation, or

“(B) securities having a value of more than 35 percent of the total value of the outstanding securities of such corporation.

The preceding sentence shall not apply to a qualified REIT subsidiary (as defined in subsection (i)(2)). The rule of section 856(c)(7) shall apply for purposes of subparagraph (B).

“(3) EXCEPTIONS.—The term ‘taxable REIT subsidiary’ shall not include—

“(A) any corporation which directly or indirectly operates or manages a lodging facility or a health care facility, and

“(B) any corporation which directly or indirectly provides to any other person (under a franchise, license, or otherwise) rights to any brand name under which any lodging facility or health care facility is operated.

Subparagraph (B) shall not apply to rights provided to an eligible independent contractor to operate or manage a lodging facility if such rights are held by such corporation as a franchisee, licensee, or in a similar capacity and such lodging facility is either owned by such corporation or is leased to such corporation from the real estate investment trust.

“(4) DEFINITIONS.—For purposes of paragraph (3)—

“(A) LODGING FACILITY.—The term ‘lodging facility’ has the meaning given to such term by paragraph (9)(D)(ii).

“(B) HEALTH CARE FACILITY.—The term ‘health care facility’ has the meaning given to such term by subsection (e)(6)(D)(ii).”.

(b) CONFORMING AMENDMENT.—Paragraph (2) of section 856(i) of such Code is amended by adding at the end the following new sentence: “Such term shall not include a taxable REIT subsidiary.”.

SEC. 544. LIMITATION ON EARNINGS STRIPPING.

26 USC 163.

Paragraph (3) of section 163(j) of the Internal Revenue Code of 1986 (relating to limitation on deduction for interest on certain indebtedness) is amended by striking “and” at the end of subparagraph (A), by striking the period at the end of subparagraph (B) and inserting “, and”, and by adding at the end the following new subparagraph:

“(C) any interest paid or accrued (directly or indirectly) by a taxable REIT subsidiary (as defined in section 856(l)) of a real estate investment trust to such trust.”.

SEC. 545. 100 PERCENT TAX ON IMPROPERLY ALLOCATED AMOUNTS.

(a) IN GENERAL.—Subsection (b) of section 857 of the Internal Revenue Code of 1986 (relating to method of taxation of real estate

investment trusts and holders of shares or certificates of beneficial interest) is amended by redesignating paragraphs (7) and (8) as paragraphs (8) and (9), respectively, and by inserting after paragraph (6) the following new paragraph:

“(7) INCOME FROM REDETERMINED RENTS, REDETERMINED DEDUCTIONS, AND EXCESS INTEREST.—

“(A) IMPOSITION OF TAX.—There is hereby imposed for each taxable year of the real estate investment trust a tax equal to 100 percent of redetermined rents, redetermined deductions, and excess interest.

“(B) REDETERMINED RENTS.—

“(i) IN GENERAL.—The term ‘redetermined rents’ means rents from real property (as defined in subsection 856(d)) the amount of which would (but for subparagraph (E)) be reduced on distribution, apportionment, or allocation under section 482 to clearly reflect income as a result of services furnished or rendered by a taxable REIT subsidiary of the real estate investment trust to a tenant of such trust.

“(ii) EXCEPTION FOR CERTAIN SERVICES.—Clause (i) shall not apply to amounts received directly or indirectly by a real estate investment trust for services described in paragraph (1)(B) or (7)(C)(i) of section 856(d).

“(iii) EXCEPTION FOR DE MINIMIS AMOUNTS.—Clause (i) shall not apply to amounts described in section 856(d)(7)(A) with respect to a property to the extent such amounts do not exceed the one percent threshold described in section 856(d)(7)(B) with respect to such property.

“(iv) EXCEPTION FOR COMPARABLY PRICED SERVICES.—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if—

“(I) such subsidiary renders a significant amount of similar services to persons other than such trust and tenants of such trust who are unrelated (within the meaning of section 856(d)(8)(F)) to such subsidiary, trust, and tenants, but

“(II) only to the extent the charge for such service so rendered is substantially comparable to the charge for the similar services rendered to persons referred to in subclause (I).

“(v) EXCEPTION FOR CERTAIN SEPARATELY CHARGED SERVICES.—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if—

“(I) the rents paid to the trust by tenants (leasing at least 25 percent of the net leasable space in the trust’s property) who are not receiving such service from such subsidiary are substantially comparable to the rents paid by tenants leasing comparable space who are receiving such service from such subsidiary, and

“(II) the charge for such service from such subsidiary is separately stated.

“(vi) EXCEPTION FOR CERTAIN SERVICES BASED ON SUBSIDIARY’S INCOME FROM THE SERVICES.—Clause (i) shall not apply to any service rendered by a taxable REIT subsidiary of a real estate investment trust to a tenant of such trust if the gross income of such subsidiary from such service is not less than 150 percent of such subsidiary’s direct cost in furnishing or rendering the service.

“(vii) EXCEPTIONS GRANTED BY SECRETARY.—The Secretary may waive the tax otherwise imposed by subparagraph (A) if the trust establishes to the satisfaction of the Secretary that rents charged to tenants were established on an arms’ length basis even though a taxable REIT subsidiary of the trust provided services to such tenants.

“(C) REDETERMINED DEDUCTIONS.—The term ‘redetermined deductions’ means deductions (other than redetermined rents) of a taxable REIT subsidiary of a real estate investment trust if the amount of such deductions would (but for subparagraph (E)) be decreased on distribution, apportionment, or allocation under section 482 to clearly reflect income as between such subsidiary and such trust.

“(D) EXCESS INTEREST.—The term ‘excess interest’ means any deductions for interest payments by a taxable REIT subsidiary of a real estate investment trust to such trust to the extent that the interest payments are in excess of a rate that is commercially reasonable.

“(E) COORDINATION WITH SECTION 482.—The imposition of tax under subparagraph (A) shall be in lieu of any distribution, apportionment, or allocation under section 482.

“(F) REGULATORY AUTHORITY.—The Secretary shall prescribe such regulations as may be necessary or appropriate to carry out the purposes of this paragraph. Until the Secretary prescribes such regulations, real estate investment trusts and their taxable REIT subsidiaries may base their allocations on any reasonable method.”

(b) AMOUNT SUBJECT TO TAX NOT REQUIRED TO BE DISTRIBUTED.—Subparagraph (E) of section 857(b)(2) of such Code (relating to real estate investment trust taxable income) is amended by striking “paragraph (5)” and inserting “paragraphs (5) and (7)”.

26 USC 856 note. **SEC. 546. EFFECTIVE DATE.**

(a) IN GENERAL.—The amendments made by this subpart shall apply to taxable years beginning after December 31, 2000.

(b) TRANSITIONAL RULES RELATED TO SECTION 541.—

(1) EXISTING ARRANGEMENTS.—

(A) IN GENERAL.—Except as otherwise provided in this paragraph, the amendment made by section 541 shall not apply to a real estate investment trust with respect to—

(i) securities of a corporation held directly or indirectly by such trust on July 12, 1999;

(ii) securities of a corporation held by an entity on July 12, 1999, if such trust acquires control of such entity pursuant to a written binding contract in effect on such date and at all times thereafter before such acquisition;

(iii) securities received by such trust (or a successor) in exchange for, or with respect to, securities described in clause (i) or (ii) in a transaction in which gain or loss is not recognized; and

(iv) securities acquired directly or indirectly by such trust as part of a reorganization (as defined in section 368(a)(1) of the Internal Revenue Code of 1986) with respect to such trust if such securities are described in clause (i), (ii), or (iii) with respect to any other real estate investment trust.

(B) NEW TRADE OR BUSINESS OR SUBSTANTIAL NEW ASSETS.—Subparagraph (A) shall cease to apply to securities of a corporation as of the first day after July 12, 1999, on which such corporation engages in a substantial new line of business, or acquires any substantial asset, other than—

(i) pursuant to a binding contract in effect on such date and at all times thereafter before the acquisition of such asset;

(ii) in a transaction in which gain or loss is not recognized by reason of section 1031 or 1033 of the Internal Revenue Code of 1986; or

(iii) in a reorganization (as so defined) with another corporation the securities of which are described in paragraph (1)(A) of this subsection.

(C) LIMITATION ON TRANSITION RULES.—Subparagraph (A) shall cease to apply to securities of a corporation held, acquired, or received, directly or indirectly, by a real estate investment trust as of the first day after July 12, 1999, on which such trust acquires any additional securities of such corporation other than—

(i) pursuant to a binding contract in effect on July 12, 1999, and at all times thereafter; or

(ii) in a reorganization (as so defined) with another corporation the securities of which are described in paragraph (1)(A) of this subsection.

(2) TAX-FREE CONVERSION.—If—

(A) at the time of an election for a corporation to become a taxable REIT subsidiary, the amendment made by section 541 does not apply to such corporation by reason of paragraph (1); and

(B) such election first takes effect before January 1, 2004,

such election shall be treated as a reorganization qualifying under section 368(a)(1)(A) of such Code.

SEC. 547. STUDY RELATING TO TAXABLE REIT SUBSIDIARIES.

26 USC 856 note.

The Secretary of the Treasury shall conduct a study to determine how many taxable REIT subsidiaries are in existence and the aggregate amount of taxes paid by such subsidiaries. The Secretary shall submit a report to the Congress describing the results of such study.

Subpart B—Health Care REITs

SEC. 551. HEALTH CARE REITS.

(a) SPECIAL FORECLOSURE RULE FOR HEALTH CARE PROPERTIES.—Subsection (e) of section 856 of the Internal Revenue Code of 1986 (relating to special rules for foreclosure property) is amended by adding at the end the following new paragraph:

26 USC 856.

“(6) SPECIAL RULE FOR QUALIFIED HEALTH CARE PROPERTIES.—For purposes of this subsection—

“(A) ACQUISITION AT EXPIRATION OF LEASE.—The term ‘foreclosure property’ shall include any qualified health care property acquired by a real estate investment trust as the result of the termination of a lease of such property (other than a termination by reason of a default, or the imminence of a default, on the lease).

“(B) GRACE PERIOD.—In the case of a qualified health care property which is foreclosure property solely by reason of subparagraph (A), in lieu of applying paragraphs (2) and (3)—

“(i) the qualified health care property shall cease to be foreclosure property as of the close of the second taxable year after the taxable year in which such trust acquired such property, and

“(ii) if the real estate investment trust establishes to the satisfaction of the Secretary that an extension of the grace period in clause (i) is necessary to the orderly leasing or liquidation of the trust’s interest in such qualified health care property, the Secretary may grant one or more extensions of the grace period for such qualified health care property.

Any such extension shall not extend the grace period beyond the close of the 6th year after the taxable year in which such trust acquired such qualified health care property.

“(C) INCOME FROM INDEPENDENT CONTRACTORS.—For purposes of applying paragraph (4)(C) with respect to qualified health care property which is foreclosure property by reason of subparagraph (A) or paragraph (1), income derived or received by the trust from an independent contractor shall be disregarded to the extent such income is attributable to—

“(i) any lease of property in effect on the date the real estate investment trust acquired the qualified health care property (without regard to its renewal after such date so long as such renewal is pursuant to the terms of such lease as in effect on such date), or

“(ii) any lease of property entered into after such date if—

“(I) on such date, a lease of such property from the trust was in effect, and

“(II) under the terms of the new lease, such trust receives a substantially similar or lesser benefit in comparison to the lease referred to in subclause (I).

“(D) QUALIFIED HEALTH CARE PROPERTY.—

“(i) IN GENERAL.—The term ‘qualified health care property’ means any real property (including interests therein), and any personal property incident to such real property, which—

“(I) is a health care facility, or

“(II) is necessary or incidental to the use of a health care facility.

“(ii) HEALTH CARE FACILITY.—For purposes of clause (i), the term ‘health care facility’ means a hospital, nursing facility, assisted living facility, congregate care facility, qualified continuing care facility (as defined in section 7872(g)(4)), or other licensed facility which extends medical or nursing or ancillary services to patients and which, immediately before the termination, expiration, default, or breach of the lease of or mortgage secured by such facility, was operated by a provider of such services which was eligible for participation in the medicare program under title XVIII of the Social Security Act with respect to such facility.”.

(b) EFFECTIVE DATE.—The amendment made by this section shall apply to taxable years beginning after December 31, 2000. 26 USC 856 note.

Subpart C—Conformity With Regulated Investment Company Rules

SEC. 556. CONFORMITY WITH REGULATED INVESTMENT COMPANY RULES.

(a) DISTRIBUTION REQUIREMENT.—Clauses (i) and (ii) of section 857(a)(1)(A) of the Internal Revenue Code of 1986 (relating to requirements applicable to real estate investment trusts) are each amended by striking “95 percent (90 percent for taxable years beginning before January 1, 1980)” and inserting “90 percent”. 26 USC 857.

(b) IMPOSITION OF TAX.—Clause (i) of section 857(b)(5)(A) of such Code (relating to imposition of tax in case of failure to meet certain requirements) is amended by striking “95 percent (90 percent in the case of taxable years beginning before January 1, 1980)” and inserting “90 percent”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2000. 26 USC 857 note.

Subpart D—Clarification of Exception From Impermissible Tenant Service Income

SEC. 561. CLARIFICATION OF EXCEPTION FOR INDEPENDENT OPERATORS.

(a) IN GENERAL.—Paragraph (3) of section 856(d) of the Internal Revenue Code of 1986 (relating to independent contractor defined) is amended by adding at the end the following flush sentence: “In the event that any class of stock of either the real estate investment trust or such person is regularly traded on an established securities market, only persons who own, directly or indirectly, more than 5 percent of such class of stock shall be taken into account as owning any of the stock of such class for purposes of applying the 35 percent limitation set forth in subparagraph (B) (but all of the outstanding stock 26 USC 856.

of such class shall be considered outstanding in order to compute the denominator for purpose of determining the applicable percentage of ownership).”

26 USC 856 note.

(b) EFFECTIVE DATE.—The amendment made by this section shall apply to taxable years beginning after December 31, 2000.

Subpart E—Modification of Earnings and Profits Rules

SEC. 566. MODIFICATION OF EARNINGS AND PROFITS RULES.

(a) RULES FOR DETERMINING WHETHER REGULATED INVESTMENT COMPANY HAS EARNINGS AND PROFITS FROM NON-RIC YEAR.—

26 USC 852.

(1) IN GENERAL.—Subsection (c) of section 852 of the Internal Revenue Code of 1986 is amended by adding at the end the following new paragraph:

“(3) DISTRIBUTIONS TO MEET REQUIREMENTS OF SUBSECTION (a)(2)(B).—Any distribution which is made in order to comply with the requirements of subsection (a)(2)(B)—

“(A) shall be treated for purposes of this subsection and subsection (a)(2)(B) as made from earnings and profits which, but for the distribution, would result in a failure to meet such requirements (and allocated to such earnings on a first-in, first-out basis), and

“(B) to the extent treated under subparagraph (A) as made from accumulated earnings and profits, shall not be treated as a distribution for purposes of subsection (b)(2)(D) and section 855.”

26 USC 857.

(2) CONFORMING AMENDMENT.—Subparagraph (A) of section 857(d)(3) of such Code is amended to read as follows:

“(A) shall be treated for purposes of this subsection and subsection (a)(2)(B) as made from earnings and profits which, but for the distribution, would result in a failure to meet such requirements (and allocated to such earnings on a first-in, first-out basis), and”.

(b) CLARIFICATION OF APPLICATION OF REIT SPILLOVER DIVIDEND RULES TO DISTRIBUTIONS TO MEET QUALIFICATION REQUIREMENT.—Subparagraph (B) of section 857(d)(3) of such Code is amended by inserting before the period “and section 858”.

(c) APPLICATION OF DEFICIENCY DIVIDEND PROCEDURES.—Paragraph (1) of section 852(e) of such Code is amended by adding at the end the following new sentence: “If the determination under subparagraph (A) is solely as a result of the failure to meet the requirements of subsection (a)(2), the preceding sentence shall also apply for purposes of applying subsection (a)(2) to the non-RIC year and the amount referred to in paragraph (2)(A)(i) shall be the portion of the accumulated earnings and profits which resulted in such failure.”

26 USC 852 note.

(d) EFFECTIVE DATE.—The amendments made by this section shall apply to distributions after December 31, 2000.

Subpart F—Modification of Estimated Tax Rules

SEC. 571. MODIFICATION OF ESTIMATED TAX RULES FOR CLOSELY HELD REAL ESTATE INVESTMENT TRUSTS.

26 USC 6655.

(a) IN GENERAL.—Subsection (e) of section 6655 of the Internal Revenue Code of 1986 (relating to estimated tax by corporations) is amended by adding at the end the following new paragraph:

“(5) TREATMENT OF CERTAIN REIT DIVIDENDS.—

“(A) IN GENERAL.—Any dividend received from a closely held real estate investment trust by any person which owns (after application of subsections (d)(5) and (l)(3)(B) of section 856) 10 percent or more (by vote or value) of the stock or beneficial interests in the trust shall be taken into account in computing annualized income installments under paragraph (2) in a manner similar to the manner under which partnership income inclusions are taken into account.

“(B) CLOSELY HELD REIT.—For purposes of subparagraph (A), the term ‘closely held real estate investment trust’ means a real estate investment trust with respect to which 5 or fewer persons own (after application of subsections (d)(5) and (l)(3)(B) of section 856) 50 percent or more (by vote or value) of the stock or beneficial interests in the trust.”

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall apply to estimated tax payments due on or after December 15, 1999.

26 USC 6655
note.

Approved December 17, 1999.

LEGISLATIVE HISTORY—H.R. 1180 (S. 331):

HOUSE REPORTS: Nos. 106-220, Pt. 1 (Comm. on Commerce) and 106-478 (Comm. of Conference).

SENATE REPORTS: No. 106-37 accompanying S. 331 (Comm. on Finance).

CONGRESSIONAL RECORD, Vol. 145 (1999):

Oct. 19, considered and passed House.

Oct. 21, considered and passed Senate, amended, in lieu of S. 331.

Nov. 18, House agreed to conference report.

Nov. 19, Senate agreed to conference report.

WEEKLY COMPILATION OF PRESIDENTIAL DOCUMENTS, Vol. 35 (1999):

Dec. 17, Presidential remarks and statement.



Remarks on Signing the Ticket to Work and Work Incentives Improvement Act of 1999

December 17, 1999

Thank you. Senator Kennedy, Senator Jeffords, we thank you for your leadership and your remarks today. And Senator Roth, we thank you very much. We know this couldn't have happened without you. And Senator Moynihan, Representative Lazio, thank you, sir. And Representative Waxman and Representative Brown who are here and Representative Dingell who isn't here, I want to thank all of you for your leadership in the House. Give them all a hand. [Applause]

I also want to thank the members of the administration who were particularly active in supporting this bill: Secretary Herman, the co-chair of my task force on the employment of adults with disabilities; Secretary Shalala; Secretary Summers; Social Security Commissioner Apfel. I'd like to thank, in the White House, my Chief of Staff, John Podesta; Chris Jennings; and Jeanne Lambrew, who had a lot to do with this bill, as all of you know.

I want to thank Senator Dole, especially, and through him all the citizens who came forward and made it possible for this to be a genuinely American bill. I want to welcome the members of the Roosevelt family who are here today, particularly Jim and Ann Roosevelt, my longtime friends. And now Jim is a member of this administration, something I'm very proud of.

I want to thank you, Justin Dart, and the members of the disability community who are here, for this and every other issue that we've worked on for over 7 years now. And I want to acknowledge—James Sullivan really spoke for three others who are here—Donna McNamee, Paul Marshall, and Wesley Vinner. I thank them for being up here, because every one of them represents a different, slightly different story of someone who will benefit from this bill, and I thank them for sharing their stories with us.

I think it's kind of interesting, don't you, that Mr. Sullivan from New Hampshire and Senator Jeffords from Vermont are the only two people up here without coats on? [Laughter] This is a warm December day in New England. [Laughter]

Senator Jeffords, you made that remark that President Roosevelt never carried Vermont. You

know, my family communes with the Roosevelts on a regular basis. [Laughter] You may remember that. Eleanor told Hillary last night, "You're forgiven; all is forgiven now." [Laughter] "This wipes the slate clean, this bill does." [Laughter]

John Sweeney, we thank you for being here. And we thank the labor community for their support of this legislation, as well.

I think it is wonderfully fitting that this is the last piece of legislation a President of the United States will sign in the entire 20th century. We do it at this magnificent memorial to Franklin Roosevelt, who from his wheelchair lifted our Nation out of depression and led the free world to victory in World War II, who laid the building blocks for world peace and security that we enjoy today, and accomplished it all as an American with a disability.

In his time, as we all know—and we've had a lot of debates about that in this memorial context—Roosevelt felt he needed to keep his wheelchair from public view. Most people believed being disabled meant being unable, though he proved them very wrong every day. Today, in the spirit of his leadership and the wake of his accomplishments, we move further along on our Nation's marvelous journey of equal opportunity for all.

This is a good time for our country. We're ending the century on a high note, with 20 million new jobs since 1993, the lowest unemployment rate in 30 years, the lowest welfare rolls in 32 years, the lowest poverty rate in 20 years, in February, the longest economic expansion in our entire history. But in spite of this good economic news, we know that three out of four people with significant disabilities are not working. They're ready to work, they're willing to work, and they are very able to work. But as we have heard, they face the daunting barrier of losing their Medicare or Medicaid coverage if they get a job.

For many Americans with disabilities, medical bills, as you just heard from our previous speaker, may cost thousands more than what is typically covered by an employer's private health insurance. For some, including some on this

stage, those medical bills, because of the attendant care services, may add up to more than any reasonable salary a person with disabilities could ever hope to earn.

And yet, quite beyond the human cost of denying people the dignity of work, this defies common sense and economic logic. It doesn't make sense for people to be denied the dignity of work and for the taxpayers to pay the bills, whether they're working or not, and therefore, losing the benefit of the productivity, the contributions to our economy and society, and as you just heard, the tax receipts of working Americans.

Secretary Summers is here. You wouldn't believe how much time we spend arguing over how much longer this economic expansion can go on. How can we keep it going without inflation? How many expansions in the past have been broken because inflation finally burst through and had to be taken down, and that led to a recession?

Well, one way we can keep this economic expansion going is to take it to people and places who aren't part of it. That's what our new markets initiative to poor areas of America is all about. And make no mistake about it, that will be one big objective of this bill. This is an inflation-free way to keep America's economy growing. You are helping every single American, not just Americans with disabilities; every single American will be helped by this legislation today.

But of course, even more compelling than the economic argument is the human one. Today we say with a simple but clear voice, no one should have to choose between taking a job and having health care.

This legislation reorients our policy by saying health care ought to be a tool to getting a job, earning a salary, paying taxes, and living up to one's God-given potential. You don't have to worry about losing Medicare or Medicaid anymore.

This landmark measure will also make a real difference to people who are facing the early onset of diseases like AIDS, muscular dystrophy, Parkinson's, or diabetes. Right now, they may be able to work, but their work conditions are not deemed severe enough to qualify for Medicare. In other words, they may only become eligible for health care when they're no longer able to work. Now the problem is they're uninsurable because of the condition they have, even

though they're not disabled. So they're also in a different kind of double-bind.

With this bill—thanks again to bipartisan support in Congress and to the fact that the Senate Finance Committee and the House Ways and Means Committee found a way to fund it—we are going to have a \$250 million demonstration program that will allow these Americans to buy into the Medicare program, so they can stay on the job and don't have to give it up to get health care when they're perfectly capable of working. This is also a very important feature of this bill.

And finally, both Senator Kennedy and Senator Jeffords mentioned the Ticket to Work legislation that's a part of this bill. This creates long-overdue reforms of the job-training program, so people with disabilities can make their own choices about vocational rehabilitation services, the ones that are best for them.

Taken together, clearly, this is the most significant advancement for people with disabilities since the Americans with Disabilities Act almost a decade ago. It continues our administration's efforts to replace barriers to opportunity with policies based on inclusion, empowerment, and independence.

That's why we reformed welfare, to reward the dignity of work, why we doubled the earned-income tax credit for low-income working people, particularly those with children, raised the minimum wage, enacted the family and medical leave law. This bill takes us another huge step in the right direction of both liberating and rewarding the creative energies of all Americans. But our task isn't done.

I often think it's ironic that, when we have these bill signings, the Presidents get to make the speeches and sign the bills, but the Members of Congress must be sitting out there thinking they did all the work. [Laughter] And in truth, they did the lion's share, and I was proud to support them.

But now it's our turn. We have to make it work in the lives of real people. I have instructed Secretary Shalala, Secretary Herman, and Commissioner Apfel to take immediate action to implement this legislation, to team up with the States advocates, businesses, and others who are crucial to make this bill work.

Now, all of you here who had a hand in this know that the way it's set up, States have a vital role to play. We want to take every opportunity to help every single State in America

take maximum advantage of the new options provided under this legislation. We want to encourage employees to reach out and tap the talented pool of potential workers that are now available. We want to work with all of you to ensure that we effectively get the word out to people who have disabilities so they actually know about the benefits of this legislation.

This is about more than jobs or paychecks—I'll say it again—it's about more than keeping our recovery going. It's fundamentally about the dignity of each human being, about the realization of a quality of opportunity, about recognizing that work is at the heart of the American dream.

In the end, the counsel of Franklin Roosevelt that's etched in the walls of this memorial guides us still. He said, "No country, however rich, can afford the waste of its human resources." That is ever more true as we cross the threshold into the new millennium.

I think Mr. Roosevelt would be proud of all of you today. I think we have honored his life and his legacy. In the new century, America

will realize even more of it's promise because we have unleashed the promise of more Americans.

Congratulations, and God bless you all.

I'd like to ask the Members of Congress and the administration to come up for the bill signing now.

NOTE: The President spoke at 9:55 a.m. at the Franklin Delano Roosevelt Memorial. In his remarks, he referred to James Sullivan, Hudson, NH, who introduced the President, Donna McNamee, Cleveland, OH, Paul Marshall, Wheaton, MD, and Wesley Vinner, Riverdale, MD, citizens who will benefit from the Ticket to Work and Work Incentives Improvement Act; Representative Sherrod Brown; former Senator Bob Dole; Justin Dart, Jr., chairman and founder, Justice For All; Jeanne Lambrew, Senior Health Policy Analyst, National Economic Council; and John J. Sweeney, president, AFL-CIO. H.R. 1180, approved December 17, was assigned Public Law No. 106-170.

Statement on Signing the Ticket to Work and Work Incentives Improvement Act of 1999

December 17, 1999

Today I am pleased to sign into law H.R. 1180, the "Ticket to Work and Work Incentives Improvement Act of 1999." This landmark legislation will remove barriers that have placed many individuals with disabilities in the untenable position of choosing between health care coverage and work. It also improves and expands vocational rehabilitation and employment service options for this talented, but as yet not fully tapped, workforce.

This new law represents one of the most important legislative advances for people with disabilities since the enactment of the Americans with Disabilities Act. I have urged its passage for 2 years and was proud to include full funding for it in my FY 2000 Budget. The enactment of this law well illustrates what we can accomplish when we work together on a bipartisan basis to expand employment opportunities and affordable health-care options.

The Act will ensure that individuals with disabilities have a greater opportunity to participate in the workforce and in the American Dream. It offers new ways for the Federal Government to partner with the States and the private sector to help people with disabilities to work and to keep their health care coverage. Most significantly, H.R. 1180:

- Expands States' ability to provide a Medicaid "buy-in" to individuals with disabilities who return to work.
- Creates a new Medicaid demonstration to assess the effectiveness of providing Medicaid coverage to people whose condition has not yet deteriorated enough to prevent work, but who need health care to prevent or forestall that level of deterioration. This provision will allow States to help those individuals with diseases such as muscular dystrophy, Parkinson's Disease, diabetes, and HIV.

106TH CONGRESS
1ST SESSION

H. R. 3070

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend health care coverage for such beneficiaries, and to make additional miscellaneous amendments relating to Social Security.

IN THE HOUSE OF REPRESENTATIVES

OCTOBER 13, 1999

Mr. HULSHOF (for himself, Mr. ARCHER, Mr. SHAW, Mr. CAMP, Ms. DUNN, Mr. ENGLISH, Mr. FOLEY, Mr. HAYWORTH, Mr. HERGER, Mr. HOUGHTON, Mr. RAMSTAD, Mr. THOMAS, and Mr. WELLER) introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend health care coverage for such beneficiaries, and to make additional miscellaneous amendments relating to Social Security.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

2 (a) **SHORT TITLE.**—This Act may be cited as the
 3 “Ticket to Work and Work Incentives Improvement Act
 4 of 1999”.

5 (b) **TABLE OF CONTENTS.**—The table of contents is
 6 as follows:

Sec. 1. Short title; table of contents.

**TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND
 RELATED PROVISIONS**

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 111. Work activity standard as a basis for review of an individual’s dis-
 abled status.

Sec. 112. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 121. Work incentives outreach program.

Sec. 122. State grants for work incentives assistance to disabled beneficiaries.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 201. Expanding State options under the medicaid program for workers
 with disabilities.

Sec. 202. Extending medicare coverage for OASDI disability benefit recipients.

Sec. 203. Grants to develop and establish State infrastructures to support
 working individuals with disabilities.

Sec. 204. Demonstration of coverage under the medicaid program of workers
 with potentially severe disabilities.

Sec. 205. Election by disabled beneficiaries to suspend medigap insurance when
 covered under a group health plan.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

Sec. 301. Extension of disability insurance program demonstration project au-
 thority.

Sec. 302. Demonstration projects providing for reductions in disability insur-
 ance benefits based on earnings.

Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

Sec. 401. Technical amendments relating to drug addicts and alcoholics.

Sec. 402. Treatment of prisoners.

Sec. 403. Revocation by members of the clergy of exemption from social security coverage.

Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.

Sec. 405. Authorization for State to permit annual wage reports.

Sec. 406. Assessment on attorneys who receive their fees via the Social Security Administration.

Sec. 407. Extension of authority of State medicaid fraud control units.

Sec. 408. Elimination of fraud and abuse associated with certain payments under the medicaid program.

1 **TITLE I—TICKET TO WORK AND**
 2 **SELF-SUFFICIENCY AND RE-**
 3 **LATED PROVISIONS**

4 **Subtitle A—Ticket to Work and**
 5 **Self-Sufficiency**

6 **SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND**
 7 **SELF-SUFFICIENCY PROGRAM.**

8 (a) IN GENERAL.—Part A of title XI of the Social
 9 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
 10 ing after section 1147 (as added by section 8 of the Non-
 11 citizen Benefit Clarification and Other Technical Amend-
 12 ments Act of 1998 (Public Law 105–306; 112 Stat.
 13 2928)) the following:

14 “THE TICKET TO WORK AND SELF-SUFFICIENCY
 15 PROGRAM

16 “SEC. 1148. (a) IN GENERAL.—The Commissioner
 17 of Social Security shall establish a Ticket to Work and
 18 Self-Sufficiency Program, under which a disabled bene-
 19 ficiary may use a ticket to work and self-sufficiency issued
 20 by the Commissioner in accordance with this section to
 21 obtain employment services, vocational rehabilitation serv-

1 ices, or other support services from an employment net-
2 work which is of the beneficiary's choice and which is will-
3 ing to provide such services to such beneficiary.

4 “(b) TICKET SYSTEM.—

5 “(1) DISTRIBUTION OF TICKETS.—The Com-
6 missioner of Social Security may issue a ticket to
7 work and self-sufficiency to disabled beneficiaries for
8 participation in the Program.

9 “(2) ASSIGNMENT OF TICKETS.—A disabled
10 beneficiary holding a ticket to work and self-suffi-
11 ciency may assign the ticket to any employment net-
12 work of the beneficiary's choice which is serving
13 under the Program and is willing to accept the as-
14 signment.

15 “(3) TICKET TERMS.—A ticket issued under
16 paragraph (1) shall consist of a document which evi-
17 dences the Commissioner's agreement to pay (as
18 provided in paragraph (4)) an employment network,
19 which is serving under the Program and to which
20 such ticket is assigned by the beneficiary, for such
21 employment services, vocational rehabilitation serv-
22 ices, and other support services as the employment
23 network may provide to the beneficiary.

24 “(4) PAYMENTS TO EMPLOYMENT NET-
25 WORKS.—The Commissioner shall pay an employ-

1 ment network under the Program in accordance with
2 the outcome payment system under subsection
3 (h)(2) or under the outcome-milestone payment sys-
4 tem under subsection (h)(3) (whichever is elected
5 pursuant to subsection (h)(1)). An employment net-
6 work may not request or receive compensation for
7 such services from the beneficiary.

8 “(c) STATE PARTICIPATION.—

9 “(1) IN GENERAL.—Each State agency admin-
10 istering or supervising the administration of the
11 State plan approved under title I of the Rehabilita-
12 tion Act of 1973 may elect to participate in the Pro-
13 gram as an employment network with respect to a
14 disabled beneficiary. If the State agency does elect
15 to participate in the Program, the State agency also
16 shall elect to be paid under the outcome payment
17 system or the outcome-milestone payment system in
18 accordance with subsection (h)(1). With respect to a
19 disabled beneficiary that the State agency does not
20 elect to have participate in the Program, the State
21 agency shall be paid for services provided to that
22 beneficiary under the system for payment applicable
23 under section 222(d) and subsections (d) and (e) of
24 section 1615. The Commissioner shall provide for
25 periodic opportunities for exercising such elections.

1 “(2) EFFECT OF PARTICIPATION BY STATE
2 AGENCY.—

3 “(A) STATE AGENCIES PARTICIPATING.—

4 In any case in which a State agency described
5 in paragraph (1) elects under that paragraph to
6 participate in the Program, the employment
7 services, vocational rehabilitation services, and
8 other support services which, upon assignment
9 of tickets to work and self-sufficiency, are pro-
10 vided to disabled beneficiaries by the State
11 agency acting as an employment network shall
12 be governed by plans for vocational rehabilita-
13 tion services approved under title I of the Reha-
14 bilitation Act of 1973.

15 “(B) STATE AGENCIES ADMINISTERING
16 MATERNAL AND CHILD HEALTH SERVICES PRO-
17 GRAMS.—Subparagraph (A) shall not apply
18 with respect to any State agency administering
19 a program under title V of this Act.

20 “(3) AGREEMENTS BETWEEN STATE AGENCIES
21 AND EMPLOYMENT NETWORKS.—State agencies and
22 employment networks shall enter into agreements re-
23 garding the conditions under which services will be
24 provided when an individual is referred by an em-
25 ployment network to a State agency for services.

1 The Commissioner of Social Security shall establish
2 by regulations the timeframe within which such
3 agreements must be entered into and the mecha-
4 nisms for dispute resolution between State agencies
5 and employment networks with respect to such
6 agreements.

7 “(d) RESPONSIBILITIES OF THE COMMISSIONER OF
8 SOCIAL SECURITY.—

9 “(1) SELECTION AND QUALIFICATIONS OF PRO-
10 GRAM MANAGERS.—The Commissioner of Social Se-
11 curity shall enter into agreements with 1 or more or-
12 ganizations in the private or public sector for service
13 as a program manager to assist the Commissioner in
14 administering the Program. Any such program man-
15 ager shall be selected by means of a competitive bid-
16 ding process, from among organizations in the pri-
17 vate or public sector with available expertise and ex-
18 perience in the field of vocational rehabilitation or
19 employment services.

20 “(2) TENURE, RENEWAL, AND EARLY TERMI-
21 NATION.—Each agreement entered into under para-
22 graph (1) shall provide for early termination upon
23 failure to meet performance standards which shall be
24 specified in the agreement and which shall be
25 weighted to take into account any performance in

1 prior terms. Such performance standards shall
2 include—

3 “(A) measures for ease of access by bene-
4 ficiaries to services; and

5 “(B) measures for determining the extent
6 to which failures in obtaining services for bene-
7 ficiaries fall within acceptable parameters, as
8 determined by the Commissioner.

9 “(3) PRECLUSION FROM DIRECT PARTICIPA-
10 TION IN DELIVERY OF SERVICES IN OWN SERVICE
11 AREA.—Agreements under paragraph (1) shall
12 preclude—

13 “(A) direct participation by a program
14 manager in the delivery of employment services,
15 vocational rehabilitation services, or other sup-
16 port services to beneficiaries in the service area
17 covered by the program manager’s agreement;
18 and

19 “(B) the holding by a program manager of
20 a financial interest in an employment network
21 or service provider which provides services in a
22 geographic area covered under the program
23 manager’s agreement.

24 “(4) SELECTION OF EMPLOYMENT NET-
25 WORKS.—

1 “(A) IN GENERAL.—The Commissioner
2 shall select and enter into agreements with em-
3 ployment networks for service under the Pro-
4 gram. Such employment networks shall be in
5 addition to State agencies serving as employ-
6 ment networks pursuant to elections under sub-
7 section (c).

8 “(B) ALTERNATE PARTICIPANTS.—In any
9 State where the Program is being implemented,
10 the Commissioner shall enter into an agreement
11 with any alternate participant that is operating
12 under the authority of section 222(d)(2) in the
13 State as of the date of enactment of this section
14 and chooses to serve as an employment network
15 under the Program.

16 “(5) TERMINATION OF AGREEMENTS WITH EM-
17 PLOYMENT NETWORKS.—The Commissioner shall
18 terminate agreements with employment networks for
19 inadequate performance, as determined by the Com-
20 missioner.

21 “(6) QUALITY ASSURANCE.—The Commissioner
22 shall provide for such periodic reviews as are nec-
23 essary to provide for effective quality assurance in
24 the provision of services by employment networks.
25 The Commissioner shall solicit and consider the

1 views of consumers and the program manager under
2 which the employment networks serve and shall con-
3 sult with providers of services to develop perform-
4 ance measurements. The Commissioner shall ensure
5 that the results of the periodic reviews are made
6 available to beneficiaries who are prospective service
7 recipients as they select employment networks. The
8 Commissioner shall ensure that the periodic surveys
9 of beneficiaries receiving services under the Program
10 are designed to measure customer service satisfac-
11 tion.

12 “(7) DISPUTE RESOLUTION.—The Commis-
13 sioner shall provide for a mechanism for resolving
14 disputes between beneficiaries and employment net-
15 works, between program managers and employment
16 networks, and between program managers and pro-
17 viders of services. The Commissioner shall afford a
18 party to such a dispute a reasonable opportunity for
19 a full and fair review of the matter in dispute.

20 “(e) PROGRAM MANAGERS.—

21 “(1) IN GENERAL.—A program manager shall
22 conduct tasks appropriate to assist the Commis-
23 sioner in carrying out the Commissioner’s duties in
24 administering the Program.

1 “(2) RECRUITMENT OF EMPLOYMENT NET-
2 WORKS.—A program manager shall recruit, and rec-
3 ommend for selection by the Commissioner, employ-
4 ment networks for service under the Program. The
5 program manager shall carry out such recruitment
6 and provide such recommendations, and shall mon-
7 itor all employment networks serving in the Program
8 in the geographic area covered under the program
9 manager’s agreement, to the extent necessary and
10 appropriate to ensure that adequate choices of serv-
11 ices are made available to beneficiaries. Employment
12 networks may serve under the Program only pursu-
13 ant to an agreement entered into with the Commis-
14 sioner under the Program incorporating the applica-
15 ble provisions of this section and regulations there-
16 under, and the program manager shall provide and
17 maintain assurances to the Commissioner that pay-
18 ment by the Commissioner to employment networks
19 pursuant to this section is warranted based on com-
20 pliance by such employment networks with the terms
21 of such agreement and this section. The program
22 manager shall not impose numerical limits on the
23 number of employment networks to be recommended
24 pursuant to this paragraph.

1 “(3) FACILITATION OF ACCESS BY BENE-
2 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
3 gram manager shall facilitate access by beneficiaries
4 to employment networks. The program manager
5 shall ensure that each beneficiary is allowed changes
6 in employment networks without being deemed to
7 have rejected services under the Program. When
8 such a change occurs, the program manager shall re-
9 assign the ticket based on the choice of the bene-
10 ficiary. Upon the request of the employment net-
11 work, the program manager shall make a determina-
12 tion of the allocation of the outcome or milestone-
13 outcome payments based on the services provided by
14 each employment network. The program manager
15 shall establish and maintain lists of employment net-
16 works available to beneficiaries and shall make such
17 lists generally available to the public. The program
18 manager shall ensure that all information provided
19 to disabled beneficiaries pursuant to this paragraph
20 is provided in accessible formats.

21 “(4) ENSURING AVAILABILITY OF ADEQUATE
22 SERVICES.—The program manager shall ensure that
23 employment services, vocational rehabilitation serv-
24 ices, and other support services are provided to
25 beneficiaries throughout the geographic area covered

1 under the program manager’s agreement, including
2 rural areas.

3 “(5) REASONABLE ACCESS TO SERVICES.—The
4 program manager shall take such measures as are
5 necessary to ensure that sufficient employment net-
6 works are available and that each beneficiary receiv-
7 ing services under the Program has reasonable ac-
8 cess to employment services, vocational rehabilitation
9 services, and other support services. Services pro-
10 vided under the Program may include case manage-
11 ment, work incentives planning, supported employ-
12 ment, career planning, career plan development, vo-
13 cational assessment, job training, placement, follow-
14 up services, and such other services as may be speci-
15 fied by the Commissioner under the Program. The
16 program manager shall ensure that such services are
17 available in each service area.

18 “(f) EMPLOYMENT NETWORKS.—

19 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
20 WORKS.—

21 “(A) IN GENERAL.—Each employment net-
22 work serving under the Program shall consist of
23 an agency or instrumentality of a State (or a
24 political subdivision thereof) or a private entity,
25 that assumes responsibility for the coordination

1 and delivery of services under the Program to
2 individuals assigning to the employment net-
3 work tickets to work and self-sufficiency issued
4 under subsection (b).

5 “(B) ONE-STOP DELIVERY SYSTEMS.—An
6 employment network serving under the Pro-
7 gram may consist of a one-stop delivery system
8 established under subtitle B of title I of the
9 Workforce Investment Act of 1998.

10 “(C) COMPLIANCE WITH SELECTION CRI-
11 TERIA.—No employment network may serve
12 under the Program unless it meets and main-
13 tains compliance with both general selection cri-
14 teria (such as professional and educational
15 qualifications, where applicable) and specific se-
16 lection criteria (such as substantial expertise
17 and experience in providing relevant employ-
18 ment services and supports).

19 “(D) SINGLE OR ASSOCIATED PROVIDERS
20 ALLOWED.—An employment network shall con-
21 sist of either a single provider of such services
22 or of an association of such providers organized
23 so as to combine their resources into a single
24 entity. An employment network may meet the
25 requirements of subsection (e)(4) by providing

1 services directly, or by entering into agreements
2 with other individuals or entities providing ap-
3 propriate employment services, vocational reha-
4 bilitation services, or other support services.

5 “(2) REQUIREMENTS RELATING TO PROVISION
6 OF SERVICES.—Each employment network serving
7 under the Program shall be required under the
8 terms of its agreement with the Commissioner to—

9 “(A) serve prescribed service areas; and

10 “(B) take such measures as are necessary
11 to ensure that employment services, vocational
12 rehabilitation services, and other support serv-
13 ices provided under the Program by, or under
14 agreements entered into with, the employment
15 network are provided under appropriate indi-
16 vidual work plans meeting the requirements of
17 subsection (g).

18 “(3) ANNUAL FINANCIAL REPORTING.—Each
19 employment network shall meet financial reporting
20 requirements as prescribed by the Commissioner.

21 “(4) PERIODIC OUTCOMES REPORTING.—Each
22 employment network shall prepare periodic reports,
23 on at least an annual basis, itemizing for the covered
24 period specific outcomes achieved with respect to
25 specific services provided by the employment net-

1 work. Such reports shall conform to a national
2 model prescribed under this section. Each employ-
3 ment network shall provide a copy of the latest re-
4 port issued by the employment network pursuant to
5 this paragraph to each beneficiary upon enrollment
6 under the Program for services to be received
7 through such employment network. Upon issuance of
8 each report to each beneficiary, a copy of the report
9 shall be maintained in the files of the employment
10 network. The program manager shall ensure that
11 copies of all such reports issued under this para-
12 graph are made available to the public under reason-
13 able terms.

14 “(g) INDIVIDUAL WORK PLANS.—

15 “(1) REQUIREMENTS.—Each employment net-
16 work shall—

17 “(A) take such measures as are necessary
18 to ensure that employment services, vocational
19 rehabilitation services, and other support serv-
20 ices provided under the Program by, or under
21 agreements entered into with, the employment
22 network are provided under appropriate indi-
23 vidual work plans that meet the requirements of
24 subparagraph (C);

1 “(B) develop and implement each such in-
2 dividual work plan, in partnership with each
3 beneficiary receiving such services, in a manner
4 that affords such beneficiary the opportunity to
5 exercise informed choice in selecting an employ-
6 ment goal and specific services needed to
7 achieve that employment goal;

8 “(C) ensure that each individual work plan
9 includes at least—

10 “(i) a statement of the vocational goal
11 developed with the beneficiary, including,
12 as appropriate, goals for earnings and job
13 advancement;

14 “(ii) a statement of the services and
15 supports that have been deemed necessary
16 for the beneficiary to accomplish that goal;

17 “(iii) a statement of any terms and
18 conditions related to the provision of such
19 services and supports; and

20 “(iv) a statement of understanding re-
21 garding the beneficiary’s rights under the
22 Program (such as the right to retrieve the
23 ticket to work and self-sufficiency if the
24 beneficiary is dissatisfied with the services
25 being provided by the employment net-

1 work) and remedies available to the indi-
2 vidual, including information on the avail-
3 ability of advocacy services and assistance
4 in resolving disputes through the State
5 grant program authorized under section
6 1150;

7 “(D) provide a beneficiary the opportunity
8 to amend the individual work plan if a change
9 in circumstances necessitates a change in the
10 plan; and

11 “(E) make each beneficiary’s individual
12 work plan available to the beneficiary in, as ap-
13 propriate, an accessible format chosen by the
14 beneficiary.

15 “(2) EFFECTIVE UPON WRITTEN APPROVAL.—
16 A beneficiary’s individual work plan shall take effect
17 upon written approval by the beneficiary or a rep-
18 resentative of the beneficiary and a representative of
19 the employment network that, in providing such
20 written approval, acknowledges assignment of the
21 beneficiary’s ticket to work and self-sufficiency.

22 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

23 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
24 PLOYMENT NETWORKS.—

1 “(A) IN GENERAL.—The Program shall
2 provide for payment authorized by the Commis-
3 sioner to employment networks under either an
4 outcome payment system or an outcome-mile-
5 stone payment system. Each employment net-
6 work shall elect which payment system will be
7 utilized by the employment network, and, for
8 such period of time as such election remains in
9 effect, the payment system so elected shall be
10 utilized exclusively in connection with such em-
11 ployment network (except as provided in sub-
12 paragraph (B)).

13 “(B) NO CHANGE IN METHOD OF PAY-
14 MENT FOR BENEFICIARIES WITH TICKETS AL-
15 READY ASSIGNED TO THE EMPLOYMENT NET-
16 WORKS.—Any election of a payment system by
17 an employment network that would result in a
18 change in the method of payment to the em-
19 ployment network for services provided to a
20 beneficiary who is receiving services from the
21 employment network at the time of the election
22 shall not be effective with respect to payment
23 for services provided to that beneficiary and the
24 method of payment previously selected shall
25 continue to apply with respect to such services.

1 “(2) OUTCOME PAYMENT SYSTEM.—

2 “(A) IN GENERAL.—The outcome payment
3 system shall consist of a payment structure gov-
4 erning employment networks electing such sys-
5 tem under paragraph (1)(A) which meets the
6 requirements of this paragraph.

7 “(B) PAYMENTS MADE DURING OUTCOME
8 PAYMENT PERIOD.—The outcome payment sys-
9 tem shall provide for a schedule of payments to
10 an employment network, in connection with
11 each individual who is a beneficiary, for each
12 month, during the individual’s outcome pay-
13 ment period, for which benefits (described in
14 paragraphs (3) and (4) of subsection (k)) are
15 not payable to such individual because of work
16 or earnings.

17 “(C) COMPUTATION OF PAYMENTS TO EM-
18 PLOYMENT NETWORK.—The payment schedule
19 of the outcome payment system shall be de-
20 signed so that—

21 “(i) the payment for each month dur-
22 ing the outcome payment period for which
23 benefits (described in paragraphs (3) and
24 (4) of subsection (k)) are not payable is
25 equal to a fixed percentage of the payment

1 calculation base for the calendar year in
2 which such month occurs; and

3 “(ii) such fixed percentage is set at a
4 percentage which does not exceed 40 per-
5 cent.

6 “(3) OUTCOME-MILESTONE PAYMENT SYS-
7 TEM.—

8 “(A) IN GENERAL.—The outcome-mile-
9 stone payment system shall consist of a pay-
10 ment structure governing employment networks
11 electing such system under paragraph (1)(A)
12 which meets the requirements of this para-
13 graph.

14 “(B) EARLY PAYMENTS UPON ATTAIN-
15 MENT OF MILESTONES IN ADVANCE OF OUT-
16 COME PAYMENT PERIODS.—The outcome-mile-
17 stone payment system shall provide for 1 or
18 more milestones, with respect to beneficiaries
19 receiving services from an employment network
20 under the Program, that are directed toward
21 the goal of permanent employment. Such mile-
22 stones shall form a part of a payment structure
23 that provides, in addition to payments made
24 during outcome payment periods, payments
25 made prior to outcome payment periods in

1 amounts based on the attainment of such mile-
2 stones.

3 “(C) LIMITATION ON TOTAL PAYMENTS TO
4 EMPLOYMENT NETWORK.—The payment sched-
5 ule of the outcome milestone payment system
6 shall be designed so that the total of the pay-
7 ments to the employment network with respect
8 to each beneficiary is less than, on a net
9 present value basis (using an interest rate de-
10 termined by the Commissioner that appro-
11 priately reflects the cost of funds faced by pro-
12 viders), the total amount to which payments to
13 the employment network with respect to the
14 beneficiary would be limited if the employment
15 network were paid under the outcome payment
16 system.

17 “(4) DEFINITIONS.—In this subsection:

18 “(A) PAYMENT CALCULATION BASE.—The
19 term ‘payment calculation base’ means, for any
20 calendar year—

21 “(i) in connection with a title II dis-
22 ability beneficiary, the average disability
23 insurance benefit payable under section
24 223 for all beneficiaries for months during
25 the preceding calendar year; and

1 “(ii) in connection with a title XVI
2 disability beneficiary (who is not concur-
3 rently a title II disability beneficiary), the
4 average payment of supplemental security
5 income benefits based on disability payable
6 under title XVI (excluding State sup-
7 plementation) for months during the pre-
8 ceding calendar year to all beneficiaries
9 who have attained 18 years of age but
10 have not attained 65 years of age.

11 “(B) OUTCOME PAYMENT PERIOD.—The
12 term ‘outcome payment period’ means, in con-
13 nection with any individual who had assigned a
14 ticket to work and self-sufficiency to an employ-
15 ment network under the Program, a period—

16 “(i) beginning with the first month,
17 ending after the date on which such ticket
18 was assigned to the employment network,
19 for which benefits (described in paragraphs
20 (3) and (4) of subsection (k)) are not pay-
21 able to such individual by reason of en-
22 gagement in substantial gainful activity or
23 by reason of earnings from work activity;
24 and

1 “(ii) ending with the 60th month
2 (consecutive or otherwise), ending after
3 such date, for which such benefits are not
4 payable to such individual by reason of en-
5 gagement in substantial gainful activity or
6 by reason of earnings from work activity.

7 “(5) PERIODIC REVIEW AND ALTERATIONS OF
8 PRESCRIBED SCHEDULES.—

9 “(A) PERCENTAGES AND PERIODS.—The
10 Commissioner shall periodically review the per-
11 centage specified in paragraph (2)(C), the total
12 payments permissible under paragraph (3)(C),
13 and the period of time specified in paragraph
14 (4)(B) to determine whether such percentages,
15 such permissible payments, and such period
16 provide an adequate incentive for employment
17 networks to assist beneficiaries to enter the
18 workforce, while providing for appropriate
19 economies. The Commissioner may alter such
20 percentage, such total permissible payments, or
21 such period of time to the extent that the Com-
22 missioner determines, on the basis of the Com-
23 missioner’s review under this paragraph, that
24 such an alteration would better provide the in-

1 centive and economies described in the pre-
2 ceding sentence.

3 “(B) NUMBER AND AMOUNT OF MILE-
4 STONE PAYMENTS.—The Commissioner shall
5 periodically review the number and amounts of
6 milestone payments established by the Commis-
7 sioner pursuant to this section to determine
8 whether they provide an adequate incentive for
9 employment networks to assist beneficiaries to
10 enter the workforce, taking into account infor-
11 mation provided to the Commissioner by pro-
12 gram managers, the Ticket to Work and Work
13 Incentives Advisory Panel established by section
14 101(f) of the Ticket to Work and Work Incen-
15 tives Improvement Act of 1999, and other reli-
16 able sources. The Commissioner may from time
17 to time alter the number and amounts of mile-
18 stone payments initially established by the
19 Commissioner pursuant to this section to the
20 extent that the Commissioner determines that
21 such an alteration would allow an adequate in-
22 centive for employment networks to assist bene-
23 ficiaries to enter the workforce. Such alteration
24 shall be based on information provided to the
25 Commissioner by program managers, the Ticket

1 to Work and Work Incentives Advisory Panel
2 established by section 101(f) of the Ticket to
3 Work and Work Incentives Improvement Act of
4 1999, or other reliable sources.

5 “(C) REPORT ON THE ADEQUACY OF IN-
6 CENTIVES.—The Commissioner shall submit to
7 Congress not later than 36 months after the
8 date of the enactment of the Ticket to Work
9 and Work Incentives Improvement Act of 1999
10 a report with recommendations for a method or
11 methods to adjust payment rates under sub-
12 paragraphs (A) and (B), that would ensure ade-
13 quate incentives for the provision of services by
14 employment networks of—

15 “(i) individuals with a need for ongo-
16 ing support and services;

17 “(ii) individuals with a need for high-
18 cost accommodations;

19 “(iii) individuals who earn a submin-
20 imum wage; and

21 “(iv) individuals who work and receive
22 partial cash benefits.

23 The Commissioner shall consult with the Ticket
24 to Work and Work Incentives Advisory Panel
25 established under section 101(f) of the Ticket

1 to Work and Work Incentives Improvement Act
2 of 1999 during the development and evaluation
3 of the study. The Commissioner shall imple-
4 ment the necessary adjusted payment rates
5 prior to full implementation of the Ticket to
6 Work and Self-Sufficiency Program.

7 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
8 any period for which an individual is using, as defined by
9 the Commissioner, a ticket to work and self-sufficiency
10 issued under this section, the Commissioner (and any ap-
11 plicable State agency) may not initiate a continuing dis-
12 ability review or other review under section 221 of whether
13 the individual is or is not under a disability or a review
14 under title XVI similar to any such review under section
15 221.

16 “(j) AUTHORIZATIONS.—

17 “(1) PAYMENTS TO EMPLOYMENT NET-
18 WORKS.—

19 “(A) TITLE II DISABILITY BENE-
20 FICIARIES.—There are authorized to be trans-
21 ferred from the Federal Old-Age and Survivors
22 Insurance Trust Fund and the Federal Dis-
23 ability Insurance Trust Fund each fiscal year
24 such sums as may be necessary to make pay-
25 ments to employment networks under this sec-

1 tion. Money paid from the Trust Funds under
2 this section with respect to title II disability
3 beneficiaries who are entitled to benefits under
4 section 223 or who are entitled to benefits
5 under section 202(d) on the basis of the wages
6 and self-employment income of such bene-
7 ficiaries, shall be charged to the Federal Dis-
8 ability Insurance Trust Fund, and all other
9 money paid from the Trust Funds under this
10 section shall be charged to the Federal Old-Age
11 and Survivors Insurance Trust Fund.

12 “(B) TITLE XVI DISABILITY BENE-
13 FICIARIES.—Amounts authorized to be appro-
14 priated to the Social Security Administration
15 under section 1601 (as in effect pursuant to the
16 amendments made by section 301 of the Social
17 Security Amendments of 1972) shall include
18 amounts necessary to carry out the provisions
19 of this section with respect to title XVI dis-
20 ability beneficiaries.

21 “(2) ADMINISTRATIVE EXPENSES.—The costs
22 of administering this section (other than payments
23 to employment networks) shall be paid from
24 amounts made available for the administration of
25 title II and amounts made available for the adminis-

1 tration of title XVI, and shall be allocated among
2 such amounts as appropriate.

3 “(k) DEFINITIONS.—In this section:

4 “(1) COMMISSIONER.—The term ‘Commis-
5 sioner’ means the Commissioner of Social Security.

6 “(2) DISABLED BENEFICIARY.—The term ‘dis-
7 abled beneficiary’ means a title II disability bene-
8 ficiary or a title XVI disability beneficiary.

9 “(3) TITLE II DISABILITY BENEFICIARY.—The
10 term ‘title II disability beneficiary’ means an indi-
11 vidual entitled to disability insurance benefits under
12 section 223 or to monthly insurance benefits under
13 section 202 based on such individual’s disability (as
14 defined in section 223(d)). An individual is a title II
15 disability beneficiary for each month for which such
16 individual is entitled to such benefits.

17 “(4) TITLE XVI DISABILITY BENEFICIARY.—
18 The term ‘title XVI disability beneficiary’ means an
19 individual eligible for supplemental security income
20 benefits under title XVI on the basis of blindness
21 (within the meaning of section 1614(a)(2)) or dis-
22 ability (within the meaning of section 1614(a)(3)).
23 An individual is a title XVI disability beneficiary for
24 each month for which such individual is eligible for
25 such benefits.

1 “(5) SUPPLEMENTAL SECURITY INCOME BEN-
2 EFIT.—The term ‘supplemental security income ben-
3 efit under title XVI’ means a cash benefit under sec-
4 tion 1611 or 1619(a), and does not include a State
5 supplementary payment, administered federally or
6 otherwise.

7 “(1) REGULATIONS.—Not later than 1 year after the
8 date of the enactment of the Ticket to Work and Work
9 Incentives Improvement Act of 1999, the Commissioner
10 shall prescribe such regulations as are necessary to carry
11 out the provisions of this section.”.

12 (b) CONFORMING AMENDMENTS.—

13 (1) AMENDMENTS TO TITLE II.—

14 (A) Section 221(i) of the Social Security
15 Act (42 U.S.C. 421(i)) is amended by adding at
16 the end the following:

17 “(5) For suspension of reviews under this subsection
18 in the case of an individual using a ticket to work and
19 self-sufficiency, see section 1148(i).”.

20 (B) Section 222(a) of such Act (42 U.S.C.
21 422(a)) is repealed.

22 (C) Section 222(b) of such Act (42 U.S.C.
23 422(b)) is repealed.

24 (D) Section 225(b)(1) of such Act (42
25 U.S.C. 425(b)(1)) is amended by striking “a

1 program of vocational rehabilitation services”
2 and inserting “a program consisting of the
3 Ticket to Work and Self-Sufficiency Program
4 under section 1148 or another program of voca-
5 tional rehabilitation services, employment serv-
6 ices, or other support services”.

7 (2) AMENDMENTS TO TITLE XVI.—

8 (A) Section 1615(a) of such Act (42
9 U.S.C. 1382d(a)) is amended to read as follows:

10 “SEC. 1615. (a) In the case of any blind or disabled
11 individual who—

12 “(1) has not attained age 16; and

13 “(2) with respect to whom benefits are paid
14 under this title,

15 the Commissioner of Social Security shall make provision
16 for referral of such individual to the appropriate State
17 agency administering the State program under title V.”.

18 (B) Section 1615(c) of such Act (42
19 U.S.C. 1382d(c)) is repealed.

20 (C) Section 1631(a)(6)(A) of such Act (42
21 U.S.C. 1383(a)(6)(A)) is amended by striking
22 “a program of vocational rehabilitation serv-
23 ices” and inserting “a program consisting of
24 the Ticket to Work and Self-Sufficiency Pro-
25 gram under section 1148 or another program of

1 vocational rehabilitation services, employment
2 services, or other support services”.

3 (D) Section 1633(c) of such Act (42
4 U.S.C. 1383b(c)) is amended—

5 (i) by inserting “(1)” after “(c)”; and

6 (ii) by adding at the end the fol-
7 lowing:

8 “(2) For suspension of continuing disability reviews
9 and other reviews under this title similar to reviews under
10 section 221 in the case of an individual using a ticket to
11 work and self-sufficiency, see section 1148(i).”.

12 (c) EFFECTIVE DATE.—Subject to subsection (d),
13 the amendments made by subsections (a) and (b) shall
14 take effect with the first month following 1 year after the
15 date of the enactment of this Act.

16 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

17 (1) IN GENERAL.—Not later than 1 year after
18 the date of the enactment of this Act, the Commis-
19 sioner of Social Security shall commence implemen-
20 tation of the amendments made by this section
21 (other than paragraphs (1)(C) and (2)(B) of sub-
22 section (b)) in graduated phases at phase-in sites se-
23 lected by the Commissioner. Such phase-in sites
24 shall be selected so as to ensure, prior to full imple-
25 mentation of the Ticket to Work and Self-Suffi-

1 ciency Program, the development and refinement of
2 referral processes, payment systems, computer link-
3 ages, management information systems, and admin-
4 istrative processes necessary to provide for full im-
5 plementation of such amendments. Subsection (c)
6 shall apply with respect to paragraphs (1)(C) and
7 (2)(B) of subsection (b) without regard to this sub-
8 section.

9 (2) REQUIREMENTS.—Implementation of the
10 Program at each phase-in site shall be carried out
11 on a wide enough scale to permit a thorough evalua-
12 tion of the alternative methods under consideration,
13 so as to ensure that the most efficacious methods
14 are determined and in place for full implementation
15 of the Program on a timely basis.

16 (3) FULL IMPLEMENTATION.—The Commis-
17 sioner shall ensure that ability to provide tickets and
18 services to individuals under the Program exists in
19 every State as soon as practicable on or after the ef-
20 fective date specified in subsection (c) but not later
21 than 3 years after such date.

22 (4) ONGOING EVALUATION OF PROGRAM.—

23 (A) IN GENERAL.—The Commissioner
24 shall design and conduct a series of evaluations
25 to assess the cost-effectiveness of activities car-

1 ried out under this section and the amendments
2 made thereby, as well as the effects of this sec-
3 tion and the amendments made thereby on
4 work outcomes for beneficiaries receiving tickets
5 to work and self-sufficiency under the Program.

6 (B) CONSULTATION.—The Commissioner
7 shall design and carry out the series of evalua-
8 tions after receiving relevant advice from ex-
9 perts in the fields of disability, vocational reha-
10 bilitation, and program evaluation and individ-
11 uals using tickets to work and self-sufficiency
12 under the Program and consulting with the
13 Ticket to Work and Work Incentives Advisory
14 Panel established under section 101(f), the
15 Comptroller General of the United States, other
16 agencies of the Federal Government, and pri-
17 vate organizations with appropriate expertise.

18 (C) METHODOLOGY.—

19 (i) IMPLEMENTATION.—The Commis-
20 sioner, in consultation with the Ticket to
21 Work and Work Incentives Advisory Panel
22 established under section 101(f), shall en-
23 sure that plans for evaluations and data
24 collection methods under the Program are

1 appropriately designed to obtain detailed
2 employment information.

3 (ii) SPECIFIC MATTERS TO BE AD-
4 DRESSED.—Each such evaluation shall ad-
5 dress (but is not limited to)—

6 (I) the annual cost (including net
7 cost) of the Program and the annual
8 cost (including net cost) that would
9 have been incurred in the absence of
10 the Program;

11 (II) the determinants of return to
12 work, including the characteristics of
13 beneficiaries in receipt of tickets
14 under the Program;

15 (III) the types of employment
16 services, vocational rehabilitation serv-
17 ices, and other support services fur-
18 nished to beneficiaries in receipt of
19 tickets under the Program who return
20 to work and to those who do not re-
21 turn to work;

22 (IV) the duration of employment
23 services, vocational rehabilitation serv-
24 ices, and other support services fur-
25 nished to beneficiaries in receipt of

1 tickets under the Program who return
2 to work and the duration of such serv-
3 ices furnished to those who do not re-
4 turn to work and the cost to employ-
5 ment networks of furnishing such
6 services;

7 (V) the employment outcomes,
8 including wages, occupations, benefits,
9 and hours worked, of beneficiaries
10 who return to work after receiving
11 tickets under the Program and those
12 who return to work without receiving
13 such tickets;

14 (VI) the characteristics of indi-
15 viduals in possession of tickets under
16 the Program who are not accepted for
17 services and, to the extent reasonably
18 determinable, the reasons for which
19 such beneficiaries were not accepted
20 for services;

21 (VII) the characteristics of pro-
22 viders whose services are provided
23 within an employment network under
24 the Program;

1 (VIII) the extent (if any) to
2 which employment networks display a
3 greater willingness to provide services
4 to beneficiaries with a range of dis-
5 abilities;

6 (IX) the characteristics (includ-
7 ing employment outcomes) of those
8 beneficiaries who receive services
9 under the outcome payment system
10 and of those beneficiaries who receive
11 services under the outcome-milestone
12 payment system;

13 (X) measures of satisfaction
14 among beneficiaries in receipt of tick-
15 ets under the Program; and

16 (XI) reasons for (including com-
17 ments solicited from beneficiaries re-
18 garding) their choice not to use their
19 tickets or their inability to return to
20 work despite the use of their tickets.

21 (D) PERIODIC EVALUATION REPORTS.—

22 Following the close of the third and fifth fiscal
23 years ending after the effective date under sub-
24 section (c), and prior to the close of the seventh
25 fiscal year ending after such date, the Commis-

1 sioner shall transmit to the Committee on Ways
2 and Means of the House of Representatives and
3 the Committee on Finance of the Senate a re-
4 port containing the Commissioner's evaluation
5 of the progress of activities conducted under the
6 provisions of this section and the amendments
7 made thereby. Each such report shall set forth
8 the Commissioner's evaluation of the extent to
9 which the Program has been successful and the
10 Commissioner's conclusions on whether or how
11 the Program should be modified. Each such re-
12 port shall include such data, findings, materials,
13 and recommendations as the Commissioner may
14 consider appropriate.

15 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
16 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
17 AMENDMENTS IN SUCH STATE.—

18 (A) IN GENERAL.—In the case of any
19 State in which the amendments made by sub-
20 section (a) have not been fully implemented
21 pursuant to this subsection, the Commissioner
22 shall determine by regulation the extent to
23 which—

1 (i) the requirement under section
2 222(a) for prompt referrals to a State
3 agency; and

4 (ii) the authority of the Commissioner
5 under section 222(d)(2) of the Social Secu-
6 rity Act to provide vocational rehabilitation
7 services in such State by agreement or
8 contract with other public or private agen-
9 cies, organizations, institutions, or individ-
10 uals,

11 shall apply in such State.

12 (B) EXISTING AGREEMENTS.—Nothing in
13 subparagraph (A) or the amendments made by
14 subsection (a) shall be construed to limit, im-
15 pede, or otherwise affect any agreement entered
16 into pursuant to section 222(d)(2) of the Social
17 Security Act before the date of the enactment
18 of this Act with respect to services provided
19 pursuant to such agreement to beneficiaries re-
20 ceiving services under such agreement as of
21 such date, except with respect to services (if
22 any) to be provided after 3 years after the ef-
23 fective date provided in subsection (c).

24 (e) SPECIFIC REGULATIONS REQUIRED.—

1 (1) IN GENERAL.—The Commissioner of Social
2 Security shall prescribe such regulations as are nec-
3 essary to implement the amendments made by this
4 section.

5 (2) SPECIFIC MATTERS TO BE INCLUDED IN
6 REGULATIONS.—The matters which shall be ad-
7 dressed in such regulations shall include—

8 (A) the form and manner in which tickets
9 to work and self-sufficiency may be distributed
10 to beneficiaries pursuant to section 1148(b)(1)
11 of the Social Security Act;

12 (B) the format and wording of such tick-
13 ets, which shall incorporate by reference any
14 contractual terms governing service by employ-
15 ment networks under the Program;

16 (C) the form and manner in which State
17 agencies may elect participation in the Ticket to
18 Work and Self-Sufficiency Program pursuant to
19 section 1148(e)(1) of such Act and provision for
20 periodic opportunities for exercising such elec-
21 tions;

22 (D) the status of State agencies under sec-
23 tion 1148(e)(1) of such Act at the time that
24 State agencies exercise elections under that sec-
25 tion;

1 (E) the terms of agreements to be entered
2 into with program managers pursuant to sec-
3 tion 1148(d) of such Act, including—

4 (i) the terms by which program man-
5 agers are precluded from direct participa-
6 tion in the delivery of services pursuant to
7 section 1148(d)(3) of such Act;

8 (ii) standards which must be met by
9 quality assurance measures referred to in
10 paragraph (6) of section 1148(d) of such
11 Act and methods of recruitment of employ-
12 ment networks utilized pursuant to para-
13 graph (2) of section 1148(e) of such Act;
14 and

15 (iii) the format under which dispute
16 resolution will operate under section
17 1148(d)(7) of such Act;

18 (F) the terms of agreements to be entered
19 into with employment networks pursuant to sec-
20 tion 1148(d)(4) of such Act, including—

21 (i) the manner in which service areas
22 are specified pursuant to section
23 1148(f)(2)(A) of such Act;

24 (ii) the general selection criteria and
25 the specific selection criteria which are ap-

1 plicable to employment networks under
2 section 1148(f)(1)(C) of such Act in select-
3 ing service providers;

4 (iii) specific requirements relating to
5 annual financial reporting by employment
6 networks pursuant to section 1148(f)(3) of
7 such Act; and

8 (iv) the national model to which peri-
9 odic outcomes reporting by employment
10 networks must conform under section
11 1148(f)(4) of such Act;

12 (G) standards which must be met by indi-
13 vidual work plans pursuant to section 1148(g)
14 of such Act;

15 (H) standards which must be met by pay-
16 ment systems required under section 1148(h) of
17 such Act, including—

18 (i) the form and manner in which
19 elections by employment networks of pay-
20 ment systems are to be exercised pursuant
21 to section 1148(h)(1)(A) of such Act;

22 (ii) the terms which must be met by
23 an outcome payment system under section
24 1148(h)(2) of such Act;

1 (iii) the terms which must be met by
2 an outcome-milestone payment system
3 under section 1148(h)(3) of such Act;

4 (iv) any revision of the percentage
5 specified in paragraph (2)(C) of section
6 1148(h) of such Act or the period of time
7 specified in paragraph (4)(B) of such sec-
8 tion 1148(h) of such Act; and

9 (v) annual oversight procedures for
10 such systems; and

11 (I) procedures for effective oversight of the
12 Program by the Commissioner of Social Secu-
13 rity, including periodic reviews and reporting
14 requirements.

15 (f) THE TICKET TO WORK AND WORK INCENTIVES
16 ADVISORY PANEL.—

17 (1) ESTABLISHMENT.—There is established
18 within the Social Security Administration a panel to
19 be known as the “Ticket to Work and Work Incen-
20 tives Advisory Panel” (in this subsection referred to
21 as the “Panel”).

22 (2) DUTIES OF PANEL.—It shall be the duty of
23 the Panel to—

24 (A) advise the President, the Congress,
25 and the Commissioner of Social Security on

1 issues related to work incentives programs,
2 planning, and assistance for individuals with
3 disabilities, including work incentive provisions
4 under titles II, XI, XVI, XVIII, and XIX of the
5 Social Security Act (42 U.S.C. 401 et seq.,
6 1301 et seq., 1381 et seq., 1395 et seq., 1396
7 et seq.); and

8 (B) with respect to the Ticket to Work and
9 Self-Sufficiency Program established under sec-
10 tion 1148 of such Act—

11 (i) advise the Commissioner of Social
12 Security with respect to establishing phase-
13 in sites for such Program and fully imple-
14 menting the Program thereafter, the re-
15 finement of access of disabled beneficiaries
16 to employment networks, payment systems,
17 and management information systems, and
18 advise the Commissioner whether such
19 measures are being taken to the extent
20 necessary to ensure the success of the Pro-
21 gram;

22 (ii) advise the Commissioner regard-
23 ing the most effective designs for research
24 and demonstration projects associated with

1 the Program or conducted pursuant to sec-
2 tion 302 of this Act;

3 (iii) advise the Commissioner on the
4 development of performance measurements
5 relating to quality assurance under section
6 1148(d)(6) of the Social Security Act; and

7 (iv) furnish progress reports on the
8 Program to the Commissioner and each
9 House of Congress.

10 (3) MEMBERSHIP.—

11 (A) NUMBER AND APPOINTMENT.—The
12 Panel shall be composed of 12 members as fol-
13 lows:

14 (i) 4 members appointed by the Presi-
15 dent, not more than 2 of whom may be of
16 the same political party;

17 (ii) 2 members appointed by the
18 Speaker of the House of Representatives,
19 in consultation with the Chairman of the
20 Committee on Ways and Means of the
21 House of Representatives;

22 (iii) 2 members appointed by the mi-
23 nority leader of the House of Representa-
24 tives, in consultation with the ranking

1 member of the Committee on Ways and
2 Means of the House of Representatives;

3 (iv) 2 members appointed by the ma-
4 jority leader of the Senate, in consultation
5 with the Chairman of the Committee on
6 Finance of the Senate; and

7 (v) 2 members appointed by the mi-
8 nority leader of the Senate, in consultation
9 with the ranking member of the Committee
10 on Finance of the Senate.

11 (B) REPRESENTATION.—Of the members
12 appointed under subparagraph (A), at least 8
13 shall have experience or expert knowledge as a
14 recipient, provider, employer, or employee in the
15 fields of, or related to, employment services, vo-
16 cational rehabilitation services, and other sup-
17 port services, of whom—

18 (i) at least 2 shall represent the inter-
19 ests of recipients of employment services,
20 vocational rehabilitation services, and other
21 support services;

22 (ii) at least 2 shall represent the in-
23 terests of providers of employment serv-
24 ices, vocational rehabilitation services, and
25 other support services;

1 (iii) at least 2 shall represent the in-
2 terests of private employers; and

3 (iv) at least 2 shall represent the in-
4 terests of employees.

5 At least $\frac{1}{2}$ of the members described in each
6 clause of subparagraph (A) shall be individuals
7 with disabilities, or representatives of individ-
8 uals with disabilities, with consideration to cur-
9 rent or former title II disability beneficiaries or
10 title XVI disability beneficiaries (as such terms
11 are defined in section 1148(k) of the Social Se-
12 curity Act (as added by subsection (a)).

13 (C) TERMS.—

14 (i) IN GENERAL.—Each member shall
15 be appointed for a term of 4 years (or, if
16 less, for the remaining life of the Panel),
17 except as provided in clauses (ii) and (iii).
18 The initial members shall be appointed not
19 later than 90 days after the date of the en-
20 actment of this Act.

21 (ii) TERMS OF INITIAL AP-
22 POINTEES.—As designated by the Presi-
23 dent at the time of appointment, of the
24 members first appointed—

1 (I) 1/2 of the members appointed
2 under subparagraph (A) shall be ap-
3 pointed for a term of 2 years; and

4 (II) the remaining members ap-
5 pointed under subparagraph (A) shall
6 be appointed for a term of 4 years.

7 (iii) VACANCIES.—Any member ap-
8 pointed to fill a vacancy occurring before
9 the expiration of the term for which the
10 member's predecessor was appointed shall
11 be appointed only for the remainder of that
12 term. A member may serve after the expi-
13 ration of that member's term until a suc-
14 cesssor has taken office. A vacancy in the
15 Panel shall be filled in the manner in
16 which the original appointment was made.

17 (D) BASIC PAY.—Members shall each be
18 paid at a rate, and in a manner, that is con-
19 sistent with guidelines established under section
20 7 of the Federal Advisory Committee Act (5
21 U.S.C. App.).

22 (E) TRAVEL EXPENSES.—Each member
23 shall receive travel expenses, including per diem
24 in lieu of subsistence, in accordance with sec-

1 tions 5702 and 5703 of title 5, United States
2 Code.

3 (F) QUORUM.—8 members of the Panel
4 shall constitute a quorum but a lesser number
5 may hold hearings.

6 (G) CHAIRPERSON.—The Chairperson of
7 the Panel shall be designated by the President.
8 The term of office of the Chairperson shall be
9 4 years.

10 (H) MEETINGS.—The Panel shall meet at
11 least quarterly and at other times at the call of
12 the Chairperson or a majority of its members.

13 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
14 AND CONSULTANTS.—

15 (A) DIRECTOR.—The Panel shall have a
16 Director who shall be appointed by the Panel,
17 and paid at a rate, and in a manner, that is
18 consistent with guidelines established under sec-
19 tion 7 of the Federal ADvisory Committee Act
20 (5 U.S.C. App.).

21 (B) STAFF.—Subject to rules prescribed
22 by the Commissioner of Social Security, the Di-
23 rector may appoint and fix the pay of additional
24 personnel as the Director considers appropriate.

1 (C) EXPERTS AND CONSULTANTS.—Sub-
2 ject to rules prescribed by the Commissioner of
3 Social Security, the Director may procure tem-
4 porary and intermittent services under section
5 3109(b) of title 5, United States Code.

6 (D) STAFF OF FEDERAL AGENCIES.—
7 Upon request of the Panel, the head of any
8 Federal department or agency may detail, on a
9 reimbursable basis, any of the personnel of that
10 department or agency to the Panel to assist it
11 in carrying out its duties under this Act.

12 (5) POWERS OF PANEL.—

13 (A) HEARINGS AND SESSIONS.—The Panel
14 may, for the purpose of carrying out its duties
15 under this subsection, hold such hearings, sit
16 and act at such times and places, and take such
17 testimony and evidence as the Panel considers
18 appropriate.

19 (B) POWERS OF MEMBERS AND AGENTS.—
20 Any member or agent of the Panel may, if au-
21 thorized by the Panel, take any action which
22 the Panel is authorized to take by this section.

23 (C) MAILS.—The Panel may use the
24 United States mails in the same manner and

1 under the same conditions as other departments
2 and agencies of the United States.

3 (6) REPORTS.—

4 (A) INTERIM REPORTS.—The Panel shall
5 submit to the President and the Congress in-
6 terim reports at least annually.

7 (B) FINAL REPORT.—The Panel shall
8 transmit a final report to the President and the
9 Congress not later than eight years after the
10 date of the enactment of this Act. The final re-
11 port shall contain a detailed statement of the
12 findings and conclusions of the Panel, together
13 with its recommendations for legislation and ad-
14 ministrative actions which the Panel considers
15 appropriate.

16 (7) TERMINATION.—The Panel shall terminate
17 30 days after the date of the submission of its final
18 report under paragraph (6)(B).

19 (8) AUTHORIZATION OF APPROPRIATIONS.—
20 There are authorized to be appropriated from the
21 Federal Old-Age and Survivors Insurance Trust
22 Fund, the Federal Disability Insurance Trust Fund,
23 and the general fund of the Treasury, as appro-
24 priate, such sums as are necessary to carry out this
25 subsection.

1 **Subtitle B—Elimination of Work**
2 **Disincentives**

3 **SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR RE-**
4 **VIEW OF AN INDIVIDUAL’S DISABLED STATUS.**

5 (a) IN GENERAL.—Section 221 of the Social Security
6 Act (42 U.S.C. 421) is amended by adding at the end the
7 following:

8 “(m)(1) In any case where an individual entitled to
9 disability insurance benefits under section 223 or to
10 monthly insurance benefits under section 202 based on
11 such individual’s disability (as defined in section 223(d))
12 has received such benefits for at least 24 months—

13 “(A) no continuing disability review conducted
14 by the Commissioner may be scheduled for the indi-
15 vidual solely as a result of the individual’s work ac-
16 tivity;

17 “(B) no work activity engaged in by the indi-
18 vidual may be used as evidence that the individual
19 is no longer disabled; and

20 “(C) no cessation of work activity by the indi-
21 vidual may give rise to a presumption that the indi-
22 vidual is unable to engage in work.

23 “(2) An individual to which paragraph (1) applies
24 shall continue to be subject to—

1 “(A) continuing disability reviews on a regularly
2 scheduled basis that is not triggered by work; and

3 “(B) termination of benefits under this title in
4 the event that the individual has earnings that ex-
5 ceed the level of earnings established by the Com-
6 missioner to represent substantial gainful activity.”.

7 (b) EFFECTIVE DATE.—The amendment made by
8 subsection (a) shall take effect on January 1, 2003.

9 **SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY**
10 **BENEFITS.**

11 (a) OASDI BENEFITS.—Section 223 of the Social
12 Security Act (42 U.S.C. 423) is amended—

13 (1) by redesignating subsection (i) as subsection
14 (j); and

15 (2) by inserting after subsection (h) the fol-
16 lowing:

17 “Reinstatement of Entitlement

18 “(i)(1)(A) Entitlement to benefits described in sub-
19 paragraph (B)(i)(I) shall be reinstated in any case where
20 the Commissioner determines that an individual described
21 in subparagraph (B) has filed a request for reinstatement
22 meeting the requirements of paragraph (2)(A) during the
23 period prescribed in subparagraph (C). Reinstatement of
24 such entitlement shall be in accordance with the terms of
25 this subsection.

1 “(B) An individual is described in this subparagraph
2 if—

3 “(i) prior to the month in which the individual
4 files a request for reinstatement—

5 “(I) the individual was entitled to benefits
6 under this section or section 202 on the basis
7 of disability pursuant to an application filed
8 therefor; and

9 “(II) such entitlement terminated due to
10 the performance of substantial gainful activity;

11 “(ii) the individual is under a disability and the
12 physical or mental impairment that is the basis for
13 the finding of disability is the same as (or related
14 to) the physical or mental impairment that was the
15 basis for the finding of disability that gave rise to
16 the entitlement described in clause (i); and

17 “(iii) the individual’s disability renders the indi-
18 vidual unable to perform substantial gainful activity.

19 “(C)(i) Except as provided in clause (ii), the period
20 prescribed in this subparagraph with respect to an indi-
21 vidual is 60 consecutive months beginning with the month
22 following the most recent month for which the individual
23 was entitled to a benefit described in subparagraph
24 (B)(i)(I) prior to the entitlement termination described in
25 subparagraph (B)(i)(II).

1 “(ii) In the case of an individual who fails to file a
2 reinstatement request within the period prescribed in
3 clause (i), the Commissioner may extend the period if the
4 Commissioner determines that the individual had good
5 cause for the failure to so file.

6 “(2)(A)(i) A request for reinstatement shall be filed
7 in such form, and containing such information, as the
8 Commissioner may prescribe.

9 “(ii) A request for reinstatement shall include express
10 declarations by the individual that the individual meets the
11 requirements specified in clauses (ii) and (iii) of para-
12 graph (1)(B).

13 “(B) A request for reinstatement filed in accordance
14 with subparagraph (A) may constitute an application for
15 benefits in the case of any individual who the Commis-
16 sioner determines is not entitled to reinstated benefits
17 under this subsection.

18 “(3) In determining whether an individual meets the
19 requirements of paragraph (1)(B)(ii), the provisions of
20 subsection (f) shall apply.

21 “(4)(A)(i) Subject to clause (ii), entitlement to bene-
22 fits reinstated under this subsection shall commence with
23 the benefit payable for the month in which a request for
24 reinstatement is filed.

1 “(ii) An individual whose entitlement to a benefit for
2 any month would have been reinstated under this sub-
3 section had the individual filed a request for reinstatement
4 before the end of such month shall be entitled to such ben-
5 efit for such month if such request for reinstatement is
6 filed before the end of the twelfth month immediately suc-
7 ceeding such month.

8 “(B)(i) Subject to clauses (ii) and (iii), the amount
9 of the benefit payable for any month pursuant to the rein-
10 statement of entitlement under this subsection shall be de-
11 termined in accordance with the provisions of this title.

12 “(ii) For purposes of computing the primary insur-
13 ance amount of an individual whose entitlement to benefits
14 under this section is reinstated under this subsection, the
15 date of onset of the individual’s disability shall be the date
16 of onset used in determining the individual’s most recent
17 period of disability arising in connection with such benefits
18 payable on the basis of an application.

19 “(iii) Benefits under this section or section 202 pay-
20 able for any month pursuant to a request for reinstatement
21 filed in accordance with paragraph (2) shall be re-
22 duced by the amount of any provisional benefit paid to
23 such individual for such month under paragraph (7).

24 “(C) No benefit shall be payable pursuant to an enti-
25 tlement reinstated under this subsection to an individual

1 for any month in which the individual engages in substan-
2 tial gainful activity.

3 “(D) The entitlement of any individual that is rein-
4 stated under this subsection shall end with the benefits
5 payable for the month preceding whichever of the following
6 months is the earliest:

7 “(i) The month in which the individual dies.

8 “(ii) The month in which the individual attains
9 retirement age.

10 “(iii) The third month following the month in
11 which the individual’s disability ceases.

12 “(5) Whenever an individual’s entitlement to benefits
13 under this section is reinstated under this subsection, enti-
14 tlement to benefits payable on the basis of such individ-
15 ual’s wages and self-employment income may be reinstated
16 with respect to any person previously entitled to such ben-
17 efits on the basis of an application if the Commissioner
18 determines that such person satisfies all the requirements
19 for entitlement to such benefits except requirements re-
20 lated to the filing of an application. The provisions of
21 paragraph (4) shall apply to the reinstated entitlement of
22 any such person to the same extent that they apply to
23 the reinstated entitlement of such individual.

24 “(6) An individual to whom benefits are payable
25 under this section or section 202 pursuant to a reinstated-

1 ment of entitlement under this subsection for 24 months
2 (whether or not consecutive) shall, with respect to benefits
3 so payable after such twenty-fourth month, be deemed for
4 purposes of paragraph (1)(B)(i)(I) and the determination,
5 if appropriate, of the termination month in accordance
6 with subsection (a)(1) of this section, or subsection (d)(1),
7 (e)(1), or (f)(1) of section 202, to be entitled to such bene-
8 fits on the basis of an application filed therefor.

9 “(7)(A) An individual described in paragraph (1)(B)
10 who files a request for reinstatement in accordance with
11 the provisions of paragraph (2)(A) shall be entitled to pro-
12 visional benefits payable in accordance with this para-
13 graph, unless the Commissioner determines that the indi-
14 vidual does not meet the requirements of paragraph
15 (1)(B)(i) or that the individual’s declaration under para-
16 graph (2)(A)(ii) is false. Any such determination by the
17 Commissioner shall be final and not subject to review
18 under subsection (b) or (g) of section 205.

19 “(B) The amount of a provisional benefit for a month
20 shall equal the amount of the last monthly benefit payable
21 to the individual under this title on the basis of an applica-
22 tion increased by an amount equal to the amount, if any,
23 by which such last monthly benefit would have been in-
24 creased as a result of the operation of section 215(i).

1 “(C)(i) Provisional benefits shall begin with the
2 month in which a request for reinstatement is filed in ac-
3 cordance with paragraph (2)(A).

4 “(ii) Provisional benefits shall end with the earliest
5 of—

6 “(I) the month in which the Commissioner
7 makes a determination regarding the individual’s en-
8 titlement to reinstated benefits;

9 “(II) the fifth month following the month de-
10 scribed in clause (i);

11 “(III) the month in which the individual per-
12 forms substantial gainful activity; or

13 “(IV) the month in which the Commissioner de-
14 termines that the individual does not meet the re-
15 quirements of paragraph (1)(B)(i) or that the indi-
16 vidual’s declaration made in accordance with para-
17 graph (2)(A)(ii) is false.

18 “(D) In any case in which the Commissioner deter-
19 mines that an individual is not entitled to reinstated bene-
20 fits, any provisional benefits paid to the individual under
21 this paragraph shall not be subject to recovery as an over-
22 payment unless the Commissioner determines that the in-
23 dividual knew or should have known that the individual
24 did not meet the requirements of paragraph (1)(B).”.

25 (b) SSI BENEFITS.—

1 “(ii) the individual is blind or disabled and the
2 physical or mental impairment that is the basis for
3 the finding of blindness or disability is the same as
4 (or related to) the physical or mental impairment
5 that was the basis for the finding of blindness or
6 disability that gave rise to the eligibility described in
7 clause (i);

8 “(iii) the individual’s blindness or disability ren-
9 ders the individual unable to perform substantial
10 gainful activity; and

11 “(iv) the individual satisfies the nonmedical re-
12 quirements for eligibility for benefits under this title.

13 “(C)(i) Except as provided in clause (ii), the period
14 prescribed in this subparagraph with respect to an indi-
15 vidual is 60 consecutive months beginning with the month
16 following the most recent month for which the individual
17 was eligible for a benefit under this title (including section
18 1619) prior to the period of ineligibility described in sub-
19 paragraph (B)(i)(II).

20 “(ii) In the case of an individual who fails to file a
21 reinstatement request within the period prescribed in
22 clause (i), the Commissioner may extend the period if the
23 Commissioner determines that the individual had good
24 cause for the failure to so file.

1 “(2)(A)(i) A request for reinstatement shall be filed
2 in such form, and containing such information, as the
3 Commissioner may prescribe.

4 “(ii) A request for reinstatement shall include express
5 declarations by the individual that the individual meets the
6 requirements specified in clauses (ii) through (iv) of para-
7 graph (1)(B).

8 “(B) A request for reinstatement filed in accordance
9 with subparagraph (A) may constitute an application for
10 benefits in the case of any individual who the Commis-
11 sioner determines is not eligible for reinstated benefits
12 under this subsection.

13 “(3) In determining whether an individual meets the
14 requirements of paragraph (1)(B)(ii), the provisions of
15 section 1614(a)(4) shall apply.

16 “(4)(A) Eligibility for benefits reinstated under this
17 subsection shall commence with the benefit payable for the
18 month following the month in which a request for rein-
19 statement is filed.

20 “(B)(i) Subject to clause (ii), the amount of the ben-
21 efit payable for any month pursuant to the reinstatement
22 of eligibility under this subsection shall be determined in
23 accordance with the provisions of this title.

24 “(ii) The benefit under this title payable for any
25 month pursuant to a request for reinstatement filed in ac-

1 cordance with paragraph (2) shall be reduced by the
2 amount of any provisional benefit paid to such individual
3 for such month under paragraph (7).

4 “(C) Except as otherwise provided in this subsection,
5 eligibility for benefits under this title reinstated pursuant
6 to a request filed under paragraph (2) shall be subject
7 to the same terms and conditions as eligibility established
8 pursuant to an application filed therefor.

9 “(5) Whenever an individual’s eligibility for benefits
10 under this title is reinstated under this subsection, eligi-
11 bility for such benefits shall be reinstated with respect to
12 the individual’s spouse if such spouse was previously an
13 eligible spouse of the individual under this title and the
14 Commissioner determines that such spouse satisfies all the
15 requirements for eligibility for such benefits except re-
16 quirements related to the filing of an application. The pro-
17 visions of paragraph (4) shall apply to the reinstated eligi-
18 bility of the spouse to the same extent that they apply
19 to the reinstated eligibility of such individual.

20 “(6) An individual to whom benefits are payable
21 under this title pursuant to a reinstatement of eligibility
22 under this subsection for twenty-four months (whether or
23 not consecutive) shall, with respect to benefits so payable
24 after such twenty-fourth month, be deemed for purposes

1 of paragraph (1)(B)(i)(I) to be eligible for such benefits
2 on the basis of an application filed therefor.

3 “(7)(A) An individual described in paragraph (1)(B)
4 who files a request for reinstatement in accordance with
5 the provisions of paragraph (2)(A) shall be eligible for pro-
6 visional benefits payable in accordance with this para-
7 graph, unless the Commissioner determines that the indi-
8 vidual does not meet the requirements of paragraph
9 (1)(B)(i) or that the individual’s declaration under para-
10 graph (2)(A)(ii) is false. Any such determination by the
11 Commissioner shall be final and not subject to review
12 under paragraph (1) or (3) of subsection (c).

13 “(B)(i) Except as otherwise provided in clause (ii),
14 the amount of a provisional benefit for a month shall equal
15 the amount of the monthly benefit that would be payable
16 to an eligible individual under this title with the same kind
17 and amount of income.

18 “(ii) If the individual has a spouse who was pre-
19 viously an eligible spouse of the individual under this title
20 and the Commissioner determines that such spouse satis-
21 fies all the requirements of section 1614(b) except require-
22 ments related to the filing of an application, the amount
23 of a provisional benefit for a month shall equal the amount
24 of the monthly benefit that would be payable to an eligible

1 individual and eligible spouse under this title with the
2 same kind and amount of income.

3 “(C)(i) Provisional benefits shall begin with the
4 month following the month in which a request for rein-
5 statement is filed in accordance with paragraph (2)(A).

6 “(ii) Provisional benefits shall end with the earliest
7 of—

8 “(I) the month in which the Commissioner
9 makes a determination regarding the individual’s eli-
10 gibility for reinstated benefits;

11 “(II) the fifth month following the month for
12 which provisional benefits are first payable under
13 clause (i); or

14 “(III) the month in which the Commissioner de-
15 termines that the individual does not meet the re-
16 quirements of paragraph (1)(B)(i) or that the indi-
17 vidual’s declaration made in accordance with para-
18 graph (2)(A)(ii) is false.

19 “(D) In any case in which the Commissioner deter-
20 mines that an individual is not eligible for reinstated bene-
21 fits, any provisional benefits paid to the individual under
22 this paragraph shall not be subject to recovery as an over-
23 payment unless the Commissioner determines that the in-
24 dividual knew or should have known that the individual
25 did not meet the requirements of paragraph (1)(B).

1 “(8) For purposes of this subsection other than para-
2 graph (7), the term ‘benefits under this title’ includes
3 State supplementary payments made pursuant to an
4 agreement under section 1616(a) of this Act or section
5 212(b) of Public Law 93–66.”.

6 (2) CONFORMING AMENDMENTS.—

7 (A) Section 1631(j)(1) of such Act (42
8 U.S.C. 1383(j)(1)) is amended by striking the
9 period and inserting “, or has filed a request
10 for reinstatement of eligibility under subsection
11 (p)(2) and been determined to be eligible for re-
12 instatement.”.

13 (B) Section 1631(j)(2)(A)(i)(I) of such Act
14 (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by
15 inserting “(other than pursuant to a request for
16 reinstatement under subsection (p))” after “eli-
17 gible”.

18 (c) EFFECTIVE DATE.—

19 (1) IN GENERAL.—The amendments made by
20 this section shall take effect on the first day of the
21 thirteenth month beginning after the date of enact-
22 ment of this Act.

23 (2) LIMITATION.—No benefit shall be payable
24 under title II or XVI on the basis of a request for
25 reinstatement filed under section 223(i) or 1631(p)

1 of the Social Security Act before the effective date
2 described in paragraph (1).

3 **Subtitle C—Work Incentives**
4 **Planning, Assistance, and Outreach**

5 **SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.**

6 Part A of title XI of the Social Security Act (42
7 U.S.C. 1301 et seq.), as amended by section 101, is
8 amended by adding after section 1148 the following:

9 “WORK INCENTIVES OUTREACH PROGRAM

10 “SEC. 1149. (a) ESTABLISHMENT.—

11 “(1) IN GENERAL.—The Commissioner, in con-
12 sultation with the Ticket to Work and Work Incen-
13 tives Advisory Panel established under section 101(f)
14 of the Ticket to Work and Work Incentives Improve-
15 ment Act of 1999, shall establish a community-based
16 work incentives planning and assistance program for
17 the purpose of disseminating accurate information to
18 disabled beneficiaries on work incentives programs
19 and issues related to such programs.

20 “(2) GRANTS, COOPERATIVE AGREEMENTS,
21 CONTRACTS, AND OUTREACH.—Under the program
22 established under this section, the Commissioner
23 shall—

24 “(A) establish a competitive program of
25 grants, cooperative agreements, or contracts to
26 provide benefits planning and assistance, in-

1 including information on the availability of pro-
2 tection and advocacy services, to disabled bene-
3 ficiaries, including individuals participating in
4 the Ticket to Work and Self-Sufficiency Pro-
5 gram established under section 1148, the pro-
6 gram established under section 1619, and other
7 programs that are designed to encourage dis-
8 abled beneficiaries to work;

9 “(B) conduct directly, or through grants,
10 cooperative agreements, or contracts, ongoing
11 outreach efforts to disabled beneficiaries (and
12 to the families of such beneficiaries) who are
13 potentially eligible to participate in Federal or
14 State work incentive programs that are de-
15 signed to assist disabled beneficiaries to work,
16 including—

17 “(i) preparing and disseminating in-
18 formation explaining such programs; and

19 “(ii) working in cooperation with
20 other Federal, State, and private agencies
21 and nonprofit organizations that serve dis-
22 abled beneficiaries, and with agencies and
23 organizations that focus on vocational re-
24 habilitation and work-related training and
25 counseling;

1 “(C) establish a corps of trained, acces-
2 sible, and responsive work incentives specialists
3 within the Social Security Administration who
4 will specialize in disability work incentives
5 under titles II and XVI for the purpose of dis-
6 seminating accurate information with respect to
7 inquiries and issues relating to work incentives
8 to—

9 “(i) disabled beneficiaries;

10 “(ii) benefit applicants under titles II
11 and XVI; and

12 “(iii) individuals or entities awarded
13 grants under subparagraphs (A) or (B);
14 and

15 “(D) provide—

16 “(i) training for work incentives spe-
17 cialists and individuals providing planning
18 assistance described in subparagraph (C);
19 and

20 “(ii) technical assistance to organiza-
21 tions and entities that are designed to en-
22 courage disabled beneficiaries to return to
23 work.

24 “(3) COORDINATION WITH OTHER PRO-
25 GRAMS.—The responsibilities of the Commissioner

1 established under this section shall be coordinated
2 with other public and private programs that provide
3 information and assistance regarding rehabilitation
4 services and independent living supports and bene-
5 fits planning for disabled beneficiaries including the
6 program under section 1619, the plans for achieving
7 self-support program (PASS), and any other Federal
8 or State work incentives programs that are designed
9 to assist disabled beneficiaries, including educational
10 agencies that provide information and assistance re-
11 garding rehabilitation, school-to-work programs,
12 transition services (as defined in, and provided in ac-
13 cordance with, the Individuals with Disabilities Edu-
14 cation Act (20 U.S.C. 1400 et seq.)), a one-stop de-
15 livery system established under subtitle B of title I
16 of the Workforce Investment Act of 1998, and other
17 services.

18 “(b) CONDITIONS.—

19 “(1) SELECTION OF ENTITIES.—

20 “(A) APPLICATION.—An entity shall sub-
21 mit an application for a grant, cooperative
22 agreement, or contract to provide benefits plan-
23 ning and assistance to the Commissioner at
24 such time, in such manner, and containing such
25 information as the Commissioner may deter-

1 mine is necessary to meet the requirements of
2 this section.

3 “(B) STATEWIDENESS.—The Commis-
4 sioner shall ensure that the planning, assist-
5 ance, and information described in paragraph
6 (2) shall be available on a statewide basis.

7 “(C) ELIGIBILITY OF STATES AND PRI-
8 VATE ORGANIZATIONS.—

9 “(i) IN GENERAL.—The Commissioner
10 may award a grant, cooperative agreement,
11 or contract under this section to a State or
12 a private agency or organization (other
13 than Social Security Administration Field
14 Offices and the State agency administering
15 the State medicaid program under title
16 XIX, including any agency or entity de-
17 scribed in clause (ii), that the Commis-
18 sioner determines is qualified to provide
19 the planning, assistance, and information
20 described in paragraph (2)).

21 “(ii) AGENCIES AND ENTITIES DE-
22 SCRIBED.—The agencies and entities de-
23 scribed in this clause are the following:

24 “(I) Any public or private agency
25 or organization (including Centers for

1 Independent Living established under
2 title VII of the Rehabilitation Act of
3 1973, protection and advocacy organi-
4 zations, client assistance programs es-
5 tablished in accordance with section
6 112 of the Rehabilitation Act of 1973,
7 and State Developmental Disabilities
8 Councils established in accordance
9 with section 124 of the Developmental
10 Disabilities Assistance and Bill of
11 Rights Act (42 U.S.C. 6024)) that the
12 Commissioner determines satisfies the
13 requirements of this section.

14 “(II) The State agency admin-
15 istering the State program funded
16 under part A of title IV.

17 “(D) EXCLUSION FOR CONFLICT OF IN-
18 TEREST.—The Commissioner may not award a
19 grant, cooperative agreement, or contract under
20 this section to any entity that the Commissioner
21 determines would have a conflict of interest if
22 the entity were to receive a grant, cooperative
23 agreement, or contract under this section.

24 “(2) SERVICES PROVIDED.—A recipient of a
25 grant, cooperative agreement, or contract to provide

1 benefits planning and assistance shall select individ-
2 uals who will act as planners and provide informa-
3 tion, guidance, and planning to disabled beneficiaries
4 on the—

5 “(A) availability and interrelation of any
6 Federal or State work incentives programs de-
7 signed to assist disabled beneficiaries that the
8 individual may be eligible to participate in;

9 “(B) adequacy of any health benefits cov-
10 erage that may be offered by an employer of
11 the individual and the extent to which other
12 health benefits coverage may be available to the
13 individual; and

14 “(C) availability of protection and adv-
15 ocacy services for disabled beneficiaries and how
16 to access such services.

17 “(3) AMOUNT OF GRANTS, COOPERATIVE
18 AGREEMENTS, OR CONTRACTS.—

19 “(A) BASED ON POPULATION OF DIS-
20 ABLED BENEFICIARIES.—Subject to subpara-
21 graph (B), the Commissioner shall award a
22 grant, cooperative agreement, or contract under
23 this section to an entity based on the percent-
24 age of the population of the State where the en-
25 tity is located who are disabled beneficiaries.

1 “(B) LIMITATIONS.—

2 “(i) PER GRANT.—No entity shall re-
3 ceive a grant, cooperative agreement, or
4 contract under this section for a fiscal year
5 that is less than \$50,000 or more than
6 \$300,000.

7 “(ii) TOTAL AMOUNT FOR ALL
8 GRANTS, COOPERATIVE AGREEMENTS, AND
9 CONTRACTS.—The total amount of all
10 grants, cooperative agreements, and con-
11 tracts awarded under this section for a fis-
12 cal year may not exceed \$23,000,000.

13 “(4) ALLOCATION OF COSTS.—The costs of car-
14 rying out this section shall be paid from amounts
15 made available for the administration of title II and
16 amounts made available for the administration of
17 title XVI, and shall be allocated among those
18 amounts as appropriate.

19 “(c) DEFINITIONS.—In this section:

20 “(1) COMMISSIONER.—The term ‘Commis-
21 sioner’ means the Commissioner of Social Security.

22 “(2) DISABLED BENEFICIARY.—The term ‘dis-
23 abled beneficiary’ has the meaning given that term
24 in section 1148(k)(2).

1 “(c) APPLICATION.—In order to receive payments
2 under this section, a protection and advocacy system shall
3 submit an application to the Commissioner, at such time,
4 in such form and manner, and accompanied by such infor-
5 mation and assurances as the Commissioner may require.

6 “(d) AMOUNT OF PAYMENTS.—

7 “(1) IN GENERAL.—Subject to the amount ap-
8 propriated for a fiscal year for making payments
9 under this section, a protection and advocacy system
10 shall not be paid an amount that is less than—

11 “(A) in the case of a protection and advoca-
12 cacy system located in a State (including the
13 District of Columbia and Puerto Rico) other
14 than Guam, American Samoa, the United
15 States Virgin Islands, and the Commonwealth
16 of the Northern Mariana Islands, the greater
17 of—

18 “(i) \$100,000; or

19 “(ii) $\frac{1}{3}$ of 1 percent of the amount
20 available for payments under this section;
21 and

22 “(B) in the case of a protection and advoca-
23 cacy system located in Guam, American Samoa,
24 the United States Virgin Islands, and the Com-

1 monwealth of the Northern Mariana Islands,
2 \$50,000.

3 “(2) INFLATION ADJUSTMENT.—For each fiscal
4 year in which the total amount appropriated to carry
5 out this section exceeds the total amount appro-
6 priated to carry out this section in the preceding fis-
7 cal year, the Commissioner shall increase each min-
8 imum payment under subparagraphs (A) and (B) of
9 paragraph (1) by a percentage equal to the percent-
10 age increase in the total amount so appropriated to
11 carry out this section.

12 “(e) ANNUAL REPORT.—Each protection and advo-
13 cacy system that receives a payment under this section
14 shall submit an annual report to the Commissioner and
15 the Ticket to Work and Work Incentives Advisory Panel
16 established under section 101(f) of the Ticket to Work and
17 Work Incentives Improvement Act of 1999 on the services
18 provided to individuals by the system.

19 “(f) FUNDING.—

20 “(1) ALLOCATION OF PAYMENTS.—Payments
21 under this section shall be made from amounts made
22 available for the administration of title II and
23 amounts made available for the administration of
24 title XVI, and shall be allocated among those
25 amounts as appropriate.

1 “(2) CARRYOVER.—Any amounts allotted for
2 payment to a protection and advocacy system under
3 this section for a fiscal year shall remain available
4 for payment to or on behalf of the protection and
5 advocacy system until the end of the succeeding fis-
6 cal year.

7 “(g) DEFINITIONS.—In this section:

8 “(1) COMMISSIONER.—The term ‘Commis-
9 sioner’ means the Commissioner of Social Security.

10 “(2) DISABLED BENEFICIARY.—The term ‘dis-
11 abled beneficiary’ has the meaning given that term
12 in section 1148(k)(2).

13 “(3) PROTECTION AND ADVOCACY SYSTEM.—
14 The term ‘protection and advocacy system’ means a
15 protection and advocacy system established pursuant
16 to part C of title I of the Developmental Disabilities
17 Assistance and Bill of Rights Act (42 U.S.C. 6041
18 et seq.).

19 “(h) AUTHORIZATION OF APPROPRIATIONS.—There
20 is authorized to be appropriated to carry out this section
21 \$7,000,000 for each of the fiscal years 2000 through
22 2004.”.

1 **TITLE II—EXPANDED AVAIL-**
2 **ABILITY OF HEALTH CARE**
3 **SERVICES**

4 **SEC. 201. EXPANDING STATE OPTIONS UNDER THE MED-**
5 **ICAID PROGRAM FOR WORKERS WITH DIS-**
6 **ABILITIES.**

7 (a) IN GENERAL.—

8 (1) STATE OPTION TO ELIMINATE INCOME, AS-
9 SETS, AND RESOURCE LIMITATIONS FOR WORKERS
10 WITH DISABILITIES BUYING INTO MEDICAID.—Sec-
11 tion 1902(a)(10)(A)(ii) of the Social Security Act
12 (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

13 (A) in subclause (XIII), by striking “or”
14 at the end;

15 (B) in subclause (XIV), by adding “or” at
16 the end; and

17 (C) by adding at the end the following:

18 “(XV) who, but for earnings in
19 excess of the limit established under
20 section 1905(q)(2)(B), would be con-
21 sidered to be receiving supplemental
22 security income, who is at least 16,
23 but less than 65, years of age, and
24 whose assets, resources, and earned or
25 unearned income (or both) do not ex-

1 (B) DEFINITION OF EMPLOYED INDIVID-
2 UALS WITH A MEDICALLY IMPROVED DIS-
3 ABILITY.—Section 1905 of the Social Security
4 Act (42 U.S.C. 1396d) is amended by adding at
5 the end the following:

6 “(v)(1) The term ‘employed individual with a medi-
7 cally improved disability’ means an individual who—

8 “(A) is at least 16, but less than 65, years of
9 age;

10 “(B) is employed (as defined in paragraph (2));

11 “(C) ceases to be eligible for medical assistance
12 under section 1902(a)(10)(A)(ii)(XV) because the
13 individual, by reason of medical improvement, is de-
14 termined at the time of a regularly scheduled con-
15 tinuing disability review to no longer be eligible for
16 benefits under section 223(d) or 1614(a)(3); and

17 “(D) continues to have a severe medically deter-
18 minable impairment, as determined under regula-
19 tions of the Secretary.

20 “(2) For purposes of paragraph (1), an individual is
21 considered to be ‘employed’ if the individual—

22 “(A) is earning at least the applicable minimum
23 wage requirement under section 6 of the Fair Labor
24 Standards Act (29 U.S.C. 206) and working at least
25 40 hours per month; or

1 “(B) is engaged in a work effort that meets
2 substantial and reasonable threshold criteria for
3 hours of work, wages, or other measures, as defined
4 by the State and approved by the Secretary.”.

5 (C) CONFORMING AMENDMENT.—Section
6 1905(a) of such Act (42 U.S.C. 1396d(a)) is
7 amended in the matter preceding paragraph
8 (1)—

9 (i) in clause (x), by striking “or” at
10 the end;

11 (ii) in clause (xi), by adding “or” at
12 the end; and

13 (iii) by inserting after clause (xi), the
14 following:

15 “(xii) employed individuals with a medically im-
16 proved disability (as defined in subsection (v)),”.

17 (3) STATE AUTHORITY TO IMPOSE INCOME-RE-
18 LATED PREMIUMS AND COST-SHARING.—Section
19 1916 of such Act (42 U.S.C. 1396o) is amended—

20 (A) in subsection (a), by striking “The
21 State plan” and inserting “Subject to sub-
22 section (g), the State plan”; and

23 (B) by adding at the end the following:

1 “(g) With respect to individuals provided medical as-
2 sistance only under subclause (XV) or (XVI) of section
3 1902(a)(10)(A)(ii)—

4 “(1) a State may (in a uniform manner for in-
5 dividuals described in either such subclause)—

6 “(A) require such individuals to pay pre-
7 miums or other cost-sharing charges set on a
8 sliding scale based on income that the State
9 may determine; and

10 “(B) require payment of 100 percent of
11 such premiums or charges for a year in the case
12 of such an individual who has income for such
13 year that exceeds 250 percent of the income of-
14 ficial poverty line (referred to in subsection
15 (c)(1)) applicable to a family of the size in-
16 volved, except that, in the case of such an indi-
17 vidual who has income for a year that does not
18 exceed 450 percent of such poverty line, such
19 requirement may apply only to the extent that
20 such premiums do not exceed 7.5 percent of
21 such income; and

22 “(2) a State shall require payment of 100 per-
23 cent of such premium for a year by such an indi-
24 vidual whose adjusted gross income (as defined in
25 section 62 of the Internal Revenue Code of 1986)

1 for such year exceeds \$75,000, except that a State
2 may choose to subsidize such premium by using
3 State funds which may not be federally matched
4 under this title.

5 The Secretary shall adjust annually (after 2000) the dollar
6 amount set forth in paragraph (2) under procedures pro-
7 viding for adjustments in the same manner and to the
8 same extent as adjustments are provided for under the
9 procedures used to adjust benefit amounts under section
10 215(i)(2)(A), except that any amount so adjusted that is
11 not a multiple of \$1.00 shall be rounded to the nearest
12 multiple of \$1.00.”.

13 (4) PROHIBITION AGAINST SUPPLANTATION OF
14 STATE FUNDS AND STATE FAILURE TO MAINTAIN
15 EFFORT.—Section 1903(i) of such Act (42 U.S.C.
16 1396b(i)) is amended—

17 (A) by striking the period at the end of
18 paragraph (18) and inserting “; or”; and

19 (B) by inserting after such paragraph the
20 following:

21 “(19) with respect to amounts expended for
22 medical assistance provided to an individual de-
23 scribed in subclause (XV) or (XVI) of section
24 1902(a)(10)(A)(ii) for a fiscal year unless the State
25 demonstrates to the satisfaction of the Secretary

1 that the level of State funds expended for such fiscal
2 year for programs to enable working individuals with
3 disabilities to work (other than for such medical as-
4 sistance) is not less than the level expended for such
5 programs during the most recent State fiscal year
6 ending before the date of enactment of this para-
7 graph.”.

8 (b) CONFORMING AMENDMENTS.—

9 (1) Section 1903(f)(4) of the Social Security
10 Act (42 U.S.C. 1396b(f)(4)) is amended in the mat-
11 ter preceding subparagraph (A) by inserting
12 “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI)”
13 after “1902(a)(10)(A)(ii)(X),”.

14 (2) Section 1903(f)(4) of such Act, as amended
15 by paragraph (1), is amended by inserting
16 “1902(a)(10)(A)(ii)(XIII),” before
17 “1902(a)(10)(A)(ii)(XV)”.

18 (c) GAO REPORT.—Not later than 3 years after the
19 date of enactment of this Act, the Comptroller General
20 of the United States shall submit a report to Congress
21 regarding the amendments made by this section that
22 examines—

23 (1) the extent to which higher health care costs
24 for individuals with disabilities at higher income lev-
25 els deter employment or progress with employment;

1 (2) whether such individuals have health insur-
2 ance coverage or could benefit from the State option
3 established under such amendments to provide a
4 medicaid buy-in; and

5 (3) how the States are exercising such option,
6 including—

7 (A) how such States are exercising the
8 flexibility afforded them with regard to income
9 disregards;

10 (B) what income and premium levels have
11 been set;

12 (C) the degree to which States are sub-
13 sidizing premiums above the dollar amount
14 specified in section 1916(g)(2) of the Social Se-
15 curity Act (42 U.S.C. 1396o(g)(2)); and

16 (D) the extent to which there exists any
17 crowd-out effect.

18 (d) EFFECTIVE DATE.—

19 (1) IN GENERAL.—Except as provided in para-
20 graph (2), the amendments made by this section
21 apply to medical assistance for items and services
22 furnished on or after October 1, 1999.

23 (2) RETROACTIVITY OF CONFORMING AMEND-
24 MENT.—The amendment made by subsection (b)(2)

1 takes effect as if included in the enactment of the
2 Balanced Budget Act of 1997.

3 **SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI**
4 **DISABILITY BENEFIT RECIPIENTS.**

5 (a) IN GENERAL.—The next to last sentence of sec-
6 tion 226(b) of the Social Security Act (42 U.S.C. 426)
7 is amended by striking “24” and inserting “96”.

8 (b) EFFECTIVE DATE.—The amendment made by
9 subsection (a) shall be effective on and after October 1,
10 2000.

11 (c) GAO REPORT.—Not later than 5 years after the
12 date of the enactment of this Act, the Comptroller General
13 of the United States shall submit a report to the Congress
14 that—

15 (1) examines the effectiveness and cost of the
16 amendment made by subsection (a);

17 (2) examines the necessity and effectiveness of
18 providing continuation of medicare coverage under
19 section 226(b) of the Social Security Act to individ-
20 uals whose annual income exceeds the contribution
21 and benefit base (as determined under section 230
22 of such Act);

23 (3) examines the viability of providing the con-
24 tinuation of medicare coverage under such section
25 226(b) based on a sliding scale premium for individ-

1 uals whose annual income exceeds such contribution
2 and benefit base;

3 (4) examines the viability of providing the con-
4 tinuation of medicare coverage under such section
5 226(b) based on a premium buy-in by the bene-
6 ficiary’s employer in lieu of coverage under private
7 health insurance;

8 (5) examines the interrelation between the use
9 of the continuation of medicare coverage under such
10 section 226(b) and the use of private health insur-
11 ance coverage by individuals during the extended pe-
12 riod; and

13 (6) recommends such legislative or administra-
14 tive changes relating to the continuation of medicare
15 coverage for recipients of social security disability
16 benefits as the Comptroller General determines are
17 appropriate.

18 **SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
19 **FRASTRUCTURES TO SUPPORT WORKING IN-**
20 **DIVIDUALS WITH DISABILITIES.**

21 (a) ESTABLISHMENT.—

22 (1) IN GENERAL.—The Secretary of Health and
23 Human Services (in this section referred to as the
24 “Secretary”) shall award grants described in sub-
25 section (b) to States to support the design, establish-

1 ment, and operation of State infrastructures that
2 provide items and services to support working indi-
3 viduals with disabilities.

4 (2) APPLICATION.—In order to be eligible for
5 an award of a grant under this section, a State shall
6 submit an application to the Secretary at such time,
7 in such manner, and containing such information as
8 the Secretary shall require.

9 (3) DEFINITION OF STATE.—In this section,
10 the term “State” means each of the 50 States, the
11 District of Columbia, Puerto Rico, Guam, the
12 United States Virgin Islands, American Samoa, and
13 the Commonwealth of the Northern Mariana Is-
14 lands.

15 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
16 REACH.—

17 (1) IN GENERAL.—Out of the funds appro-
18 priated under subsection (e), the Secretary shall
19 award grants to States to—

20 (A) support the establishment, implemen-
21 tation, and operation of the State infrastruc-
22 tures described in subsection (a); and

23 (B) conduct outreach campaigns regarding
24 the existence of such infrastructures.

25 (2) ELIGIBILITY FOR GRANTS.—

1 (A) IN GENERAL.—No State may receive a
2 grant under this subsection unless the State—

3 (i) has an approved amendment to the
4 State plan under title XIX of the Social
5 Security Act (42 U.S.C. 1396 et seq.) that
6 provides medical assistance under such
7 plan to individuals described in section
8 1902(a)(10)(A)(ii)(XV) of the Social Secu-
9 rity Act (42 U.S.C.
10 1396a(a)(10)(A)(ii)(XV)); and

11 (ii) demonstrates to the satisfaction of
12 the Secretary that the State makes per-
13 sonal assistance services available under
14 the State plan under title XIX of the So-
15 cial Security Act (42 U.S.C. 1396 et seq.)
16 to the extent necessary to enable individ-
17 uals described in clause (i) to remain em-
18 ployed (as determined under section
19 1905(v)(2) of the Social Security Act (42
20 U.S.C. 1396d(v)(2)).

21 (B) DEFINITION OF PERSONAL ASSIST-
22 ANCE SERVICES.—In this paragraph, the term
23 “personal assistance services” means a range of
24 services, provided by 1 or more persons, de-
25 signed to assist an individual with a disability

1 to perform daily activities on and off the job
2 that the individual would typically perform if
3 the individual did not have a disability. Such
4 services shall be designed to increase the indi-
5 vidual's control in life and ability to perform ev-
6 eryday activities on or off the job.

7 (3) DETERMINATION OF AWARDS.—

8 (A) IN GENERAL.—Subject to subpara-
9 graph (B), the Secretary shall determine a for-
10 mula for awarding grants to States under this
11 section that provides special consideration to
12 States that provide medical assistance under
13 title XIX of the Social Security Act to individ-
14 uals described in section
15 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
16 1396a(a)(10)(A)(ii)(XVI)).

17 (B) AWARD LIMITS.—

18 (i) MINIMUM AWARDS.—

19 (I) IN GENERAL.—Subject to
20 subclause (II), no State with an ap-
21 proved application under this section
22 shall receive a grant for a fiscal year
23 that is less than \$500,000.

24 (II) PRO RATA REDUCTIONS.—If
25 the funds appropriated under sub-

1 section (e) for a fiscal year are not
2 sufficient to pay each State with an
3 application approved under this sec-
4 tion the minimum amount described
5 in subclause (I), the Secretary shall
6 pay each such State an amount equal
7 to the pro rata share of the amount
8 made available.

9 (ii) MAXIMUM AWARDS.—No State
10 with an application that has been approved
11 under this section shall receive a grant for
12 a fiscal year that exceeds 15 percent of the
13 total expenditures by the State (including
14 the reimbursed Federal share of such ex-
15 penditures) for medical assistance for indi-
16 viduals eligible under subclause (XV) and
17 (XVI) of section 1902(a)(10)(A)(ii) of the
18 Social Security Act (42 U.S.C.
19 1396a(a)(10)(A)(ii)), as estimated by the
20 State and approved by the Secretary.

21 (c) AVAILABILITY OF FUNDS.—

22 (1) FUNDS AWARDED TO STATES.—Funds
23 awarded to a State under a grant made under this
24 section for a fiscal year shall remain available until
25 expended.

1 (2) FUNDS NOT AWARDED TO STATES.—Funds
2 not awarded to States in the fiscal year for which
3 they are appropriated shall remain available in suc-
4 ceeding fiscal years for awarding by the Secretary.

5 (d) ANNUAL REPORT.—A State that is awarded a
6 grant under this section shall submit an annual report to
7 the Secretary on the use of funds provided under the
8 grant. Each report shall include the percentage increase
9 in the number of title II disability beneficiaries, as defined
10 in section 1148(k)(3) of the Social Security Act (as
11 amended by section 201) in the State, and title XVI dis-
12 ability beneficiaries, as defined in section 1148(k)(4) of
13 the Social Security Act (as so amended) in the State who
14 return to work.

15 (e) AUTHORIZATION OF APPROPRIATIONS.—There is
16 authorized to be appropriated to carry out this section—

17 (1) for fiscal year 2000, \$20,000,000;

18 (2) for fiscal year 2001, \$25,000,000;

19 (3) for fiscal year 2002, \$30,000,000;

20 (4) for fiscal year 2003, \$35,000,000;

21 (5) for fiscal year 2004, \$40,000,000; and

22 (6) for each of fiscal years 2005 through 2010,
23 the amount appropriated for the preceding fiscal
24 year under this subsection increased by the percent-
25 age increase (if any) in the Consumer Price Index

1 for All Urban Consumers (United States city aver-
2 age) for the preceding fiscal year.

3 (f) RECOMMENDATION.—Not later than October 1,
4 2009, the Secretary, in consultation with the Ticket to
5 Work and Work Incentives Advisory Panel established
6 under section 101(f), shall submit a recommendation to
7 the Committee on Commerce of the House of Representa-
8 tives and the Committee on Finance of the Senate regard-
9 ing whether the grant program established under this sec-
10 tion should be continued after fiscal year 2010.

11 **SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE**
12 **MEDICAID PROGRAM OF WORKERS WITH PO-**
13 **TENTIALLY SEVERE DISABILITIES.**

14 (a) STATE APPLICATION.—A State may apply to the
15 Secretary of Health and Human Services (in this section
16 referred to as the “Secretary”) for approval of a dem-
17 onstration project (in this section referred to as a “dem-
18 onstration project”) under which up to a specified max-
19 imum number of individuals who are workers with a po-
20 tentially severe disability (as defined in subsection (b)(1))
21 are provided medical assistance equal to that provided
22 under section 1905(a) of the Social Security Act (42
23 U.S.C. 1396d(a)) to individuals described in section
24 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
25 1396a(a)(10)(A)(ii)(XV)).

1 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
2 ABILITY DEFINED.—For purposes of this section—

3 (1) IN GENERAL.—The term “worker with a
4 potentially severe disability” means, with respect to
5 a demonstration project, an individual who—

6 (A) is at least 16, but less than 65, years
7 of age;

8 (B) has a specific physical or mental im-
9 pairment that, as defined by the State under
10 the demonstration project, is reasonably ex-
11 pected, but for the receipt of items and services
12 described in section 1905(a) of the Social Secu-
13 rity Act (42 U.S.C. 1396d(a)), to become blind
14 or disabled (as defined under section 1614(a) of
15 the Social Security Act (42 U.S.C. 1382c(a)));
16 and

17 (C) is employed (as defined in paragraph
18 (2)).

19 (2) DEFINITION OF EMPLOYED.—An individual
20 is considered to be “employed” if the individual—

21 (A) is earning at least the applicable min-
22 imum wage requirement under section 6 of the
23 Fair Labor Standards Act (29 U.S.C. 206) and
24 working at least 40 hours per month; or

1 (B) is engaged in a work effort that meets
2 substantial and reasonable threshold criteria for
3 hours of work, wages, or other measures, as de-
4 fined under the demonstration project and ap-
5 proved by the Secretary.

6 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

7 (1) IN GENERAL.—Subject to paragraph (3),
8 the Secretary shall approve applications under sub-
9 section (a) that meet the requirements of paragraph
10 (2) and such additional terms and conditions as the
11 Secretary may require. The Secretary may waive the
12 requirement of section 1902(a)(1) of the Social Se-
13 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
14 State demonstrations.

15 (2) TERMS AND CONDITIONS OF DEMONSTRA-
16 TION PROJECTS.—The Secretary may not approve a
17 demonstration project under this section unless the
18 State provides assurances satisfactory to the Sec-
19 retary that the following conditions are or will be
20 met:

21 (A) ELECTION OF OPTIONAL CATEGORY.—

22 The State has elected to provide coverage under
23 its plan under title XIX of the Social Security
24 Act of individuals described in section

1 1902(a)(10)(A)(ii)(XV) of the Social Security
2 Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

3 (B) MAINTENANCE OF STATE EFFORT.—
4 Federal funds paid to a State pursuant to this
5 section must be used to supplement, but not
6 supplant, the level of State funds expended for
7 workers with potentially severe disabilities
8 under programs in effect for such individuals at
9 the time the demonstration project is approved
10 under this section.

11 (C) INDEPENDENT EVALUATION.—The
12 State provides for an independent evaluation of
13 the project.

14 (3) LIMITATIONS ON FEDERAL FUNDING.—

15 (A) AUTHORIZATION OF APPROPRIA-
16 TIONS.—There is authorized to be appropriated
17 to carry out this section—

18 (i) for fiscal year 2000, \$72,000,000;

19 (ii) for fiscal year 2001, \$74,000,000;

20 (iii) for fiscal year 2002, \$78,000,000;

21 and

22 (iv) for fiscal year 2003, \$81,000,000.

23 (B) LIMITATION ON PAYMENTS.—In no
24 case may—

1 (i) the aggregate amount of payments
2 made by the Secretary to States under this
3 section, other than for administrative ex-
4 penses described in clause (ii), exceed
5 \$300,000,000;

6 (ii) the aggregate amount of payments
7 made by the Secretary to States for ad-
8 ministrative expenses relating to annual re-
9 ports required under subsection (d) exceed
10 \$5,000,000; or

11 (iii) payments be provided by the Sec-
12 retary for a fiscal year after fiscal year
13 2005.

14 (C) FUNDS ALLOCATED TO STATES.—The
15 Secretary shall allocate funds to States based
16 on their applications and the availability of
17 funds. Funds allocated to a State under a grant
18 made under this section for a fiscal year shall
19 remain available until expended.

20 (D) FUNDS NOT ALLOCATED TO STATES.—
21 Funds not allocated to States in the fiscal year
22 for which they are appropriated shall remain
23 available in succeeding fiscal years for alloca-
24 tion by the Secretary using the allocation for-
25 mula established under this section.

1 (E) PAYMENTS TO STATES.—The Sec-
2 retary shall pay to each State with a dem-
3 onstration project approved under this section,
4 from its allocation under subparagraph (C), an
5 amount for each quarter equal to the Federal
6 medical assistance percentage (as defined in
7 section 1905(b) of the Social Security Act (42
8 U.S.C. 1395d(b)) of expenditures in the quarter
9 for medical assistance provided to workers with
10 a potentially severe disability.

11 (d) ANNUAL REPORT.—A State with a demonstration
12 project approved under this section shall submit an annual
13 report to the Secretary on the use of funds provided under
14 the grant. Each report shall include enrollment and finan-
15 cial statistics on—

16 (1) the total population of workers with poten-
17 tially severe disabilities served by the demonstration
18 project; and

19 (2) each population of such workers with a spe-
20 cific physical or mental impairment described in sub-
21 section (b)(1)(B) served by such project.

22 (e) RECOMMENDATION.—Not later than October 1,
23 2002, the Secretary shall submit a recommendation to the
24 Committee on Commerce of the House of Representatives
25 and the Committee on Finance of the Senate regarding

1 whether the demonstration project established under this
2 section should be continued after fiscal year 2003.

3 (f) STATE DEFINED.—In this section, the term
4 “State” has the meaning given such term for purposes of
5 title XIX of the Social Security Act (42 U.S.C. 1396 et
6 seq.).

7 **SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUS-**
8 **PEND MEDIGAP INSURANCE WHEN COVERED**
9 **UNDER A GROUP HEALTH PLAN.**

10 (a) IN GENERAL.—Section 1882(q) of the Social Se-
11 curity Act (42 U.S.C. 1395ss(q)) is amended—

12 (1) in paragraph (5)(C), by inserting “or para-
13 graph (6)” after “this paragraph”; and

14 (2) by adding at the end the following new
15 paragraph:

16 “(6) Each medicare supplemental policy shall
17 provide that benefits and premiums under the policy
18 shall be suspended at the request of the policyholder
19 if the policyholder is entitled to benefits under sec-
20 tion 226(b) and is covered under a group health
21 plan (as defined in section 1862(b)(1)(A)(v)). If
22 such suspension occurs and if the policyholder or
23 certificate holder loses coverage under the group
24 health plan, such policy shall be automatically re-
25 instituted (effective as of the date of such loss of

1 coverage) under terms described in subsection
 2 (n)(6)(A)(ii) as of the loss of such coverage if the
 3 policyholder provides notice of loss of such coverage
 4 within 90 days after the date of such loss.”.

5 (b) EFFECTIVE DATE.—The amendments made by
 6 subsection (a) apply with respect to requests made after
 7 the date of the enactment of this Act.

8 **TITLE III—DEMONSTRATION**

9 **PROJECTS AND STUDIES**

10 **SEC. 301. EXTENSION OF DISABILITY INSURANCE PRO-**

11 **GRAM DEMONSTRATION PROJECT AUTHOR-**

12 **ITY.**

13 (a) EXTENSION OF AUTHORITY.—Title II of the So-
 14 cial Security Act (42 U.S.C. 401 et seq.) is amended by
 15 adding at the end the following:

16 “DEMONSTRATION PROJECT AUTHORITY

17 “SEC. 234. (a) AUTHORITY.—

18 “(1) IN GENERAL.—The Commissioner of So-
 19 cial Security (in this section referred to as the ‘Com-
 20 missioner’) shall develop and carry out experiments
 21 and demonstration projects designed to determine
 22 the relative advantages and disadvantages of—

23 “(A) various alternative methods of treat-
 24 ing the work activity of individuals entitled to
 25 disability insurance benefits under section 223
 26 or to monthly insurance benefits under section

1 202 based on such individual’s disability (as de-
2 fined in section 223(d)), including such meth-
3 ods as a reduction in benefits based on earn-
4 ings, designed to encourage the return to work
5 of such individuals;

6 “(B) altering other limitations and condi-
7 tions applicable to such individuals (including
8 lengthening the trial work period (as defined in
9 section 222(e)), altering the 24-month waiting
10 period for hospital insurance benefits under sec-
11 tion 226, altering the manner in which the pro-
12 gram under this title is administered, earlier re-
13 ferral of such individuals for rehabilitation, and
14 greater use of employers and others to develop,
15 perform, and otherwise stimulate new forms of
16 rehabilitation); and

17 “(C) implementing sliding scale benefit off-
18 sets using variations in—

19 “(i) the amount of the offset as a pro-
20 portion of earned income;

21 “(ii) the duration of the offset period;
22 and

23 “(iii) the method of determining the
24 amount of income earned by such individ-
25 uals,

1 to the end that savings will accrue to the Trust
2 Funds, or to otherwise promote the objectives or fa-
3 cilitate the administration of this title.

4 “(2) AUTHORITY FOR EXPANSION OF SCOPE.—

5 The Commissioner may expand the scope of any
6 such experiment or demonstration project to include
7 any group of applicants for benefits under the pro-
8 gram established under this title with impairments
9 that reasonably may be presumed to be disabling for
10 purposes of such demonstration project, and may
11 limit any such demonstration project to any such
12 group of applicants, subject to the terms of such
13 demonstration project which shall define the extent
14 of any such presumption.

15 “(b) REQUIREMENTS.—The experiments and dem-
16 onstration projects developed under subsection (a) shall be
17 of sufficient scope and shall be carried out on a wide
18 enough scale to permit a thorough evaluation of the alter-
19 native methods under consideration while giving assurance
20 that the results derived from the experiments and projects
21 will obtain generally in the operation of the disability in-
22 surance program under this title without committing such
23 program to the adoption of any particular system either
24 locally or nationally.

1 “(c) AUTHORITY TO WAIVE COMPLIANCE WITH
2 BENEFITS REQUIREMENTS.—In the case of any experi-
3 ment or demonstration project conducted under subsection
4 (a), the Commissioner may waive compliance with the ben-
5 efit requirements of this title and the requirements of sec-
6 tion 1148 as they relate to the program established under
7 this title, and the Secretary may (upon the request of the
8 Commissioner) waive compliance with the benefits require-
9 ments of title XVIII, insofar as is necessary for a thorough
10 evaluation of the alternative methods under consideration.
11 No such experiment or project shall be actually placed in
12 operation unless at least 90 days prior thereto a written
13 report, prepared for purposes of notification and informa-
14 tion only and containing a full and complete description
15 thereof, has been transmitted by the Commissioner to the
16 Committee on Ways and Means of the House of Rep-
17 resentatives and to the Committee on Finance of the Sen-
18 ate. Periodic reports on the progress of such experiments
19 and demonstration projects shall be submitted by the
20 Commissioner to such committees. When appropriate,
21 such reports shall include detailed recommendations for
22 changes in administration or law, or both, to carry out
23 the objectives stated in subsection (a).

24 “(d) REPORTS.—

1 “(1) INTERIM REPORTS.—On or before June 9
2 of each year, the Commissioner shall submit to the
3 Committee on Ways and Means of the House of
4 Representatives and to the Committee on Finance of
5 the Senate an annual interim report on the progress
6 of the experiments and demonstration projects car-
7 ried out under this subsection together with any re-
8 lated data and materials that the Commissioner may
9 consider appropriate.

10 “(2) TERMINATION AND FINAL REPORT.—The
11 authority under the preceding provisions of this sec-
12 tion (including any waiver granted pursuant to sub-
13 section (c)) shall terminate 5 years after the date of
14 the enactment of this Act. Not later than 90 days
15 after the termination of any experiment or dem-
16 onstration project carried out under this section, the
17 Commissioner shall submit to the Committee on
18 Ways and Means of the House of Representatives
19 and to the Committee on Finance of the Senate a
20 final report with respect to that experiment or dem-
21 onstration project.”.

22 (b) CONFORMING AMENDMENTS; TRANSFER OF
23 PRIOR AUTHORITY.—

24 (1) CONFORMING AMENDMENTS.—

1 (A) REPEAL OF PRIOR AUTHORITY.—Para-
2 graphs (1) through (4) of subsection (a) and
3 subsection (c) of section 505 of the Social Secu-
4 rity Disability Amendments of 1980 (42 U.S.C.
5 1310 note) are repealed.

6 (B) CONFORMING AMENDMENT REGARD-
7 ING FUNDING.—Section 201(k) of the Social
8 Security Act (42 U.S.C. 401(k)) is amended by
9 striking “section 505(a) of the Social Security
10 Disability Amendments of 1980” and inserting
11 “section 234”.

12 (2) TRANSFER OF PRIOR AUTHORITY.—With
13 respect to any experiment or demonstration project
14 being conducted under section 505(a) of the Social
15 Security Disability Amendments of 1980 (42 U.S.C.
16 1310 note) as of the date of enactment of this Act,
17 the authority to conduct such experiment or dem-
18 onstration project (including the terms and condi-
19 tions applicable to the experiment or demonstration
20 project) shall be treated as if that authority (and
21 such terms and conditions) had been established
22 under section 234 of the Social Security Act, as
23 added by subsection (a).

1 **SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR RE-**
2 **DUCTIONS IN DISABILITY INSURANCE BENE-**
3 **FITS BASED ON EARNINGS.**

4 (a) **AUTHORITY.**—The Commissioner of Social Secu-
5 rity shall conduct demonstration projects for the purpose
6 of evaluating, through the collection of data, a program
7 for title II disability beneficiaries (as defined in section
8 1148(k)(3) of the Social Security Act) under which bene-
9 fits payable under section 223 of such Act, or under sec-
10 tion 202 of such Act based on the beneficiary's disability,
11 are reduced by \$1 for each \$2 of the beneficiary's earnings
12 that is above a level to be determined by the Commis-
13 sioner. Such projects shall be conducted at a number of
14 localities which the Commissioner shall determine is suffi-
15 cient to adequately evaluate the appropriateness of na-
16 tional implementation of such a program. Such projects
17 shall identify reductions in Federal expenditures that may
18 result from the permanent implementation of such a pro-
19 gram.

20 (b) **SCOPE AND SCALE AND MATTERS TO BE DETER-**
21 **MINED.**—

22 (1) **IN GENERAL.**—The demonstration projects
23 developed under subsection (a) shall be of sufficient
24 duration, shall be of sufficient scope, and shall be
25 carried out on a wide enough scale to permit a thor-
26 ough evaluation of the project to determine—

1 (A) the effects, if any, of induced entry
2 into the project and reduced exit from the
3 project;

4 (B) the extent, if any, to which the project
5 being tested is affected by whether it is in oper-
6 ation in a locality within an area under the ad-
7 ministration of the Ticket to Work and Self-
8 Sufficiency Program established under section
9 1148 of the Social Security Act; and

10 (C) the savings that accrue to the Federal
11 Old-Age and Survivors Insurance Trust Fund,
12 the Federal Disability Insurance Trust Fund,
13 and other Federal programs under the project
14 being tested.

15 The Commissioner shall take into account advice
16 provided by the Ticket to Work and Work Incentives
17 Advisory Panel pursuant to section 101(f)(2)(B)(ii)
18 of this Act.

19 (2) ADDITIONAL MATTERS.—The Commissioner
20 shall also determine with respect to each project—

21 (A) the annual cost (including net cost) of
22 the project and the annual cost (including net
23 cost) that would have been incurred in the ab-
24 sence of the project;

1 (B) the determinants of return to work, in-
2 cluding the characteristics of the beneficiaries
3 who participate in the project; and

4 (C) the employment outcomes, including
5 wages, occupations, benefits, and hours worked,
6 of beneficiaries who return to work as a result
7 of participation in the project.

8 The Commissioner may include within the matters
9 evaluated under the project the merits of trial work
10 periods and periods of extended eligibility.

11 (c) WAIVERS.—The Commissioner may waive compli-
12 ance with the benefit provisions of title II of the Social
13 Security Act, and the Secretary of Health and Human
14 Services may waive compliance with the benefit require-
15 ments of title XVIII of such Act, insofar as is necessary
16 for a thorough evaluation of the alternative methods under
17 consideration. No such project shall be actually placed in
18 operation unless at least 90 days prior thereto a written
19 report, prepared for purposes of notification and informa-
20 tion only and containing a full and complete description
21 thereof, has been transmitted by the Commissioner to the
22 Committee on Ways and Means of the House of Rep-
23 resentatives and to the Committee on Finance of the Sen-
24 ate. Periodic reports on the progress of such projects shall
25 be submitted by the Commissioner to such committees.

1 When appropriate, such reports shall include detailed rec-
2 ommendations for changes in administration or law, or
3 both, to carry out the objectives stated in subsection (a).

4 (d) INTERIM REPORTS.—Not later than 2 years after
5 the date of enactment of this Act, and annually thereafter,
6 the Commissioner of Social Security shall submit to Con-
7 gress an interim report on the progress of the demonstra-
8 tion projects carried out under this subsection together
9 with any related data and materials that the Commis-
10 sioner of Social Security may consider appropriate.

11 (e) FINAL REPORT.—The Commissioner of Social Se-
12 curity shall submit to Congress a final report with respect
13 to all demonstration projects carried out under this section
14 not later than 1 year after their completion.

15 (f) EXPENDITURES.—Expenditures made for dem-
16 onstration projects under this section shall be made from
17 the Federal Disability Insurance Trust Fund and the Fed-
18 eral Old-Age and Survivors Insurance Trust Fund, as de-
19 termined appropriate by the Commissioner of Social Secu-
20 rity, and from the Federal Hospital Insurance Trust Fund
21 and the Federal Supplementary Medical Insurance Trust
22 Fund, as determined appropriate by the Secretary of
23 Health and Human Services, to the extent provided in ad-
24 vance in appropriation Acts.

1 **SEC. 303. STUDIES AND REPORTS.**

2 (a) STUDY BY GENERAL ACCOUNTING OFFICE OF
3 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
4 TIVES.—

5 (1) STUDY.—As soon as practicable after the
6 date of enactment of this Act, the Comptroller Gen-
7 eral of the United States shall undertake a study to
8 assess existing tax credits and other disability-re-
9 lated employment incentives under the Americans
10 with Disabilities Act of 1990 and other Federal
11 laws. In such study, the Comptroller General shall
12 specifically address the extent to which such credits
13 and other incentives would encourage employers to
14 hire and retain individuals with disabilities.

15 (2) REPORT.—Not later than 3 years after the
16 date of enactment of this Act, the Comptroller Gen-
17 eral shall transmit to the Committee on Ways and
18 Means of the House of Representatives and the
19 Committee on Finance of the Senate a written re-
20 port presenting the results of the Comptroller Gen-
21 eral's study conducted pursuant to this subsection,
22 together with such recommendations for legislative
23 or administrative changes as the Comptroller Gen-
24 eral determines are appropriate.

25 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
26 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS

1 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
2 ING CONCURRENT ENTITLEMENT.—

3 (1) STUDY.—As soon as practicable after the
4 date of enactment of this Act, the Comptroller Gen-
5 eral of the United States shall undertake a study to
6 evaluate the coordination under current law of the
7 disability insurance program under title II of the So-
8 cial Security Act and the supplemental security in-
9 come program under title XVI of such Act, as such
10 programs relate to individuals entering or leaving
11 concurrent entitlement under such programs. In
12 such study, the Comptroller General shall specifically
13 address the effectiveness of work incentives under
14 such programs with respect to such individuals and
15 the effectiveness of coverage of such individuals
16 under titles XVIII and XIX of such Act.

17 (2) REPORT.—Not later than 3 years after the
18 date of enactment of this Act, the Comptroller Gen-
19 eral shall transmit to the Committee on Ways and
20 Means of the House of Representatives and the
21 Committee on Finance of the Senate a written re-
22 port presenting the results of the Comptroller Gen-
23 eral's study conducted pursuant to this subsection,
24 together with such recommendations for legislative

1 or administrative changes as the Comptroller Gen-
2 eral determines are appropriate.

3 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
4 THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY
5 LIMIT ON RETURN TO WORK.—

6 (1) STUDY.—As soon as practicable after the
7 date of enactment of this Act, the Comptroller Gen-
8 eral of the United States shall undertake a study of
9 the substantial gainful activity level applicable as of
10 that date to recipients of benefits under section 223
11 of the Social Security Act (42 U.S.C. 423) and
12 under section 202 of such Act (42 U.S.C. 402) on
13 the basis of a recipient having a disability, and the
14 effect of such level as a disincentive for those recipi-
15 ents to return to work. In the study, the Comptroller
16 General also shall address the merits of increasing
17 the substantial gainful activity level applicable to
18 such recipients of benefits and the rationale for not
19 yearly indexing that level to inflation.

20 (2) REPORT.—Not later than 2 years after the
21 date of enactment of this Act, the Comptroller Gen-
22 eral shall transmit to the Committee on Ways and
23 Means of the House of Representatives and the
24 Committee on Finance of the Senate a written re-
25 port presenting the results of the Comptroller Gen-

1 eral’s study conducted pursuant to this subsection,
2 together with such recommendations for legislative
3 or administrative changes as the Comptroller Gen-
4 eral determines are appropriate.

5 (d) REPORT ON DISREGARDS UNDER THE DI AND
6 SSI PROGRAMS.—Not later than 90 days after the date
7 of enactment of this Act, the Commissioner of Social Secu-
8 rity shall submit to the Committee on Ways and Means
9 of the House of Representatives and the Committee on
10 Finance of the Senate a report that—

11 (1) identifies all income, assets, and resource
12 disregards (imposed under statutory or regulatory
13 authority) that are applicable to individuals receiving
14 benefits under title II or XVI of the Social Security
15 Act (42 U.S.C. 401 et seq., 1381 et seq.);

16 (2) with respect to each such disregard—

17 (A) specifies the most recent statutory or
18 regulatory modification of the disregard; and

19 (B) recommends whether further statutory
20 or regulatory modification of the disregard
21 would be appropriate; and

22 (3) with respect to the disregard described in
23 section 1612(b)(7) of such Act (42 U.S.C.
24 1382a(b)(7)) (relating to grants, scholarships, or fel-
25 lowships received for use in paying the cost of tui-

1 tion and fees at any educational (including technical
2 or vocational education) institution)—

3 (A) identifies the number of individuals re-
4 ceiving benefits under title XVI of such Act (42
5 U.S.C. 1381 et seq.) who have attained age 22
6 and have not had any portion of any grant,
7 scholarship, or fellowship received for use in
8 paying the cost of tuition and fees at any edu-
9 cational (including technical or vocational edu-
10 cation) institution excluded from their income
11 in accordance with that section;

12 (B) recommends whether the age at which
13 such grants, scholarships, or fellowships are ex-
14 cluded from income for purposes of determining
15 eligibility under title XVI of such Act should be
16 increased to age 25; and

17 (C) recommends whether such disregard
18 should be expanded to include any such grant,
19 scholarship, or fellowship received for use in
20 paying the cost of room and board at any such
21 institution.

22 (e) STUDY BY THE GENERAL ACCOUNTING OFFICE
23 OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY IN-
24 SURANCE PROGRAM DEMONSTRATION AUTHORITY.—

1 (1) STUDY.—As soon as practicable after the
2 date of the enactment of this Act, the Comptroller
3 General of the United States shall undertake a study
4 to assess the results of the Social Security Adminis-
5 tration’s efforts to conduct disability demonstrations
6 authorized under prior law as well as under section
7 301 of this Act.

8 (2) REPORT.—Not later than 5 years after the
9 date of the enactment of this Act, the Comptroller
10 General shall transmit to the Committee on Ways
11 and Means of the House of Representatives and the
12 Committee on Finance of the Senate a written re-
13 port presenting the results of the Comptroller Gen-
14 eral’s study conducted pursuant to this section, to-
15 gether with a recommendation as to whether the
16 demonstration authority authorized under section
17 301 of this Act should be made permanent.

18 **TITLE IV—MISCELLANEOUS AND**
19 **TECHNICAL AMENDMENTS**

20 **SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG**
21 **ADDICTS AND ALCOHOLICS.**

22 (a) CLARIFICATION RELATING TO THE EFFECTIVE
23 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY
24 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-

1 tion 105(a)(5) of the Contract with America Advancement
2 Act of 1996 (42 U.S.C. 405 note) is amended—

3 (1) in subparagraph (A), by striking “by the
4 Commissioner of Social Security” and “by the Com-
5 missioner”; and

6 (2) by adding at the end the following:

7 “(D) For purposes of this paragraph, an
8 individual’s claim, with respect to benefits
9 under title II based on disability, which has
10 been denied in whole before the date of the en-
11 actment of this Act, may not be considered to
12 be finally adjudicated before such date if, on or
13 after such date—

14 “(i) there is pending a request for ei-
15 ther administrative or judicial review with
16 respect to such claim; or

17 “(ii) there is pending, with respect to
18 such claim, a readjudication by the Com-
19 missioner of Social Security pursuant to
20 relief in a class action or implementation
21 by the Commissioner of a court remand
22 order.

23 “(E) Notwithstanding the provisions of
24 this paragraph, with respect to any individual
25 for whom the Commissioner of Social Security

1 does not perform the entitlement redetermina-
2 tion before the date prescribed in subparagraph
3 (C), the Commissioner shall perform such enti-
4 tlement redetermination in lieu of a continuing
5 disability review whenever the Commissioner de-
6 termines that the individual's entitlement is
7 subject to redetermination based on the pre-
8 ceeding provisions of this paragraph, and the
9 provisions of section 223(f) shall not apply to
10 such redetermination.”.

11 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
12 SIONS CONCERNING REPRESENTATIVE PAYEES AND
13 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
14 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
15 Section 105(a)(5)(B) of the Contract with America Ad-
16 vancement Act of 1996 (42 U.S.C. 405 note) is amended
17 to read as follows:

18 “(B) The amendments made by para-
19 graphs (2) and (3) shall take effect on July 1,
20 1996, with respect to any individual—

21 “(i) whose claim for benefits is finally
22 adjudicated on or after the date of the en-
23 actment of this Act; or

1 “(ii) whose entitlement to benefits is
2 based upon an entitlement redetermination
3 made pursuant to subparagraph (C).”.

4 (c) EFFECTIVE DATES.—The amendments made by
5 this section shall take effect as if included in the enact-
6 ment of section 105 of the Contract with America Ad-
7 vancement Act of 1996 (Public Law 104–121; 110 Stat.
8 852 et seq.).

9 **SEC. 402. TREATMENT OF PRISONERS.**

10 (a) IMPLEMENTATION OF PROHIBITION AGAINST
11 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

12 (1) IN GENERAL.—Section 202(x)(3) of the So-
13 cial Security Act (42 U.S.C. 402(x)(3)) is
14 amended—

15 (A) by inserting “(A)” after “(3)”; and

16 (B) by adding at the end the following:

17 “(B)(i) The Commissioner shall enter into an agree-
18 ment under this subparagraph with any interested State
19 or local institution comprising a jail, prison, penal institu-
20 tion, or correctional facility, or comprising any other insti-
21 tution a purpose of which is to confine individuals as de-
22 scribed in paragraph (1)(A)(ii). Under such agreement—

23 “(I) the institution shall provide to the Com-
24 missioner, on a monthly basis and in a manner spec-
25 ified by the Commissioner, the names, Social Secu-

1 rity account numbers, dates of birth, confinement
2 commencement dates, and, to the extent available to
3 the institution, such other identifying information
4 concerning the individuals confined in the institution
5 as the Commissioner may require for the purpose of
6 carrying out paragraph (1) and other provisions of
7 this title; and

8 “(II) the Commissioner shall pay to the institu-
9 tion, with respect to information described in sub-
10 clause (I) concerning each individual who is confined
11 therein as described in paragraph (1)(A), who re-
12 ceives a benefit under this title for the month pre-
13 ceding the first month of such confinement, and
14 whose benefit under this title is determined by the
15 Commissioner to be not payable by reason of con-
16 finement based on the information provided by the
17 institution, \$400 (subject to reduction under clause
18 (ii)) if the institution furnishes the information to
19 the Commissioner within 30 days after the date such
20 individual’s confinement in such institution begins,
21 or \$200 (subject to reduction under clause (ii)) if
22 the institution furnishes the information after 30
23 days after such date but within 90 days after such
24 date.

1 “(ii) The dollar amounts specified in clause (i)(II)
2 shall be reduced by 50 percent if the Commissioner is also
3 required to make a payment to the institution with respect
4 to the same individual under an agreement entered into
5 under section 1611(e)(1)(I).

6 “(iii) There are authorized to be transferred from the
7 Federal Old-Age and Survivors Insurance Trust Fund and
8 the Federal Disability Insurance Trust Fund, as appro-
9 priate, such sums as may be necessary to enable the Com-
10 missioner to make payments to institutions required by
11 clause (i)(II).

12 “(iv) The Commissioner shall maintain, and shall
13 provide on a reimbursable basis, information obtained pur-
14 suant to agreements entered into under this paragraph to
15 any agency administering a Federal or federally-assisted
16 cash, food, or medical assistance program for eligibility
17 and other administrative purposes under such program.”.

18 (2) CONFORMING AMENDMENTS TO THE PRI-
19 VACY ACT.—Section 552a(a)(8)(B) of title 5, United
20 States Code, is amended—

21 (A) in clause (vi), by striking “or” at the
22 end;

23 (B) in clause (vii), by adding “or” at the
24 end; and

25 (C) by adding at the end the following:

1 “(viii) matches performed pursuant to
2 section 202(x)(3) or 1611(e)(1) of the So-
3 cial Security Act (42 U.S.C. 402(x)(3),
4 1382(e)(1));”.

5 (3) CONFORMING AMENDMENTS TO TITLE
6 XVI.—

7 (A) Section 1611(e)(1)(I)(i)(I) of the So-
8 cial Security Act (42 U.S.C. 1382(e)(1)(I)(i)(I))
9 is amended by striking “; and” and inserting
10 “and the other provisions of this title; and”.

11 (B) Section 1611(e)(1)(I)(ii)(II) of such
12 Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amend-
13 ed by striking “is authorized to provide, on a
14 reimbursable basis,” and inserting “shall main-
15 tain, and shall provide on a reimbursable
16 basis,”.

17 (C) Section 1611(e)(1)(I)(ii)(II) of such
18 Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amend-
19 ed by striking “eligibility purposes” and insert-
20 ing “eligibility and other administrative pur-
21 poses under such program”.

22 (4) EFFECTIVE DATE.—The amendments made
23 by this subsection shall apply to individuals whose
24 period of confinement in an institution commences

1 on or after the first day of the fourth month begin-
2 ning after the month in which this Act is enacted.

3 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
4 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
5 PRISONMENT FOR MORE THAN 1 YEAR.—

6 (1) IN GENERAL.—Section 202(x)(1)(A) of the
7 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
8 amended—

9 (A) in clause (i), by striking “an offense
10 punishable by imprisonment for more than 1
11 year (regardless of the actual sentence im-
12 posed)” and inserting “a criminal offense”; and

13 (B) in clause (ii)(I), by striking “an of-
14 fense punishable by imprisonment for more
15 than 1 year” and inserting “a criminal of-
16 fense”.

17 (2) EFFECTIVE DATE.—The amendments made
18 by this subsection shall apply to individuals whose
19 period of confinement in an institution commences
20 on or after the first day of the fourth month begin-
21 ning after the month in which this Act is enacted.

22 (c) CONFORMING TITLE XVI AMENDMENTS.—

23 (1) 50 PERCENT REDUCTION IN TITLE XVI PAY-
24 MENT IN CASE INVOLVING COMPARABLE TITLE II

1 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
2 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

3 (A) in clause (i)(II), by inserting “(subject
4 to reduction under clause (ii))” after “\$400”
5 and after “\$200”;

6 (B) by redesignating clauses (ii) and (iii)
7 as clauses (iii) and (iv) respectively; and

8 (C) by inserting after clause (i) the fol-
9 lowing:

10 “(ii) The dollar amounts specified in clause (i)(II)
11 shall be reduced by 50 percent if the Commissioner is also
12 required to make a payment to the institution with respect
13 to the same individual under an agreement entered into
14 under section 202(x)(3)(B).”.

15 (2) EXPANSION OF CATEGORIES OF INSTITU-
16 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
17 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
18 such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in
19 the matter preceding subclause (I) by striking “in-
20 stitution” and all that follows through “section
21 202(x)(1)(A),” and inserting “institution comprising
22 a jail, prison, penal institution, or correctional facil-
23 ity, or with any other interested State or local insti-
24 tution a purpose of which is to confine individuals
25 as described in section 202(x)(1)(A)(ii).”.

1 (3) ELIMINATION OF OVERLY BROAD EXEMP-
2 TION.—Section 1611(e)(1)(I)(iii) of such Act (as re-
3 designated by paragraph (1)(B)) is amended
4 further—

5 (A) by striking “(I) The provisions” and
6 all that follows through “(II)”; and

7 (B) by striking “eligibility purposes” and
8 inserting “eligibility and other administrative
9 purposes under such program”.

10 (4) EFFECTIVE DATE.—The amendments made
11 by this subsection shall take effect as if included in
12 the enactment of section 203(a) of the Personal Re-
13 sponsibility and Work Opportunity Reconciliation
14 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
15 The reference to section 202(x)(1)(A)(ii) in section
16 1611(e)(1)(I)(i) of the Social Security Act as
17 amended by paragraph (2) shall be deemed a ref-
18 erence to such section 202(x)(1)(A)(ii) of such Act
19 as amended by subsection (b)(1)(C).

20 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
21 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
22 TIONS UPON COMPLETION OF PRISON TERM.—

23 (1) IN GENERAL.—Section 202(x)(1)(A) of the
24 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
25 amended—

1 (A) in clause (i), by striking “or” at the
2 end;

3 (B) in clause (ii)(IV), by striking the pe-
4 riod and inserting “, or”; and

5 (C) by adding at the end the following new
6 clause:

7 “(iii) immediately upon completion of confine-
8 ment as described in clause (i) pursuant to convic-
9 tion of a criminal offense an element of which is sex-
10 ual activity, is confined by court order in an institu-
11 tion at public expense pursuant to a finding that the
12 individual is a sexually dangerous person or a sexual
13 predator or a similar finding.”.

14 (2) CONFORMING AMENDMENT.—Section
15 202(x)(1)(B)(ii) of such Act (42 U.S.C.
16 402(x)(1)(B)(ii)) is amended by striking “clause
17 (ii)” and inserting “clauses (ii) and (iii)”.

18 (3) EFFECTIVE DATE.—The amendments made
19 by this subsection shall apply with respect to bene-
20 fits for months ending after the date of the enact-
21 ment of this Act.

1 **SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF**
2 **EXEMPTION FROM SOCIAL SECURITY COV-**
3 **ERAGE.**

4 (a) IN GENERAL.—Notwithstanding section
5 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
6 emption which has been received under section 1402(e)(1)
7 of such Code by a duly ordained, commissioned, or li-
8 censed minister of a church, a member of a religious order,
9 or a Christian Science practitioner, and which is effective
10 for the taxable year in which this Act is enacted, may be
11 revoked by filing an application therefor (in such form and
12 manner, and with such official, as may be prescribed by
13 the Commissioner of Internal Revenue), if such applica-
14 tion is filed no later than the due date of the Federal in-
15 come tax return (including any extension thereof) for the
16 applicant's second taxable year beginning after December
17 31, 1999. Any such revocation shall be effective (for pur-
18 poses of chapter 2 of the Internal Revenue Code of 1986
19 and title II of the Social Security Act), as specified in the
20 application, either with respect to the applicant's first tax-
21 able year beginning after December 31, 1999, or with re-
22 spect to the applicant's second taxable year beginning
23 after such date, and for all succeeding taxable years; and
24 the applicant for any such revocation may not thereafter
25 again file application for an exemption under such section
26 1402(e)(1). If the application is filed after the due date

1 of the applicant's Federal income tax return for a taxable
2 year and is effective with respect to that taxable year, it
3 shall include or be accompanied by payment in full of an
4 amount equal to the total of the taxes that would have
5 been imposed by section 1401 of the Internal Revenue
6 Code of 1986 with respect to all of the applicant's income
7 derived in that taxable year which would have constituted
8 net earnings from self-employment for purposes of chapter
9 2 of such Code (notwithstanding paragraphs (4) and (5)
10 of section 1402(c)) except for the exemption under section
11 1402(e)(1) of such Code.

12 (b) EFFECTIVE DATE.—Subsection (a) shall apply
13 with respect to service performed (to the extent specified
14 in such subsection) in taxable years beginning after De-
15 cember 31, 1999, and with respect to monthly insurance
16 benefits payable under title II on the basis of the wages
17 and self-employment income of any individual for months
18 in or after the calendar year in which such individual's
19 application for revocation (as described in such sub-
20 section) is effective (and lump-sum death payments pay-
21 able under such title on the basis of such wages and self-
22 employment income in the case of deaths occurring in or
23 after such calendar year).

1 **SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING**
2 **TO COOPERATIVE RESEARCH OR DEM-**
3 **ONSTRATION PROJECTS UNDER TITLES II**
4 **AND XVI.**

5 (a) **IN GENERAL.**—Section 1110(a)(3) of the Social
6 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
7 ing “title XVI” and inserting “title II or XVI”.

8 (b) **EFFECTIVE DATE.**—The amendment made by
9 subsection (a) shall take effect as if included in the enact-
10 ment of the Social Security Independence and Program
11 Improvements Act of 1994 (Public Law 103–296; 108
12 Stat. 1464).

13 **SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
14 **WAGE REPORTS.**

15 (a) **IN GENERAL.**—Section 1137(a)(3) of the Social
16 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
17 inserting before the semicolon the following: “, and except
18 that in the case of wage reports with respect to domestic
19 service employment, a State may permit employers (as so
20 defined) that make returns with respect to such employ-
21 ment on a calendar year basis pursuant to section 3510
22 of the Internal Revenue Code of 1986 to make such re-
23 ports on an annual basis”.

24 (b) **TECHNICAL AMENDMENTS.**—Section 1137(a)(3)
25 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
26 amended—

1 (1) by striking “(as defined in section
2 453A(a)(2)(B)(iii))”; and

3 (2) by inserting “(as defined in section
4 453A(a)(2)(B))” after “employers” .

5 (c) EFFECTIVE DATE.—The amendments made by
6 this section shall apply to wage reports required to be sub-
7 mitted on and after the date of enactment of this Act.

8 **SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE**
9 **THEIR FEES VIA THE SOCIAL SECURITY AD-**
10 **MINISTRATION.**

11 (a) IN GENERAL.—Section 206 of the Social Security
12 Act (42 U.S.C. 606) is amended by adding at the end the
13 following:

14 “(d) ASSESSMENT ON ATTORNEYS.—

15 “(1) IN GENERAL.—Whenever a fee for services
16 is required to be certified for payment to an attorney
17 from a claimant’s past-due benefits pursuant to sub-
18 section (a)(4)(A) or (b)(1)(A), the Commissioner
19 shall impose on the attorney an assessment cal-
20 culated in accordance with paragraph (2).

21 “(2) AMOUNT.—

22 “(A) The amount of an assessment under
23 paragraph (1) shall be equal to the product ob-
24 tained by multiplying the amount of the rep-
25 resentative’s fee that would be required to be so

1 certified by subsection (a)(4)(A) or (b)(1)(A)
2 before the application of this subsection, by the
3 percentage specified in subparagraph (B).

4 “(B) The percentage specified in this sub-
5 paragraph is—

6 “(i) for calendar years before 2001,
7 6.3 percent, and

8 “(ii) for calendar years after 2000,
9 6.3 percent or such different percentage
10 rate as the Commissioner determines is
11 necessary in order to achieve full recovery
12 of the costs of certifying fees to attorneys
13 from the past-due benefits of claimants.

14 “(3) COLLECTION.—The Commissioner may
15 collect the assessment imposed on an attorney under
16 paragraph (1) by offset from the amount of the fee
17 otherwise required by subsection (a)(4)(A) or
18 (b)(1)(A) to be certified for payment to the attorney
19 from a claimant’s past-due benefits.

20 “(4) PROHIBITION ON CLAIMANT REIMBURSE-
21 MENT.—An attorney subject to an assessment under
22 paragraph (1) may not, directly or indirectly, re-
23 quest or otherwise obtain reimbursement for such
24 assessment from the claimant whose claim gave rise
25 to the assessment.

1 “(5) DISPOSITION OF ASSESSMENTS.—Assess-
2 ments on attorneys collected under this subsection
3 shall be credited to the Federal Old-Age and Sur-
4 vivors Insurance Trust Fund and the Federal Dis-
5 ability Insurance Trust Fund, as appropriate.

6 “(6) AUTHORIZATION OF APPROPRIATIONS.—
7 The assessments authorized under this section shall
8 be collected and available for obligation only to the
9 extent and in the amount provided in advance in ap-
10 propriations Acts. Amounts so appropriated are au-
11 thorized to remain available until expended, for ad-
12 ministrative expenses in carrying out title II of the
13 Social Security Act and related laws.

14 (b) CONFORMING AMENDMENTS.—

15 (1) Section 206(a)(4)(A) of such Act (42
16 U.S.C. 606(a)(4)(A)) is amended by inserting “and
17 subsection (d)” after “subparagraph (B)”.

18 (2) Section 206(b)(1)(A) of such Act (42
19 U.S.C. 606(b)(1)(A)) is amended by inserting “, but
20 subject to subsection (d) of this section” after “sec-
21 tion 205(i)”.

22 (c) EFFECTIVE DATE.—The amendments made by
23 this section shall apply in the case of any attorney with
24 respect to whom a fee for services is required to be cer-
25 tified for payment from a claimant’s past-due benefits

1 pursuant to subsection (a)(4)(A) or (b)(4)(A) of section
2 206 of the Social Security Act after—

3 (1) December 31, 1999, or

4 (2) the last day of the first month beginning
5 after the month in which this Act is enacted.

6 **SEC. 407. EXTENSION OF AUTHORITY OF STATE MEDICAID**
7 **FRAUD CONTROL UNITS.**

8 (a) EXTENSION OF CONCURRENT AUTHORITY TO IN-
9 VESTIGATE AND PROSECUTE FRAUD IN OTHER FEDERAL
10 HEALTH CARE PROGRAMS.—Section 1903(q)(3) of the
11 Social Security Act (42 U.S.C. 1396b(q)(3)) is amended—

12 (1) by inserting “(A)” after “in connection
13 with”; and

14 (2) by striking “title.” and inserting “title; and

15 (B) upon the approval of the Inspector General of
16 the relevant Federal agency in a particular case or
17 investigation, any aspect of the provision of health
18 care services and activities of providers of such serv-
19 ices under any Federal health care program (as de-
20 fined in section 1128B(f)(1)), if (i) the suspected
21 fraud or violation of law in such case or investiga-
22 tion is primarily related to the State plan under this
23 title, and (ii) when such approval is granted, the In-
24 spector General of the relevant Federal agency re-
25 tains the continuing authority to join the case or in-

1 investigation, or after consultation with the entity, to
2 replace the entity as the primary agency assigned to
3 the case or investigation.”.

4 (b) RECOUPMENT OF FUNDS.—Section 1903(q)(5) of
5 such Act (42 U.S.C. 1396b(q)(5)) is amended—

6 (1) by inserting “or under any Federal health
7 care program (as so defined)” after “plan”; and

8 (2) by adding at the end the following: “All
9 funds collected in accordance with this paragraph
10 shall be credited exclusively to, and available for ex-
11 penditure under, the Federal health care program
12 (including the State plan under this title) that was
13 subject to the activity that was the basis for the col-
14 lection.”.

15 (c) EXTENSION OF AUTHORITY TO INVESTIGATE
16 AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID
17 BOARD AND CARE FACILITIES.—Section 1903(q)(4) of
18 such Act (42 U.S.C. 1396b(q)(4)) is amended to read as
19 follows:

20 “(4)(A) The entity has—

21 “(i) procedures for reviewing complaints of
22 abuse or neglect of patients in health care fa-
23 cilities which receive payments under the State
24 plan under this title;

1 “(ii) at the option of the entity, procedures
2 for reviewing complaints of abuse or neglect of
3 patients residing in board and care facilities;
4 and

5 “(iii) procedures for acting upon such com-
6 plaints under the criminal laws of the State or
7 for referring such complaints to other State
8 agencies for action.

9 “(B) For purposes of this paragraph, the term
10 ‘board and care facility’ means a residential setting
11 which receives payment (regardless of whether such
12 payment is made under the State plan under this
13 title) from or on behalf of two or more unrelated
14 adults who reside in such facility, and for whom one
15 or both of the following is provided:

16 “(i) Nursing care services provided by, or
17 under the supervision of, a registered nurse, li-
18 censed practical nurse, or licensed nursing as-
19 sistant.

20 “(ii) A substantial amount of personal care
21 services that assist residents with the activities
22 of daily living, including personal hygiene,
23 dressing, bathing, eating, toileting, ambulation,
24 transfer, positioning, self-medication, body care,

1 travel to medical services, essential shopping,
2 meal preparation, laundry, and housework.”.

3 (d) EFFECTIVE DATE.—The amendments made by
4 this section take effect on the date of enactment of this
5 Act.

6 **SEC. 408. ELIMINATION OF FRAUD AND ABUSE ASSOCIATED**
7 **WITH CERTAIN PAYMENTS UNDER THE MED-**
8 **ICAID PROGRAM.**

9 (a) REQUIREMENTS FOR PAYMENTS.—Section
10 1903(i) of the Social Security Act (42 U.S.C. 1396b(i))
11 is amended—

12 (1) in paragraph (19), by striking the period at
13 the end and inserting “; or”;

14 (2) by inserting after paragraph (19) the fol-
15 lowing:

16 “(20) with respect to any amount expended for
17 an item or service provided under the plan, or for
18 any administrative expense incurred to carry out the
19 plan, which is provided or incurred by, or on behalf
20 of, a local educational agency or school district—

21 “(A) for which payment is made for a bun-
22 dled group of individual items, services, and ad-
23 ministrative expenses, unless payment for the
24 grouped items, services, and administrative ex-

1 penses is made in accordance with a system
2 that is approved by the Secretary and that—

3 “(i) provides for an itemization to the
4 Secretary for assuring accountability of
5 cost of the grouped items, services, and ad-
6 ministrative expenses and includes pay-
7 ment rates and the methodologies under-
8 lying the establishment of such rates;

9 “(ii) has an actuarially sound basis
10 for determining the payment rates and the
11 methodologies; and

12 “(iii) reconciles payments for the
13 grouped items and services provided and
14 administrative expenses incurred under
15 this title with their cost; or

16 “(B) for which payment is otherwise made
17 using a fee-for-service methodology, unless pay-
18 ment for the item, service, or administrative ex-
19 pense is made in accordance with a system that
20 is approved by the Secretary and that reim-
21 burses only for the cost of an item or service
22 provided and an administrative expense in-
23 curred that is reasonable and related to the cost
24 of providing or incurring such item, service, or
25 administrative expense or that is based on such

1 other tests of reasonableness as the Secretary
2 prescribes in regulations; or

3 “(21) with respect to any transportation service
4 provided by, or on behalf of, a local educational
5 agency or school district for a child unless—

6 “(A) a medical need for transportation is
7 noted in the individual education plan of the
8 child, including a child residing in a geographic
9 area within which school bus transportation is
10 otherwise not provided;

11 “(B) the vehicle used to furnish such
12 transportation service is specially equipped to
13 accommodate individuals with special medical
14 needs; and

15 “(C) the payment for such service—

16 “(i) is made only with respect to costs
17 associated with transporting individuals
18 whose medical needs require transport in
19 such a vehicle; and

20 “(ii) reflects only the proportion of
21 the transportation costs equal to—

22 “(I) the proportion of time spent
23 by such individuals at such location in
24 activities relating to the receipt of cov-
25 ered services under this title; or

1 “(II) such other proportion based
2 on an allocation method that the Sec-
3 retary finds reasonable in light of the
4 benefit to the program under this title
5 and consistent with the cost principles
6 contained in OMB Circular A-87; or

7 “(22) with respect to any amount expended for
8 an item or service under the plan or for any admin-
9 istrative expense to carry out the plan provided by
10 a public agency that enters into a contract with an
11 entity for the development and operation of submit-
12 ting claims for such amount unless the agency—

13 “(A) uses a competitive bidding process or
14 otherwise to contract with such entity at a rea-
15 sonable rate commensurate with the services
16 performed by such entity; and

17 “(B) requires that any fees (including any
18 administrative fees) to be paid to the entity for
19 the development of the claims procedure are
20 identified as a non-contingent, specified dollar
21 amount in the contract.”; and

22 (3) in the third sentence, by striking “(17), and
23 (18)” and inserting “(17), (18), (19), (20), and
24 (21)”.

1 (b) PROVISION OF ITEMS AND SERVICES THROUGH
2 MEDICAID MANAGED CARE ORGANIZATIONS.—Section
3 1903(m)(2)(A) of the Social Security Act (42 U.S.C.
4 1396b(m)(2)(A)) is amended by redesignating clause (xi)
5 (as added by section 4701(c)(3) of the Balanced Budget
6 Act of 1997) as clause (xiii), by striking “and” at the end
7 of clause (xi), and by inserting after clause (xi) the fol-
8 lowing:

9 “(xii) such contract provides that with respect
10 to payment for, and coverage of, such services in any
11 case in which—

12 “(I) a medicaid managed care organization
13 is responsible for providing such services to a
14 child eligible for benefits under this title but
15 coverage of services required under the child’s
16 individual education plan is not included in the
17 managed care contract but is the responsibility
18 of the local educational agency or school district
19 in the State; or

20 “(II) acute care services are available in
21 the schools to children enrolled under such con-
22 tract,
23 that there are assurances in the State plan and in
24 the managed care contract that coordination exists
25 between the local educational agency or school dis-

1 trict and the managed care plan to prevent duplica-
2 tion of services or duplication of payments under
3 this title for such services.”

4 (c) ALLOWABLE SHARE OF FFP WITH RESPECT TO
5 PAYMENT FOR SERVICES FURNISHED IN SCHOOL SET-
6 TING.—Section 1903 of the Social Security Act (42 U.S.C.
7 1396b) is amended by adding at the end the following:

8 “(x) In the case of any Federal financial participation
9 amount determined under subsection (a) with respect to
10 any expenditure for an item or service under the plan, or
11 for any administrative expense to carry out the plan,
12 which is furnished by a local educational agency or school
13 district, the State shall provide that—

14 “(1) 100 percent of such amount be paid to
15 such agency or district, or

16 “(2) a percentage of such amount be retained
17 by the State, but only to the extent such percentage
18 does not exceed the percentage of such expenditure
19 funded by State general revenue sources dedicated
20 for such purpose.”

21 (d) UNIFORM METHODOLOGY FOR SCHOOL-BASED
22 CLAIMS.—Not later than 90 days after the date of enact-
23 ment of this Act, the Administrator of the Health Care
24 Financing Administration, in consultation with State med-
25 icaid and educational agencies and local school systems,

1 shall develop and implement a uniform methodology for
2 claims for payment of medical assistance and related ad-
3 ministrative expenses furnished under title XIX of the So-
4 cial Security Act by schools. Such methodology for admin-
5 istrative expenses shall be based on standards related to
6 time studies and population estimates and a national
7 standard for determining payment for such administrative
8 expenses.

9 (e) EFFECTIVE DATE.—The amendments made by
10 this section shall apply to items and services provided on
11 and after the date of enactment of this Act, without regard
12 to whether implementing regulations are in effect. The
13 Secretary of Health and Human Services shall promulgate
14 such final regulations as are necessary to carry out such
15 amendments not later than 1 year after such date of en-
16 actment.

○

TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT
ACT OF 1999

OCTOBER 18, 1999.—Ordered to be printed

Mr. ARCHER, from the Committee on Ways and Means,
submitted the following

R E P O R T

together with

ADDITIONAL AND DISSENTING VIEWS

[To accompany H.R. 3070]

[Including cost estimate of the Congressional Budget Office]

The Committee on Ways and Means, to whom was referred the bill (H.R. 3070) to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend health care coverage for such beneficiaries, and to make additional miscellaneous amendments relating to Social Security, having considered the same, report favorably thereon with an amendment and recommend that the bill as amended do pass.—

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The amendment is as follows:

Strike out all after the enacting clause and insert in lieu thereof the following:

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Ticket to Work and Work Incentives Improvement Act of 1999”.

(b) **TABLE OF CONTENTS.**—The table of contents is as follows:

Sec. 1. Short title; table of contents.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

Sec. 101. Establishment of the Ticket to Work and Self-Sufficiency Program.

Subtitle B—Elimination of Work Disincentives

Sec. 111. Work activity standard as a basis for review of an individual’s disabled status.

Sec. 112. Expedited reinstatement of disability benefits.

Subtitle C—Work Incentives Planning, Assistance, and Outreach

Sec. 121. Work incentives outreach program.

Sec. 122. State grants for work incentives assistance to disabled beneficiaries.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

- Sec. 201. Expanding State options under the medicaid program for workers with disabilities.
 Sec. 202. Extending medicare coverage for OASDI disability benefit recipients.
 Sec. 203. Grants to develop and establish State infrastructures to support working individuals with disabilities.
 Sec. 204. Demonstration of coverage under the medicaid program of workers with potentially severe disabilities.
 Sec. 205. Election by disabled beneficiaries to suspend medigap insurance when covered under a group health plan.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

- Sec. 301. Extension of disability insurance program demonstration project authority.
 Sec. 302. Demonstration projects providing for reductions in disability insurance benefits based on earnings.
 Sec. 303. Studies and reports.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

- Sec. 401. Technical amendments relating to drug addicts and alcoholics.
 Sec. 402. Treatment of prisoners.
 Sec. 403. Revocation by members of the clergy of exemption from social security coverage.
 Sec. 404. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.
 Sec. 405. Authorization for State to permit annual wage reports.
 Sec. 406. Assessment on attorneys who receive their fees via the Social Security Administration.
 Sec. 407. Extension of authority of State medicaid fraud control units.
 Sec. 408. Elimination of fraud and abuse associated with certain payments under the medicaid program.

TITLE I—TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

Subtitle A—Ticket to Work and Self-Sufficiency

SEC. 101. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) IN GENERAL.—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding after section 1147 (as added by section 8 of the Noncitizen Benefit Clarification and Other Technical Amendments Act of 1998 (Public Law 105–306; 112 Stat. 2928)) the following:

“THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

“SEC. 1148. (a) IN GENERAL.—The Commissioner of Social Security shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary’s choice and which is willing to provide such services to such beneficiary.

“(b) TICKET SYSTEM.—

“(1) DISTRIBUTION OF TICKETS.—The Commissioner of Social Security may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

“(2) ASSIGNMENT OF TICKETS.—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary’s choice which is serving under the Program and is willing to accept the assignment.

“(3) TICKET TERMS.—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner’s agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the employment network may provide to the beneficiary.

“(4) PAYMENTS TO EMPLOYMENT NETWORKS.—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

“(c) STATE PARTICIPATION.—

“(1) IN GENERAL.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 may elect to participate in the Program as an employment network with respect to a disabled beneficiary. If the State agency does elect to participate in the Program, the State agency also shall elect to be paid under the outcome payment system or the outcome-milestone payment system in accordance with

subsection (h)(1). With respect to a disabled beneficiary that the State agency does not elect to have participate in the Program, the State agency shall be paid for services provided to that beneficiary under the system for payment applicable under section 222(d) and subsections (d) and (e) of section 1615. The Commissioner shall provide for periodic opportunities for exercising such elections.

“(2) EFFECT OF PARTICIPATION BY STATE AGENCY.—

“(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under that paragraph to participate in the Program, the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973.

“(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

“(3) AGREEMENTS BETWEEN STATE AGENCIES AND EMPLOYMENT NETWORKS.—State agencies and employment networks shall enter into agreements regarding the conditions under which services will be provided when an individual is referred by an employment network to a State agency for services. The Commissioner of Social Security shall establish by regulations the timeframe within which such agreements must be entered into and the mechanisms for dispute resolution between State agencies and employment networks with respect to such agreements.

“(d) RESPONSIBILITIES OF THE COMMISSIONER OF SOCIAL SECURITY.—

“(1) SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.—The Commissioner of Social Security shall enter into agreements with 1 or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

“(2) TENURE, RENEWAL, AND EARLY TERMINATION.—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include—

“(A) measures for ease of access by beneficiaries to services; and

“(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement; and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) SELECTION OF EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(B) ALTERNATE PARTICIPANTS.—In any State where the Program is being implemented, the Commissioner shall enter into an agreement with any alternate participant that is operating under the authority of section 222(d)(2) in the State as of the date of enactment of this section and chooses to serve as an employment network under the Program.

“(5) TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) QUALITY ASSURANCE.—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall solicit and consider the views of consumers and the program manager under which the em-

ployment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure that the periodic surveys of beneficiaries receiving services under the Program are designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—

A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks without being deemed to have rejected services under the Program. When such a change occurs, the program manager shall reassign the ticket based on the choice of the beneficiary. Upon the request of the employment network, the program manager shall make a determination of the allocation of the outcome or milestone-outcome payments based on the services provided by each employment network. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible formats.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager’s agreement, including rural areas.

“(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Services provided under the Program may include case management, work incentives planning, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are available in each service area.

“(f) EMPLOYMENT NETWORKS.—

“(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, that assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b).

“(B) ONE-STOP DELIVERY SYSTEMS.—An employment network serving under the Program may consist of a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998.

“(C) COMPLIANCE WITH SELECTION CRITERIA.—No employment network may serve under the Program unless it meets and maintains compliance with both general selection criteria (such as professional and educational qualifications, where applicable) and specific selection criteria (such as substantial expertise and experience in providing relevant employment services and supports).

“(D) SINGLE OR ASSOCIATED PROVIDERS ALLOWED.—An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

“(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

“(A) serve prescribed service areas; and

“(B) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans meeting the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) REQUIREMENTS.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans that meet the requirements of subparagraph (C);

“(B) develop and implement each such individual work plan, in partnership with each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal;

“(C) ensure that each individual work plan includes at least—

“(i) a statement of the vocational goal developed with the beneficiary, including, as appropriate, goals for earnings and job advancement;

“(ii) a statement of the services and supports that have been deemed necessary for the beneficiary to accomplish that goal;

“(iii) a statement of any terms and conditions related to the provision of such services and supports; and

“(iv) a statement of understanding regarding the beneficiary’s rights under the Program (such as the right to retrieve the ticket to work and self-sufficiency if the beneficiary is dissatisfied with the services being provided by the employment network) and remedies available to the individual, including information on the availability of advocacy services and assistance in resolving disputes through the State grant program authorized under section 1150;

“(D) provide a beneficiary the opportunity to amend the individual work plan if a change in circumstances necessitates a change in the plan; and

- “(E) make each beneficiary’s individual work plan available to the beneficiary in, as appropriate, an accessible format chosen by the beneficiary.
- “(2) EFFECTIVE UPON WRITTEN APPROVAL.—A beneficiary’s individual work plan shall take effect upon written approval by the beneficiary or a representative of the beneficiary and a representative of the employment network that, in providing such written approval, acknowledges assignment of the beneficiary’s ticket to work and self-sufficiency.
- “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—
- “(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—
- “(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).
- “(B) NO CHANGE IN METHOD OF PAYMENT FOR BENEFICIARIES WITH TICKETS ALREADY ASSIGNED TO THE EMPLOYMENT NETWORKS.—Any election of a payment system by an employment network that would result in a change in the method of payment to the employment network for services provided to a beneficiary who is receiving services from the employment network at the time of the election shall not be effective with respect to payment for services provided to that beneficiary and the method of payment previously selected shall continue to apply with respect to such services.
- “(2) OUTCOME PAYMENT SYSTEM.—
- “(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.
- “(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual’s outcome payment period, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual because of work or earnings.
- “(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—
- “(i) the payment for each month during the outcome payment period for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs; and
- “(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.
- “(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—
- “(A) IN GENERAL.—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.
- “(B) EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.—The outcome-milestone payment system shall provide for 1 or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, that are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure that provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.
- “(C) LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.
- “(4) DEFINITIONS.—In this subsection:
- “(A) PAYMENT CALCULATION BASE.—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year; and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained 18 years of age but have not attained 65 years of age.

“(B) OUTCOME PAYMENT PERIOD.—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (3) and (4) of subsection (k)) are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity; and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in substantial gainful activity or by reason of earnings from work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNT OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Work Incentives Advisory Panel established by section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, or other reliable sources.

“(C) REPORT ON THE ADEQUACY OF INCENTIVES.—The Commissioner shall submit to Congress not later than 36 months after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999 a report with recommendations for a method or methods to adjust payment rates under subparagraphs (A) and (B), that would ensure adequate incentives for the provision of services by employment networks of—

“(i) individuals with a need for ongoing support and services;

“(ii) individuals with a need for high-cost accommodations;

“(iii) individuals who earn a subminimum wage; and

“(iv) individuals who work and receive partial cash benefits.

The Commissioner shall consult with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 during the development and evaluation of the study. The Commissioner shall implement the necessary adjusted payment rates prior to full implementation of the Ticket to Work and Self-Sufficiency Program.

“(i) SUSPENSION OF DISABILITY REVIEWS.—During any period for which an individual is using, as defined by the Commissioner, a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) AUTHORIZATIONS.—

“(1) PAYMENTS TO EMPLOYMENT NETWORKS.—

“(A) TITLE II DISABILITY BENEFICIARIES.—There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums as may be necessary to make payments to employment networks under this section. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund.

“(B) TITLE XVI DISABILITY BENEFICIARIES.—Amounts authorized to be appropriated to the Social Security Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

“(2) ADMINISTRATIVE EXPENSES.—The costs of administering this section (other than payments to employment networks) shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among such amounts as appropriate.

“(k) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(3) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(4) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

“(5) SUPPLEMENTAL SECURITY INCOME BENEFIT.—The term ‘supplemental security income benefit under title XVI’ means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

“(l) REGULATIONS.—Not later than 1 year after the date of the enactment of the Ticket to Work and Work Incentives Improvement Act of 1999, the Commissioner shall prescribe such regulations as are necessary to carry out the provisions of this section.”

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(i) of the Social Security Act (42 U.S.C. 421(i)) is amended by adding at the end the following:

“(5) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”

(B) Section 222(a) of such Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of such Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of such Act (42 U.S.C. 425(b)(1)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of such Act (42 U.S.C. 1382d(a)) is amended to read as follows:

“SEC. 1615. (a) In the case of any blind or disabled individual who—

“(1) has not attained age 16; and

“(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.”.

(B) Section 1615(c) of such Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of such Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1148 or another program of vocational rehabilitation services, employment services, or other support services”.

(D) Section 1633(c) of such Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting “(1)” after “(c)”; and

(ii) by adding at the end the following:

“(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1148(i).”.

(c) EFFECTIVE DATE.—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following 1 year after the date of the enactment of this Act.

(d) GRADUATED IMPLEMENTATION OF PROGRAM.—

(1) IN GENERAL.—Not later than 1 year after the date of the enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) REQUIREMENTS.—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) FULL IMPLEMENTATION.—The Commissioner shall ensure that ability to provide tickets and services to individuals under the Program exists in every State as soon as practicable on or after the effective date specified in subsection (c) but not later than 3 years after such date.

(4) ONGOING EVALUATION OF PROGRAM.—

(A) IN GENERAL.—The Commissioner shall design and conduct a series of evaluations to assess the cost-effectiveness of activities carried out under this section and the amendments made thereby, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) CONSULTATION.—The Commissioner shall design and carry out the series of evaluations after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program and consulting with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f), the Comptroller General of the United States, other agencies of the Federal Government, and private organizations with appropriate expertise.

(C) METHODOLOGY.—

(i) IMPLEMENTATION.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f), shall ensure that plans for evaluations and data collection methods under the Program are appropriately designed to obtain detailed employment information.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to)—

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of individuals in possession of tickets under the Program who are not accepted for services and, to the extent reasonably determinable, the reasons for which such beneficiaries were not accepted for services;

(VII) the characteristics of providers whose services are provided within an employment network under the Program;

(VIII) the extent (if any) to which employment networks display a greater willingness to provide services to beneficiaries with a range of disabilities;

(IX) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome payment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(X) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(XI) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(D) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) for prompt referrals to a State agency; and

(ii) the authority of the Commissioner under section 222(d)(2) of the Social Security Act to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals,

shall apply in such State.

(B) EXISTING AGREEMENTS.—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act before the date of the enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to serv-

ices (if any) to be provided after 3 years after the effective date provided in subsection (c).

(e) SPECIFIC REGULATIONS REQUIRED.—

(1) IN GENERAL.—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.—The matters which shall be addressed in such regulations shall include—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1148(b)(1) of the Social Security Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program pursuant to section 1148(c)(1) of such Act and provision for periodic opportunities for exercising such elections;

(D) the status of State agencies under section 1148(c)(1) of such Act at the time that State agencies exercise elections under that section;

(E) the terms of agreements to be entered into with program managers pursuant to section 1148(d) of such Act, including—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1148(d)(3) of such Act;

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1148(d) of such Act and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1148(e) of such Act; and

(iii) the format under which dispute resolution will operate under section 1148(d)(7) of such Act;

(F) the terms of agreements to be entered into with employment networks pursuant to section 1148(d)(4) of such Act, including—

(i) the manner in which service areas are specified pursuant to section 1148(f)(2)(A) of such Act;

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1148(f)(1)(C) of such Act in selecting service providers;

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1148(f)(3) of such Act; and

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1148(f)(4) of such Act;

(G) standards which must be met by individual work plans pursuant to section 1148(g) of such Act;

(H) standards which must be met by payment systems required under section 1148(h) of such Act, including—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1148(h)(1)(A) of such Act;

(ii) the terms which must be met by an outcome payment system under section 1148(h)(2) of such Act;

(iii) the terms which must be met by an outcome-milestone payment system under section 1148(h)(3) of such Act;

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1148(h) of such Act or the period of time specified in paragraph (4)(B) of such section 1148(h) of such Act; and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

(f) THE TICKET TO WORK AND WORK INCENTIVES ADVISORY PANEL.—

(1) ESTABLISHMENT.—There is established within the Social Security Administration a panel to be known as the “Ticket to Work and Work Incentives Advisory Panel” (in this subsection referred to as the “Panel”).

(2) DUTIES OF PANEL.—It shall be the duty of the Panel to—

(A) advise the President, the Congress, and the Commissioner of Social Security on issues related to work incentives programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act (42

U.S.C. 401 et seq., 1301 et seq., 1381 et seq., 1395 et seq., 1396 et seq.); and

(B) with respect to the Ticket to Work and Self-Sufficiency Program established under section 1148 of such Act—

(i) advise the Commissioner of Social Security with respect to establishing phase-in sites for such Program and fully implementing the Program thereafter, the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems, and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program;

(ii) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to section 302 of this Act;

(iii) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1148(d)(6) of the Social Security Act; and

(iv) furnish progress reports on the Program to the Commissioner and each House of Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 12 members as follows:

(i) 4 members appointed by the President, not more than 2 of whom may be of the same political party;

(ii) 2 members appointed by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means of the House of Representatives;

(iii) 2 members appointed by the minority leader of the House of Representatives, in consultation with the ranking member of the Committee on Ways and Means of the House of Representatives;

(iv) 2 members appointed by the majority leader of the Senate, in consultation with the Chairman of the Committee on Finance of the Senate; and

(v) 2 members appointed by the minority leader of the Senate, in consultation with the ranking member of the Committee on Finance of the Senate.

(B) REPRESENTATION.—Of the members appointed under subparagraph (A), at least 8 shall have experience or expert knowledge as a recipient, provider, employer, or employee in the fields of, or related to, employment services, vocational rehabilitation services, and other support services, of whom—

(i) at least 2 shall represent the interests of recipients of employment services, vocational rehabilitation services, and other support services;

(ii) at least 2 shall represent the interests of providers of employment services, vocational rehabilitation services, and other support services;

(iii) at least 2 shall represent the interests of private employers; and

(iv) at least 2 shall represent the interests of employees.

At least $\frac{1}{2}$ of the members described in each clause of subparagraph (A) shall be individuals with disabilities, or representatives of individuals with disabilities, with consideration to current or former title II disability beneficiaries or title XVI disability beneficiaries (as such terms are defined in section 1148(k) of the Social Security Act (as added by subsection (a)).

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of the enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—As designated by the President at the time of appointment, of the members first appointed—

(I) $\frac{1}{2}$ of the members appointed under subparagraph (A) shall be appointed for a term of 2 years; and

(II) the remaining members appointed under subparagraph (A) shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until

a successor has taken office. A vacancy in the Panel shall be filled in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—8 members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Panel, and paid at a rate, and in a manner, that is consistent with guidelines established under section 7 of the Federal Advisory Committee Act (5 U.S.C. App.).

(B) STAFF.—Subject to rules prescribed by the Commissioner of Social Security, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Commissioner of Social Security, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this Act.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places, and take such testimony and evidence as the Panel considers appropriate.

(B) POWERS OF MEMBERS AND AGENTS.—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this section.

(C) MAILS.—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(6) REPORTS.—

(A) INTERIM REPORTS.—The Panel shall submit to the President and the Congress interim reports at least annually.

(B) FINAL REPORT.—The Panel shall transmit a final report to the President and the Congress not later than eight years after the date of the enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislation and administrative actions which the Panel considers appropriate.

(7) TERMINATION.—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated from the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the general fund of the Treasury, as appropriate, such sums as are necessary to carry out this subsection.

Subtitle B—Elimination of Work Disincentives

SEC. 111. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN INDIVIDUAL'S DISABLED STATUS.

(a) IN GENERAL.—Section 221 of the Social Security Act (42 U.S.C. 421) is amended by adding at the end the following:

“(m)(1) In any case where an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual's disability (as defined in section 223(d)) has received such benefits for at least 24 months—

“(A) no continuing disability review conducted by the Commissioner may be scheduled for the individual solely as a result of the individual’s work activity; “(B) no work activity engaged in by the individual may be used as evidence that the individual is no longer disabled; and

“(C) no cessation of work activity by the individual may give rise to a presumption that the individual is unable to engage in work.

“(2) An individual to which paragraph (1) applies shall continue to be subject to—

“(A) continuing disability reviews on a regularly scheduled basis that is not triggered by work; and

“(B) termination of benefits under this title in the event that the individual has earnings that exceed the level of earnings established by the Commissioner to represent substantial gainful activity.”

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect on January 1, 2003.

SEC. 112. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS.

(a) OASDI BENEFITS.—Section 223 of the Social Security Act (42 U.S.C. 423) is amended—

- (1) by redesignating subsection (i) as subsection (j); and
- (2) by inserting after subsection (h) the following:

“Reinstatement of Entitlement

“(i)(1)(A) Entitlement to benefits described in subparagraph (B)(i)(I) shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of such entitlement shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was entitled to benefits under this section or section

202 on the basis of disability pursuant to an application filed therefor; and

“(II) such entitlement terminated due to the performance of substantial gainful activity;

“(ii) the individual is under a disability and the physical or mental impairment that is the basis for the finding of disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of disability that gave rise to the entitlement described in clause (i); and

“(iii) the individual’s disability renders the individual unable to perform substantial gainful activity.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was entitled to a benefit described in subparagraph (B)(i)(I) prior to the entitlement termination described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) and (iii) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not entitled to reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of subsection (f) shall apply.

“(4)(A)(i) Subject to clause (ii), entitlement to benefits reinstated under this subsection shall commence with the benefit payable for the month in which a request for reinstatement is filed.

“(ii) An individual whose entitlement to a benefit for any month would have been reinstated under this subsection had the individual filed a request for reinstatement before the end of such month shall be entitled to such benefit for such month if such request for reinstatement is filed before the end of the twelfth month immediately succeeding such month.

“(B)(i) Subject to clauses (ii) and (iii), the amount of the benefit payable for any month pursuant to the reinstatement of entitlement under this subsection shall be determined in accordance with the provisions of this title.

“(ii) For purposes of computing the primary insurance amount of an individual whose entitlement to benefits under this section is reinstated under this subsection, the date of onset of the individual’s disability shall be the date of onset used in determining the individual’s most recent period of disability arising in connection with such benefits payable on the basis of an application.

“(iii) Benefits under this section or section 202 payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) No benefit shall be payable pursuant to an entitlement reinstated under this subsection to an individual for any month in which the individual engages in substantial gainful activity.

“(D) The entitlement of any individual that is reinstated under this subsection shall end with the benefits payable for the month preceding whichever of the following months is the earliest:

“(i) The month in which the individual dies.

“(ii) The month in which the individual attains retirement age.

“(iii) The third month following the month in which the individual’s disability ceases.

“(5) Whenever an individual’s entitlement to benefits under this section is reinstated under this subsection, entitlement to benefits payable on the basis of such individual’s wages and self-employment income may be reinstated with respect to any person previously entitled to such benefits on the basis of an application if the Commissioner determines that such person satisfies all the requirements for entitlement to such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated entitlement of any such person to the same extent that they apply to the reinstated entitlement of such individual.

“(6) An individual to whom benefits are payable under this section or section 202 pursuant to a reinstatement of entitlement under this subsection for 24 months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) and the determination, if appropriate, of the termination month in accordance with subsection (a)(1) of this section, or subsection (d)(1), (e)(1), or (f)(1) of section 202, to be entitled to such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be entitled to provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under subsection (b) or (g) of section 205.

“(B) The amount of a provisional benefit for a month shall equal the amount of the last monthly benefit payable to the individual under this title on the basis of an application increased by an amount equal to the amount, if any, by which such last monthly benefit would have been increased as a result of the operation of section 215(i).

“(C)(i) Provisional benefits shall begin with the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s entitlement to reinstated benefits;

“(II) the fifth month following the month described in clause (i);

“(III) the month in which the individual performs substantial gainful activity;

or

“(IV) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not entitled to reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).”.

(b) SSI BENEFITS.—

(1) IN GENERAL.—Section 1631 of the Social Security Act (42 U.S.C. 1383) is amended by adding at the end the following:

“Reinstatement of Eligibility on the Basis of Blindness or Disability

“(p)(1)(A) Eligibility for benefits under this title shall be reinstated in any case where the Commissioner determines that an individual described in subparagraph (B) has filed a request for reinstatement meeting the requirements of paragraph (2)(A) during the period prescribed in subparagraph (C). Reinstatement of eligibility shall be in accordance with the terms of this subsection.

“(B) An individual is described in this subparagraph if—

“(i) prior to the month in which the individual files a request for reinstatement—

“(I) the individual was eligible for benefits under this title on the basis of blindness or disability pursuant to an application filed therefor; and

“(II) the individual thereafter was ineligible for such benefits due to earned income (or earned and unearned income) for a period of 12 or more consecutive months;

“(ii) the individual is blind or disabled and the physical or mental impairment that is the basis for the finding of blindness or disability is the same as (or related to) the physical or mental impairment that was the basis for the finding of blindness or disability that gave rise to the eligibility described in clause (i);

“(iii) the individual’s blindness or disability renders the individual unable to perform substantial gainful activity; and

“(iv) the individual satisfies the nonmedical requirements for eligibility for benefits under this title.

“(C)(i) Except as provided in clause (ii), the period prescribed in this subparagraph with respect to an individual is 60 consecutive months beginning with the month following the most recent month for which the individual was eligible for a benefit under this title (including section 1619) prior to the period of ineligibility described in subparagraph (B)(i)(II).

“(ii) In the case of an individual who fails to file a reinstatement request within the period prescribed in clause (i), the Commissioner may extend the period if the Commissioner determines that the individual had good cause for the failure to so file.

“(2)(A)(i) A request for reinstatement shall be filed in such form, and containing such information, as the Commissioner may prescribe.

“(ii) A request for reinstatement shall include express declarations by the individual that the individual meets the requirements specified in clauses (ii) through (iv) of paragraph (1)(B).

“(B) A request for reinstatement filed in accordance with subparagraph (A) may constitute an application for benefits in the case of any individual who the Commissioner determines is not eligible for reinstated benefits under this subsection.

“(3) In determining whether an individual meets the requirements of paragraph (1)(B)(ii), the provisions of section 1614(a)(4) shall apply.

“(4)(A) Eligibility for benefits reinstated under this subsection shall commence with the benefit payable for the month following the month in which a request for reinstatement is filed.

“(B)(i) Subject to clause (ii), the amount of the benefit payable for any month pursuant to the reinstatement of eligibility under this subsection shall be determined in accordance with the provisions of this title.

“(ii) The benefit under this title payable for any month pursuant to a request for reinstatement filed in accordance with paragraph (2) shall be reduced by the amount of any provisional benefit paid to such individual for such month under paragraph (7).

“(C) Except as otherwise provided in this subsection, eligibility for benefits under this title reinstated pursuant to a request filed under paragraph (2) shall be subject to the same terms and conditions as eligibility established pursuant to an application filed therefor.

“(5) Whenever an individual’s eligibility for benefits under this title is reinstated under this subsection, eligibility for such benefits shall be reinstated with respect to the individual’s spouse if such spouse was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements for eligibility for such benefits except requirements related to the filing of an application. The provisions of paragraph (4) shall apply to the reinstated eligibility of the spouse to the same extent that they apply to the reinstated eligibility of such individual.

“(6) An individual to whom benefits are payable under this title pursuant to a reinstatement of eligibility under this subsection for twenty-four months (whether or not consecutive) shall, with respect to benefits so payable after such twenty-fourth month, be deemed for purposes of paragraph (1)(B)(i)(I) to be eligible for such benefits on the basis of an application filed therefor.

“(7)(A) An individual described in paragraph (1)(B) who files a request for reinstatement in accordance with the provisions of paragraph (2)(A) shall be eligible for provisional benefits payable in accordance with this paragraph, unless the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration under paragraph (2)(A)(ii) is false. Any such determination by the Commissioner shall be final and not subject to review under paragraph (1) or (3) of subsection (c).

“(B)(i) Except as otherwise provided in clause (ii), the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual under this title with the same kind and amount of income.

“(ii) If the individual has a spouse who was previously an eligible spouse of the individual under this title and the Commissioner determines that such spouse satisfies all the requirements of section 1614(b) except requirements related to the filing of an application, the amount of a provisional benefit for a month shall equal the amount of the monthly benefit that would be payable to an eligible individual and eligible spouse under this title with the same kind and amount of income.

“(C)(i) Provisional benefits shall begin with the month following the month in which a request for reinstatement is filed in accordance with paragraph (2)(A).

“(ii) Provisional benefits shall end with the earliest of—

“(I) the month in which the Commissioner makes a determination regarding the individual’s eligibility for reinstated benefits;

“(II) the fifth month following the month for which provisional benefits are first payable under clause (i); or

“(III) the month in which the Commissioner determines that the individual does not meet the requirements of paragraph (1)(B)(i) or that the individual’s declaration made in accordance with paragraph (2)(A)(ii) is false.

“(D) In any case in which the Commissioner determines that an individual is not eligible for reinstated benefits, any provisional benefits paid to the individual under this paragraph shall not be subject to recovery as an overpayment unless the Commissioner determines that the individual knew or should have known that the individual did not meet the requirements of paragraph (1)(B).

“(8) For purposes of this subsection other than paragraph (7), the term ‘benefits under this title’ includes State supplementary payments made pursuant to an agreement under section 1616(a) of this Act or section 212(b) of Public Law 93–66.”.

(2) CONFORMING AMENDMENTS.—

(A) Section 1631(j)(1) of such Act (42 U.S.C. 1383(j)(1)) is amended by striking the period and inserting “, or has filed a request for reinstatement of eligibility under subsection (p)(2) and been determined to be eligible for reinstatement.”.

(B) Section 1631(j)(2)(A)(i)(I) of such Act (42 U.S.C. 1383(j)(2)(A)(i)(I)) is amended by inserting “(other than pursuant to a request for reinstatement under subsection (p))” after “eligible”.

(c) EFFECTIVE DATE.—

(1) IN GENERAL.—The amendments made by this section shall take effect on the first day of the thirteenth month beginning after the date of enactment of this Act.

(2) LIMITATION.—No benefit shall be payable under title II or XVI on the basis of a request for reinstatement filed under section 223(i) or 1631(p) of the Social Security Act before the effective date described in paragraph (1).

Subtitle C—Work Incentives Planning, Assistance, and Outreach

SEC. 121. WORK INCENTIVES OUTREACH PROGRAM.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 101, is amended by adding after section 1148 the following:

“WORK INCENTIVES OUTREACH PROGRAM

“SEC. 1149. (a) ESTABLISHMENT.—

“(1) IN GENERAL.—The Commissioner, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999, shall establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to disabled beneficiaries on work incentives programs and issues related to such programs.

“(2) GRANTS, COOPERATIVE AGREEMENTS, CONTRACTS, AND OUTREACH.—Under the program established under this section, the Commissioner shall—

“(A) establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries, including individuals participating in the Ticket to Work and Self-Sufficiency Program established under section 1148, the program established under section 1619, and other programs that are designed to encourage disabled beneficiaries to work;

“(B) conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts to disabled beneficiaries (and to the families of such beneficiaries) who are potentially eligible to participate in Federal or State work incentive programs that are designed to assist disabled beneficiaries to work, including—

“(i) preparing and disseminating information explaining such programs; and

“(ii) working in cooperation with other Federal, State, and private agencies and nonprofit organizations that serve disabled beneficiaries, and with agencies and organizations that focus on vocational rehabilitation and work-related training and counseling;

“(C) establish a corps of trained, accessible, and responsive work incentives specialists within the Social Security Administration who will specialize in disability work incentives under titles II and XVI for the purpose of disseminating accurate information with respect to inquiries and issues relating to work incentives to—

“(i) disabled beneficiaries;

“(ii) benefit applicants under titles II and XVI; and

“(iii) individuals or entities awarded grants under subparagraphs (A) or (B); and

“(D) provide—

“(i) training for work incentives specialists and individuals providing planning assistance described in subparagraph (C); and

“(ii) technical assistance to organizations and entities that are designed to encourage disabled beneficiaries to return to work.

“(3) COORDINATION WITH OTHER PROGRAMS.—The responsibilities of the Commissioner established under this section shall be coordinated with other public and private programs that provide information and assistance regarding rehabilitation services and independent living supports and benefits planning for disabled beneficiaries including the program under section 1619, the plans for achieving self-support program (PASS), and any other Federal or State work incentives programs that are designed to assist disabled beneficiaries, including educational agencies that provide information and assistance regarding rehabilitation, school-to-work programs, transition services (as defined in, and provided in accordance with, the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.)), a one-stop delivery system established under subtitle B of title I of the Workforce Investment Act of 1998, and other services.

“(b) CONDITIONS.—

“(1) SELECTION OF ENTITIES.—

“(A) APPLICATION.—An entity shall submit an application for a grant, cooperative agreement, or contract to provide benefits planning and assistance to the Commissioner at such time, in such manner, and containing such information as the Commissioner may determine is necessary to meet the requirements of this section.

“(B) STATEWIDENESS.—The Commissioner shall ensure that the planning, assistance, and information described in paragraph (2) shall be available on a statewide basis.

“(C) ELIGIBILITY OF STATES AND PRIVATE ORGANIZATIONS.—

“(i) IN GENERAL.—The Commissioner may award a grant, cooperative agreement, or contract under this section to a State or a private agency or organization (other than Social Security Administration Field Offices and the State agency administering the State medicaid program under title XIX, including any agency or entity described in clause (ii), that

the Commissioner determines is qualified to provide the planning, assistance, and information described in paragraph (2)).

“(ii) AGENCIES AND ENTITIES DESCRIBED.—The agencies and entities described in this clause are the following:

“(I) Any public or private agency or organization (including Centers for Independent Living established under title VII of the Rehabilitation Act of 1973, protection and advocacy organizations, client assistance programs established in accordance with section 112 of the Rehabilitation Act of 1973, and State Developmental Disabilities Councils established in accordance with section 124 of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6024)) that the Commissioner determines satisfies the requirements of this section.

“(II) The State agency administering the State program funded under part A of title IV.

“(D) EXCLUSION FOR CONFLICT OF INTEREST.—The Commissioner may not award a grant, cooperative agreement, or contract under this section to any entity that the Commissioner determines would have a conflict of interest if the entity were to receive a grant, cooperative agreement, or contract under this section.

“(2) SERVICES PROVIDED.—A recipient of a grant, cooperative agreement, or contract to provide benefits planning and assistance shall select individuals who will act as planners and provide information, guidance, and planning to disabled beneficiaries on the—

“(A) availability and interrelation of any Federal or State work incentives programs designed to assist disabled beneficiaries that the individual may be eligible to participate in;

“(B) adequacy of any health benefits coverage that may be offered by an employer of the individual and the extent to which other health benefits coverage may be available to the individual; and

“(C) availability of protection and advocacy services for disabled beneficiaries and how to access such services.

“(3) AMOUNT OF GRANTS, COOPERATIVE AGREEMENTS, OR CONTRACTS.—

“(A) BASED ON POPULATION OF DISABLED BENEFICIARIES.—Subject to subparagraph (B), the Commissioner shall award a grant, cooperative agreement, or contract under this section to an entity based on the percentage of the population of the State where the entity is located who are disabled beneficiaries.

“(B) LIMITATIONS.—

“(i) PER GRANT.—No entity shall receive a grant, cooperative agreement, or contract under this section for a fiscal year that is less than \$50,000 or more than \$300,000.

“(ii) TOTAL AMOUNT FOR ALL GRANTS, COOPERATIVE AGREEMENTS, AND CONTRACTS.—The total amount of all grants, cooperative agreements, and contracts awarded under this section for a fiscal year may not exceed \$23,000,000.

“(4) ALLOCATION OF COSTS.—The costs of carrying out this section shall be paid from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(c) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(d) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$23,000,000 for each of the fiscal years 2000 through 2004.”.

SEC. 122. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES.

Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.), as amended by section 121, is amended by adding after section 1149 the following:

“STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES

“SEC. 1150. (a) IN GENERAL.—Subject to subsection (c), the Commissioner may make payments in each State to the protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.) for the purpose of providing services to disabled beneficiaries.

“(b) SERVICES PROVIDED.—Services provided to disabled beneficiaries pursuant to a payment made under this section may include—

“(1) information and advice about obtaining vocational rehabilitation and employment services; and

“(2) advocacy or other services that a disabled beneficiary may need to secure or regain gainful employment.

“(c) APPLICATION.—In order to receive payments under this section, a protection and advocacy system shall submit an application to the Commissioner, at such time, in such form and manner, and accompanied by such information and assurances as the Commissioner may require.

“(d) AMOUNT OF PAYMENTS.—

“(1) IN GENERAL.—Subject to the amount appropriated for a fiscal year for making payments under this section, a protection and advocacy system shall not be paid an amount that is less than—

“(A) in the case of a protection and advocacy system located in a State (including the District of Columbia and Puerto Rico) other than Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, the greater of—

“(i) \$100,000; or

“(ii) $\frac{1}{3}$ of 1 percent of the amount available for payments under this section; and

“(B) in the case of a protection and advocacy system located in Guam, American Samoa, the United States Virgin Islands, and the Commonwealth of the Northern Mariana Islands, \$50,000.

“(2) INFLATION ADJUSTMENT.—For each fiscal year in which the total amount appropriated to carry out this section exceeds the total amount appropriated to carry out this section in the preceding fiscal year, the Commissioner shall increase each minimum payment under subparagraphs (A) and (B) of paragraph (1) by a percentage equal to the percentage increase in the total amount so appropriated to carry out this section.

“(e) ANNUAL REPORT.—Each protection and advocacy system that receives a payment under this section shall submit an annual report to the Commissioner and the Ticket to Work and Work Incentives Advisory Panel established under section 101(f) of the Ticket to Work and Work Incentives Improvement Act of 1999 on the services provided to individuals by the system.

“(f) FUNDING.—

“(1) ALLOCATION OF PAYMENTS.—Payments under this section shall be made from amounts made available for the administration of title II and amounts made available for the administration of title XVI, and shall be allocated among those amounts as appropriate.

“(2) CARRYOVER.—Any amounts allotted for payment to a protection and advocacy system under this section for a fiscal year shall remain available for payment to or on behalf of the protection and advocacy system until the end of the succeeding fiscal year.

“(g) DEFINITIONS.—In this section:

“(1) COMMISSIONER.—The term ‘Commissioner’ means the Commissioner of Social Security.

“(2) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ has the meaning given that term in section 1148(k)(2).

“(3) PROTECTION AND ADVOCACY SYSTEM.—The term ‘protection and advocacy system’ means a protection and advocacy system established pursuant to part C of title I of the Developmental Disabilities Assistance and Bill of Rights Act (42 U.S.C. 6041 et seq.).

“(h) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section \$7,000,000 for each of the fiscal years 2000 through 2004.”.

TITLE II—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

SEC. 201. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES.

(a) IN GENERAL.—

(1) STATE OPTION TO ELIMINATE INCOME, ASSETS, AND RESOURCE LIMITATIONS FOR WORKERS WITH DISABILITIES BUYING INTO MEDICAID.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)) is amended—

- (A) in subclause (XIII), by striking “or” at the end;
 - (B) in subclause (XIV), by adding “or” at the end; and
 - (C) by adding at the end the following:
 - “(XV) who, but for earnings in excess of the limit established under section 1905(q)(2)(B), would be considered to be receiving supplemental security income, who is at least 16, but less than 65, years of age, and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish;”
- (2) STATE OPTION TO PROVIDE OPPORTUNITY FOR EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY TO BUY INTO MEDICAID.—
- (A) ELIGIBILITY.—Section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as amended by paragraph (1), is amended—
- (i) in subclause (XIV), by striking “or” at the end;
 - (ii) in subclause (XV), by adding “or” at the end; and
 - (iii) by adding at the end the following:
 - “(XVI) who are employed individuals with a medically improved disability described in section 1905(v)(1) and whose assets, resources, and earned or unearned income (or both) do not exceed such limitations (if any) as the State may establish, but only if the State provides medical assistance to individuals described in subclause (XV);”
- (B) DEFINITION OF EMPLOYED INDIVIDUALS WITH A MEDICALLY IMPROVED DISABILITY.—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following:
- “(v)(1) The term ‘employed individual with a medically improved disability’ means an individual who—
- “(A) is at least 16, but less than 65, years of age;
 - “(B) is employed (as defined in paragraph (2));
 - “(C) ceases to be eligible for medical assistance under section 1902(a)(10)(A)(ii)(XV) because the individual, by reason of medical improvement, is determined at the time of a regularly scheduled continuing disability review to no longer be eligible for benefits under section 223(d) or 1614(a)(3); and
 - “(D) continues to have a severe medically determinable impairment, as determined under regulations of the Secretary.
- “(2) For purposes of paragraph (1), an individual is considered to be ‘employed’ if the individual—
- “(A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or
 - “(B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined by the State and approved by the Secretary.”
- (C) CONFORMING AMENDMENT.—Section 1905(a) of such Act (42 U.S.C. 1396d(a)) is amended in the matter preceding paragraph (1)—
- (i) in clause (x), by striking “or” at the end;
 - (ii) in clause (xi), by adding “or” at the end; and
 - (iii) by inserting after clause (xi), the following:
 - “(xii) employed individuals with a medically improved disability (as defined in subsection (v)).”
- (3) STATE AUTHORITY TO IMPOSE INCOME-RELATED PREMIUMS AND COST-SHARING.—Section 1916 of such Act (42 U.S.C. 1396o) is amended—
- (A) in subsection (a), by striking “The State plan” and inserting “Subject to subsection (g), the State plan”; and
 - (B) by adding at the end the following:
 - “(g) With respect to individuals provided medical assistance only under subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii)—
 - “(1) a State may (in a uniform manner for individuals described in either such subclause)—
 - “(A) require such individuals to pay premiums or other cost-sharing charges set on a sliding scale based on income that the State may determine; and
 - “(B) require payment of 100 percent of such premiums or charges for a year in the case of such an individual who has income for such year that exceeds 250 percent of the income official poverty line (referred to in subsection (c)(1)) applicable to a family of the size involved, except that, in the case of such an individual who has income for a year that does not exceed

450 percent of such poverty line, such requirement may apply only to the extent that such premiums do not exceed 7.5 percent of such income; and “(2) a State shall require payment of 100 percent of such premium for a year by such an individual whose adjusted gross income (as defined in section 62 of the Internal Revenue Code of 1986) for such year exceeds \$75,000, except that a State may choose to subsidize such premium by using State funds which may not be federally matched under this title.

The Secretary shall adjust annually (after 2000) the dollar amount set forth in paragraph (2) under procedures providing for adjustments in the same manner and to the same extent as adjustments are provided for under the procedures used to adjust benefit amounts under section 215(i)(2)(A), except that any amount so adjusted that is not a multiple of \$1.00 shall be rounded to the nearest multiple of \$1.00.”

(4) PROHIBITION AGAINST SUPPLANTATION OF STATE FUNDS AND STATE FAILURE TO MAINTAIN EFFORT.—Section 1903(i) of such Act (42 U.S.C. 1396b(i)) is amended—

(A) by striking the period at the end of paragraph (18) and inserting “; or”; and

(B) by inserting after such paragraph the following:

“(19) with respect to amounts expended for medical assistance provided to an individual described in subclause (XV) or (XVI) of section 1902(a)(10)(A)(ii) for a fiscal year unless the State demonstrates to the satisfaction of the Secretary that the level of State funds expended for such fiscal year for programs to enable working individuals with disabilities to work (other than for such medical assistance) is not less than the level expended for such programs during the most recent State fiscal year ending before the date of enactment of this paragraph.”

(b) CONFORMING AMENDMENTS.—

(1) Section 1903(f)(4) of the Social Security Act (42 U.S.C. 1396b(f)(4)) is amended in the matter preceding subparagraph (A) by inserting “1902(a)(10)(A)(ii)(XV), 1902(a)(10)(A)(ii)(XVI)” after “1902(a)(10)(A)(ii)(X),”.

(2) Section 1903(f)(4) of such Act, as amended by paragraph (1), is amended by inserting “1902(a)(10)(A)(ii)(XIII),” before “1902(a)(10)(A)(ii)(XV)”.

(c) GAO REPORT.—Not later than 3 years after the date of enactment of this Act, the Comptroller General of the United States shall submit a report to Congress regarding the amendments made by this section that examines—

(1) the extent to which higher health care costs for individuals with disabilities at higher income levels deter employment or progress with employment;

(2) whether such individuals have health insurance coverage or could benefit from the State option established under such amendments to provide a medicaid buy-in; and

(3) how the States are exercising such option, including—

(A) how such States are exercising the flexibility afforded them with regard to income disregards;

(B) what income and premium levels have been set;

(C) the degree to which States are subsidizing premiums above the dollar amount specified in section 1916(g)(2) of the Social Security Act (42 U.S.C. 1396o(g)(2)); and

(D) the extent to which there exists any crowd-out effect.

(d) EFFECTIVE DATE.—

(1) IN GENERAL.—Except as provided in paragraph (2), the amendments made by this section apply to medical assistance for items and services furnished on or after October 1, 1999.

(2) RETROACTIVITY OF CONFORMING AMENDMENT.—The amendment made by subsection (b)(2) takes effect as if included in the enactment of the Balanced Budget Act of 1997.

SEC. 202. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS.

(a) IN GENERAL.—The next to last sentence of section 226(b) of the Social Security Act (42 U.S.C. 426) is amended by striking “24” and inserting “96”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall be effective on and after October 1, 2000.

(c) GAO REPORT.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General of the United States shall submit a report to the Congress that—

(1) examines the effectiveness and cost of the amendment made by subsection (a);

(2) examines the necessity and effectiveness of providing continuation of medicare coverage under section 226(b) of the Social Security Act to individuals

whose annual income exceeds the contribution and benefit base (as determined under section 230 of such Act);

(3) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a sliding scale premium for individuals whose annual income exceeds such contribution and benefit base;

(4) examines the viability of providing the continuation of medicare coverage under such section 226(b) based on a premium buy-in by the beneficiary's employer in lieu of coverage under private health insurance;

(5) examines the interrelation between the use of the continuation of medicare coverage under such section 226(b) and the use of private health insurance coverage by individuals during the extended period; and

(6) recommends such legislative or administrative changes relating to the continuation of medicare coverage for recipients of social security disability benefits as the Comptroller General determines are appropriate.

SEC. 203. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURES TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES.

(a) ESTABLISHMENT.—

(1) IN GENERAL.—The Secretary of Health and Human Services (in this section referred to as the “Secretary”) shall award grants described in subsection (b) to States to support the design, establishment, and operation of State infrastructures that provide items and services to support working individuals with disabilities.

(2) APPLICATION.—In order to be eligible for an award of a grant under this section, a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary shall require.

(3) DEFINITION OF STATE.—In this section, the term “State” means each of the 50 States, the District of Columbia, Puerto Rico, Guam, the United States Virgin Islands, American Samoa, and the Commonwealth of the Northern Mariana Islands.

(b) GRANTS FOR INFRASTRUCTURE AND OUTREACH.—

(1) IN GENERAL.—Out of the funds appropriated under subsection (e), the Secretary shall award grants to States to—

(A) support the establishment, implementation, and operation of the State infrastructures described in subsection (a); and

(B) conduct outreach campaigns regarding the existence of such infrastructures.

(2) ELIGIBILITY FOR GRANTS.—

(A) IN GENERAL.—No State may receive a grant under this subsection unless the State—

(i) has an approved amendment to the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) that provides medical assistance under such plan to individuals described in section 1902(a)(10)(A)(ii)(XV) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)); and

(ii) demonstrates to the satisfaction of the Secretary that the State makes personal assistance services available under the State plan under title XIX of the Social Security Act (42 U.S.C. 1396 et seq.) to the extent necessary to enable individuals described in clause (i) to remain employed (as determined under section 1905(v)(2) of the Social Security Act (42 U.S.C. 1396d(v)(2))).

(B) DEFINITION OF PERSONAL ASSISTANCE SERVICES.—In this paragraph, the term “personal assistance services” means a range of services, provided by 1 or more persons, designed to assist an individual with a disability to perform daily activities on and off the job that the individual would typically perform if the individual did not have a disability. Such services shall be designed to increase the individual's control in life and ability to perform everyday activities on or off the job.

(3) DETERMINATION OF AWARDS.—

(A) IN GENERAL.—Subject to subparagraph (B), the Secretary shall determine a formula for awarding grants to States under this section that provides special consideration to States that provide medical assistance under title XIX of the Social Security Act to individuals described in section 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XVI)).

(B) AWARD LIMITS.—

(i) MINIMUM AWARDS.—

(I) IN GENERAL.—Subject to subclause (II), no State with an approved application under this section shall receive a grant for a fiscal year that is less than \$500,000.

(II) PRO RATA REDUCTIONS.—If the funds appropriated under subsection (e) for a fiscal year are not sufficient to pay each State with an application approved under this section the minimum amount described in subclause (I), the Secretary shall pay each such State an amount equal to the pro rata share of the amount made available.

(ii) MAXIMUM AWARDS.—No State with an application that has been approved under this section shall receive a grant for a fiscal year that exceeds 15 percent of the total expenditures by the State (including the reimbursed Federal share of such expenditures) for medical assistance for individuals eligible under subclause (XV) and (XVI) of section 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)), as estimated by the State and approved by the Secretary.

(c) AVAILABILITY OF FUNDS.—

(1) FUNDS AWARDED TO STATES.—Funds awarded to a State under a grant made under this section for a fiscal year shall remain available until expended.

(2) FUNDS NOT AWARDED TO STATES.—Funds not awarded to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for awarding by the Secretary.

(d) ANNUAL REPORT.—A State that is awarded a grant under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include the percentage increase in the number of title II disability beneficiaries, as defined in section 1148(k)(3) of the Social Security Act (as amended by section 201) in the State, and title XVI disability beneficiaries, as defined in section 1148(k)(4) of the Social Security Act (as so amended) in the State who return to work.

(e) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section—

(1) for fiscal year 2000, \$20,000,000;

(2) for fiscal year 2001, \$25,000,000;

(3) for fiscal year 2002, \$30,000,000;

(4) for fiscal year 2003, \$35,000,000;

(5) for fiscal year 2004, \$40,000,000; and

(6) for each of fiscal years 2005 through 2010, the amount appropriated for the preceding fiscal year under this subsection increased by the percentage increase (if any) in the Consumer Price Index for All Urban Consumers (United States city average) for the preceding fiscal year.

(f) RECOMMENDATION.—Not later than October 1, 2009, the Secretary, in consultation with the Ticket to Work and Work Incentives Advisory Panel established under section 101(f), shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the grant program established under this section should be continued after fiscal year 2010.

SEC. 204. DEMONSTRATION OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES.

(a) STATE APPLICATION.—A State may apply to the Secretary of Health and Human Services (in this section referred to as the “Secretary”) for approval of a demonstration project (in this section referred to as a “demonstration project”) under which up to a specified maximum number of individuals who are workers with a potentially severe disability (as defined in subsection (b)(1)) are provided medical assistance equal to that provided under section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)) to individuals described in section 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).

(b) WORKER WITH A POTENTIALLY SEVERE DISABILITY DEFINED.—For purposes of this section—

(1) IN GENERAL.—The term “worker with a potentially severe disability” means, with respect to a demonstration project, an individual who—

(A) is at least 16, but less than 65, years of age;

(B) has a specific physical or mental impairment that, as defined by the State under the demonstration project, is reasonably expected, but for the receipt of items and services described in section 1905(a) of the Social Security Act (42 U.S.C. 1396d(a)), to become blind or disabled (as defined under section 1614(a) of the Social Security Act (42 U.S.C. 1382c(a))); and

- (C) is employed (as defined in paragraph (2)).
- (2) DEFINITION OF EMPLOYED.—An individual is considered to be “employed” if the individual—
- (A) is earning at least the applicable minimum wage requirement under section 6 of the Fair Labor Standards Act (29 U.S.C. 206) and working at least 40 hours per month; or
- (B) is engaged in a work effort that meets substantial and reasonable threshold criteria for hours of work, wages, or other measures, as defined under the demonstration project and approved by the Secretary.
- (c) APPROVAL OF DEMONSTRATION PROJECTS.—
- (1) IN GENERAL.—Subject to paragraph (3), the Secretary shall approve applications under subsection (a) that meet the requirements of paragraph (2) and such additional terms and conditions as the Secretary may require. The Secretary may waive the requirement of section 1902(a)(1) of the Social Security Act (42 U.S.C. 1396a(a)(1)) to allow for sub-State demonstrations.
- (2) TERMS AND CONDITIONS OF DEMONSTRATION PROJECTS.—The Secretary may not approve a demonstration project under this section unless the State provides assurances satisfactory to the Secretary that the following conditions are or will be met:
- (A) ELECTION OF OPTIONAL CATEGORY.—The State has elected to provide coverage under its plan under title XIX of the Social Security Act of individuals described in section 1902(a)(10)(A)(ii)(XV) of the Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii)(XV)).
- (B) MAINTENANCE OF STATE EFFORT.—Federal funds paid to a State pursuant to this section must be used to supplement, but not supplant, the level of State funds expended for workers with potentially severe disabilities under programs in effect for such individuals at the time the demonstration project is approved under this section.
- (C) INDEPENDENT EVALUATION.—The State provides for an independent evaluation of the project.
- (3) LIMITATIONS ON FEDERAL FUNDING.—
- (A) AUTHORIZATION OF APPROPRIATIONS.—There is authorized to be appropriated to carry out this section—
- (i) for fiscal year 2000, \$72,000,000;
- (ii) for fiscal year 2001, \$74,000,000;
- (iii) for fiscal year 2002, \$78,000,000; and
- (iv) for fiscal year 2003, \$81,000,000.
- (B) LIMITATION ON PAYMENTS.—In no case may—
- (i) the aggregate amount of payments made by the Secretary to States under this section, other than for administrative expenses described in clause (ii), exceed \$300,000,000;
- (ii) the aggregate amount of payments made by the Secretary to States for administrative expenses relating to annual reports required under subsection (d) exceed \$5,000,000; or
- (iii) payments be provided by the Secretary for a fiscal year after fiscal year 2005.
- (C) FUNDS ALLOCATED TO STATES.—The Secretary shall allocate funds to States based on their applications and the availability of funds. Funds allocated to a State under a grant made under this section for a fiscal year shall remain available until expended.
- (D) FUNDS NOT ALLOCATED TO STATES.—Funds not allocated to States in the fiscal year for which they are appropriated shall remain available in succeeding fiscal years for allocation by the Secretary using the allocation formula established under this section.
- (E) PAYMENTS TO STATES.—The Secretary shall pay to each State with a demonstration project approved under this section, from its allocation under subparagraph (C), an amount for each quarter equal to the Federal medical assistance percentage (as defined in section 1905(b) of the Social Security Act (42 U.S.C. 1395d(b)) of expenditures in the quarter for medical assistance provided to workers with a potentially severe disability.
- (d) ANNUAL REPORT.—A State with a demonstration project approved under this section shall submit an annual report to the Secretary on the use of funds provided under the grant. Each report shall include enrollment and financial statistics on—
- (1) the total population of workers with potentially severe disabilities served by the demonstration project; and
- (2) each population of such workers with a specific physical or mental impairment described in subsection (b)(1)(B) served by such project.

(e) **RECOMMENDATION.**—Not later than October 1, 2002, the Secretary shall submit a recommendation to the Committee on Commerce of the House of Representatives and the Committee on Finance of the Senate regarding whether the demonstration project established under this section should be continued after fiscal year 2003.

(f) **STATE DEFINED.**—In this section, the term “State” has the meaning given such term for purposes of title XIX of the Social Security Act (42 U.S.C. 1396 et seq.).

SEC. 205. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN.

(a) **IN GENERAL.**—Section 1882(q) of the Social Security Act (42 U.S.C. 1395ss(q)) is amended—

(1) in paragraph (5)(C), by inserting “or paragraph (6)” after “this paragraph”; and

(2) by adding at the end the following new paragraph:

“(6) Each medicare supplemental policy shall provide that benefits and premiums under the policy shall be suspended at the request of the policyholder if the policyholder is entitled to benefits under section 226(b) and is covered under a group health plan (as defined in section 1862(b)(1)(A)(v)). If such suspension occurs and if the policyholder or certificate holder loses coverage under the group health plan, such policy shall be automatically reinstated (effective as of the date of such loss of coverage) under terms described in subsection (n)(6)(A)(ii) as of the loss of such coverage if the policyholder provides notice of loss of such coverage within 90 days after the date of such loss.”.

(b) **EFFECTIVE DATE.**—The amendments made by subsection (a) apply with respect to requests made after the date of the enactment of this Act.

TITLE III—DEMONSTRATION PROJECTS AND STUDIES

SEC. 301. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) **EXTENSION OF AUTHORITY.**—Title II of the Social Security Act (42 U.S.C. 401 et seq.) is amended by adding at the end the following:

“**DEMONSTRATION PROJECT AUTHORITY**

“**SEC. 234. (a) AUTHORITY.**—

“(1) **IN GENERAL.**—The Commissioner of Social Security (in this section referred to as the ‘Commissioner’) shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of—

“(A) various alternative methods of treating the work activity of individuals entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)), including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of such individuals;

“(B) altering other limitations and conditions applicable to such individuals (including lengthening the trial work period (as defined in section 222(c)), altering the 24-month waiting period for hospital insurance benefits under section 226, altering the manner in which the program under this title is administered, earlier referral of such individuals for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation); and

“(C) implementing sliding scale benefit offsets using variations in—

“(i) the amount of the offset as a proportion of earned income;

“(ii) the duration of the offset period; and

“(iii) the method of determining the amount of income earned by such individuals,

to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of this title.

“(2) **AUTHORITY FOR EXPANSION OF SCOPE.**—The Commissioner may expand the scope of any such experiment or demonstration project to include any group of applicants for benefits under the program established under this title with impairments that reasonably may be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to

any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.

“(b) REQUIREMENTS.—The experiments and demonstration projects developed under subsection (a) shall be of sufficient scope and shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration while giving assurance that the results derived from the experiments and projects will obtain generally in the operation of the disability insurance program under this title without committing such program to the adoption of any particular system either locally or nationally.

“(c) AUTHORITY TO WAIVE COMPLIANCE WITH BENEFITS REQUIREMENTS.—In the case of any experiment or demonstration project conducted under subsection (a), the Commissioner may waive compliance with the benefit requirements of this title and the requirements of section 1148 as they relate to the program established under this title, and the Secretary may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

“(d) REPORTS.—

“(1) INTERIM REPORTS.—On or before June 9 of each year, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate an annual interim report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials that the Commissioner may consider appropriate.

“(2) TERMINATION AND FINAL REPORT.—The authority under the preceding provisions of this section (including any waiver granted pursuant to subsection (c)) shall terminate 5 years after the date of the enactment of this Act. Not later than 90 days after the termination of any experiment or demonstration project carried out under this section, the Commissioner shall submit to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate a final report with respect to that experiment or demonstration project.”

(b) CONFORMING AMENDMENTS; TRANSFER OF PRIOR AUTHORITY.—

(1) CONFORMING AMENDMENTS.—

(A) REPEAL OF PRIOR AUTHORITY.—Paragraphs (1) through (4) of subsection (a) and subsection (c) of section 505 of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) are repealed.

(B) CONFORMING AMENDMENT REGARDING FUNDING.—Section 201(k) of the Social Security Act (42 U.S.C. 401(k)) is amended by striking “section 505(a) of the Social Security Disability Amendments of 1980” and inserting “section 234”.

(2) TRANSFER OF PRIOR AUTHORITY.—With respect to any experiment or demonstration project being conducted under section 505(a) of the Social Security Disability Amendments of 1980 (42 U.S.C. 1310 note) as of the date of enactment of this Act, the authority to conduct such experiment or demonstration project (including the terms and conditions applicable to the experiment or demonstration project) shall be treated as if that authority (and such terms and conditions) had been established under section 234 of the Social Security Act, as added by subsection (a).

SEC. 302. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.

(a) AUTHORITY.—The Commissioner of Social Security shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1148(k)(3) of the Social Security Act) under which benefits payable under section 223 of such Act, or under section 202 of such Act based on the beneficiary’s disability, are reduced by \$1 for each \$2 of the beneficiary’s earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness

of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(b) SCOPE AND SCALE AND MATTERS TO BE DETERMINED.—

(1) IN GENERAL.—The demonstration projects developed under subsection (a) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(A) the effects, if any, of induced entry into the project and reduced exit from the project;

(B) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program established under section 1148 of the Social Security Act; and

(C) the savings that accrue to the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Ticket to Work and Work Incentives Advisory Panel pursuant to section 101(f)(2)(B)(ii) of this Act.

(2) ADDITIONAL MATTERS.—The Commissioner shall also determine with respect to each project—

(A) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project;

(B) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project; and

(C) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project.

The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(c) WAIVERS.—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act, and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of such Act, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in subsection (a).

(d) INTERIM REPORTS.—Not later than 2 years after the date of enactment of this Act, and annually thereafter, the Commissioner of Social Security shall submit to Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials that the Commissioner of Social Security may consider appropriate.

(e) FINAL REPORT.—The Commissioner of Social Security shall submit to Congress a final report with respect to all demonstration projects carried out under this section not later than 1 year after their completion.

(f) EXPENDITURES.—Expenditures made for demonstration projects under this section shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

SEC. 303. STUDIES AND REPORTS.

(a) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 and other Federal laws. In such study,

the Comptroller General shall specifically address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities.

(2) REPORT.—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(b) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act and the supplemental security income program under title XVI of such Act, as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of such Act.

(2) REPORT.—Not later than 3 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(c) STUDY BY GENERAL ACCOUNTING OFFICE OF THE IMPACT OF THE SUBSTANTIAL GAINFUL ACTIVITY LIMIT ON RETURN TO WORK.—

(1) STUDY.—As soon as practicable after the date of enactment of this Act, the Comptroller General of the United States shall undertake a study of the substantial gainful activity level applicable as of that date to recipients of benefits under section 223 of the Social Security Act (42 U.S.C. 423) and under section 202 of such Act (42 U.S.C. 402) on the basis of a recipient having a disability, and the effect of such level as a disincentive for those recipients to return to work. In the study, the Comptroller General also shall address the merits of increasing the substantial gainful activity level applicable to such recipients of benefits and the rationale for not yearly indexing that level to inflation.

(2) REPORT.—Not later than 2 years after the date of enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General determines are appropriate.

(d) REPORT ON DISREGARDS UNDER THE DI AND SSI PROGRAMS.—Not later than 90 days after the date of enactment of this Act, the Commissioner of Social Security shall submit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report that—

(1) identifies all income, assets, and resource disregards (imposed under statutory or regulatory authority) that are applicable to individuals receiving benefits under title II or XVI of the Social Security Act (42 U.S.C. 401 et seq., 1381 et seq.);

(2) with respect to each such disregard—

(A) specifies the most recent statutory or regulatory modification of the disregard; and

(B) recommends whether further statutory or regulatory modification of the disregard would be appropriate; and

(3) with respect to the disregard described in section 1612(b)(7) of such Act (42 U.S.C. 1382a(b)(7)) (relating to grants, scholarships, or fellowships received for use in paying the cost of tuition and fees at any educational (including technical or vocational education) institution)—

(A) identifies the number of individuals receiving benefits under title XVI of such Act (42 U.S.C. 1381 et seq.) who have attained age 22 and have not had any portion of any grant, scholarship, or fellowship received for use in paying the cost of tuition and fees at any educational (including technical

or vocational education) institution excluded from their income in accordance with that section;

(B) recommends whether the age at which such grants, scholarships, or fellowships are excluded from income for purposes of determining eligibility under title XVI of such Act should be increased to age 25; and

(C) recommends whether such disregard should be expanded to include any such grant, scholarship, or fellowship received for use in paying the cost of room and board at any such institution.

(e) STUDY BY THE GENERAL ACCOUNTING OFFICE OF SOCIAL SECURITY ADMINISTRATION'S DISABILITY INSURANCE PROGRAM DEMONSTRATION AUTHORITY.—

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess the results of the Social Security Administration's efforts to conduct disability demonstrations authorized under prior law as well as under section 301 of this Act.

(2) REPORT.—Not later than 5 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this section, together with a recommendation as to whether the demonstration authority authorized under section 301 of this Act should be made permanent.

TITLE IV—MISCELLANEOUS AND TECHNICAL AMENDMENTS

SEC. 401. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended—

(1) in subparagraph (A), by striking “by the Commissioner of Social Security” and “by the Commissioner”; and

(2) by adding at the end the following:

“(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

“(i) there is pending a request for either administrative or judicial review with respect to such claim; or

“(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

“(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) shall not apply to such redetermination.”

(b) CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5)(B) of the Contract with America Advancement Act of 1996 (42 U.S.C. 405 note) is amended to read as follows:

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act; or

“(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).”

(c) EFFECTIVE DATES.—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104–121; 110 Stat. 852 et seq.).

SEC. 402. TREATMENT OF PRISONERS.

(a) IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

(1) IN GENERAL.—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”; and

(B) by adding at the end the following:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, Social Security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1) and other provisions of this title; and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual’s confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II).

“(iv) The Commissioner shall maintain, and shall provide on a reimbursable basis, information obtained pursuant to agreements entered into under this paragraph to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility and other administrative purposes under such program.”

(2) CONFORMING AMENDMENTS TO THE PRIVACY ACT.—Section 552a(a)(8)(B) of title 5, United States Code, is amended—

(A) in clause (vi), by striking “or” at the end;

(B) in clause (vii), by adding “or” at the end; and

(C) by adding at the end the following:

“(viii) matches performed pursuant to section 202(x)(3) or 1611(e)(1) of the Social Security Act (42 U.S.C. 402(x)(3), 1382(e)(1));”.

(3) CONFORMING AMENDMENTS TO TITLE XVI.—

(A) Section 1611(e)(1)(I)(i)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i)(I)) is amended by striking “; and” and inserting “and the other provisions of this title; and”.

(B) Section 1611(e)(1)(I)(ii)(II) of such Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amended by striking “is authorized to provide, on a reimbursable basis,” and inserting “shall maintain, and shall provide on a reimbursable basis.”.

(C) Section 1611(e)(1)(I)(ii)(II) of such Act (42 U.S.C. 1382(e)(1)(I)(ii)(II)) is amended by striking “eligibility purposes” and inserting “eligibility and other administrative purposes under such program”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during which” and inserting “ending with or during or beginning with or during a period of more than 30 days throughout all of which”;

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) 50 PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv) respectively; and

(C) by inserting after clause (i) the following:

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”

(2) EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii).”

(3) ELIMINATION OF OVERLY BROAD EXEMPTION.—Section 1611(e)(1)(I)(iii) of such Act (as redesignated by paragraph (1)(B)) is amended further—

(A) by striking “(I) The provisions” and all that follows through “(II)”; and

(B) by striking “eligibility purposes” and inserting “eligibility and other administrative purposes under such program”.

(4) EFFECTIVE DATE.—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104–193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) in section 1611(e)(1)(I)(i) of the Social Security Act as amended by paragraph (2) shall be deemed a reference to such section 202(x)(1)(A)(ii) of such Act as amended by subsection (b)(1)(C).

(d) CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.—

(1) IN GENERAL.—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following new clause:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”

(2) CONFORMING AMENDMENT.—Section 202(x)(1)(B)(ii) of such Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii)”.

(3) EFFECTIVE DATE.—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of the enactment of this Act.

SEC. 403. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) IN GENERAL.—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a

member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefor (in such form and manner, and with such official, as may be prescribed by the Commissioner of Internal Revenue), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant's second taxable year beginning after December 31, 1999. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act), as specified in the application, either with respect to the applicant's first taxable year beginning after December 31, 1999, or with respect to the applicant's second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant's Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant's income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding paragraphs (4) and (5) of section 1402(c)) except for the exemption under section 1402(e)(1) of such Code.

(b) EFFECTIVE DATE.—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1999, and with respect to monthly insurance benefits payable under title II on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual's application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 404. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) IN GENERAL.—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking “title XVI” and inserting “title II or XVI”.

(b) EFFECTIVE DATE.—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103–296; 108 Stat. 1464).

SEC. 405. AUTHORIZATION FOR STATE TO PERMIT ANNUAL WAGE REPORTS.

(a) IN GENERAL.—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by inserting before the semicolon the following: “, and except that in the case of wage reports with respect to domestic service employment, a State may permit employers (as so defined) that make returns with respect to such employment on a calendar year basis pursuant to section 3510 of the Internal Revenue Code of 1986 to make such reports on an annual basis”.

(b) TECHNICAL AMENDMENTS.—Section 1137(a)(3) of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is amended—

(1) by striking “(as defined in section 453A(a)(2)(B)(iii))”; and

(2) by inserting “(as defined in section 453A(a)(2)(B))” after “employers” .

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to wage reports required to be submitted on and after the date of enactment of this Act.

SEC. 406. ASSESSMENT ON ATTORNEYS WHO RECEIVE THEIR FEES VIA THE SOCIAL SECURITY ADMINISTRATION.

(a) IN GENERAL.—Section 206 of the Social Security Act (42 U.S.C. 606) is amended by adding at the end the following:

“(d) ASSESSMENT ON ATTORNEYS.—

“(1) IN GENERAL.—Whenever a fee for services is required to be certified for payment to an attorney from a claimant's past-due benefits pursuant to subsection (a)(4)(A) or (b)(1)(A), the Commissioner shall impose on the attorney an assessment calculated in accordance with paragraph (2).

“(2) AMOUNT.—

“(A) The amount of an assessment under paragraph (1) shall be equal to the product obtained by multiplying the amount of the representative's fee that would be required to be so certified by subsection (a)(4)(A) or (b)(1)(A) before the application of this subsection, by the percentage specified in subparagraph (B).

“(B) The percentage specified in this subparagraph is—

“(i) for calendar years before 2001, 6.3 percent, and

“(ii) for calendar years after 2000, 6.3 percent or such different percentage rate as the Commissioner determines is necessary in order to achieve full recovery of the costs of certifying fees to attorneys from the past-due benefits of claimants.

“(3) COLLECTION.—The Commissioner may collect the assessment imposed on an attorney under paragraph (1) by offset from the amount of the fee otherwise required by subsection (a)(4)(A) or (b)(1)(A) to be certified for payment to the attorney from a claimant’s past-due benefits.

“(4) PROHIBITION ON CLAIMANT REIMBURSEMENT.—An attorney subject to an assessment under paragraph (1) may not, directly or indirectly, request or otherwise obtain reimbursement for such assessment from the claimant whose claim gave rise to the assessment.

“(5) DISPOSITION OF ASSESSMENTS.—Assessments on attorneys collected under this subsection shall be credited to the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate.

“(6) AUTHORIZATION OF APPROPRIATIONS.—The assessments authorized under this section shall be collected and available for obligation only to the extent and in the amount provided in advance in appropriations Acts. Amounts so appropriated are authorized to remain available until expended, for administrative expenses in carrying out title II of the Social Security Act and related laws.”.

(b) CONFORMING AMENDMENTS.—

(1) Section 206(a)(4)(A) of such Act (42 U.S.C. 606(a)(4)(A)) is amended by inserting “and subsection (d)” after “subparagraph (B)”.

(2) Section 206(b)(1)(A) of such Act (42 U.S.C. 606(b)(1)(A)) is amended by inserting “, but subject to subsection (d) of this section” after “section 205(i)”.

(c) EFFECTIVE DATE.—The amendments made by this section shall apply in the case of any attorney with respect to whom a fee for services is required to be certified for payment from a claimant’s past-due benefits pursuant to subsection (a)(4)(A) or (b)(4)(A) of section 206 of the Social Security Act after—

(1) December 31, 1999, or

(2) the last day of the first month beginning after the month in which this Act is enacted.

SEC. 407. EXTENSION OF AUTHORITY OF STATE MEDICAID FRAUD CONTROL UNITS.

(a) EXTENSION OF CONCURRENT AUTHORITY TO INVESTIGATE AND PROSECUTE FRAUD IN OTHER FEDERAL HEALTH CARE PROGRAMS.—Section 1903(q)(3) of the Social Security Act (42 U.S.C. 1396b(q)(3)) is amended—

(1) by inserting “(A)” after “in connection with”; and

(2) by striking “title.” and inserting “title; and (B) upon the approval of the Inspector General of the relevant Federal agency in a particular case or investigation, any aspect of the provision of health care services and activities of providers of such services under any Federal health care program (as defined in section 1128B(f)(1)), if (i) the suspected fraud or violation of law in such case or investigation is primarily related to the State plan under this title, and (ii) when such approval is granted, the Inspector General of the relevant Federal agency retains the continuing authority to join the case or investigation, or after consultation with the entity, to replace the entity as the primary agency assigned to the case or investigation.”.

(b) RECOUPMENT OF FUNDS.—Section 1903(q)(5) of such Act (42 U.S.C. 1396b(q)(5)) is amended—

(1) by inserting “or under any Federal health care program (as so defined)” after “plan”; and

(2) by adding at the end the following: “All funds collected in accordance with this paragraph shall be credited exclusively to, and available for expenditure under, the Federal health care program (including the State plan under this title) that was subject to the activity that was the basis for the collection.”.

(c) EXTENSION OF AUTHORITY TO INVESTIGATE AND PROSECUTE RESIDENT ABUSE IN NON-MEDICAID BOARD AND CARE FACILITIES.—Section 1903(q)(4) of such Act (42 U.S.C. 1396b(q)(4)) is amended to read as follows:

“(4)(A) The entity has—

“(i) procedures for reviewing complaints of abuse or neglect of patients in health care facilities which receive payments under the State plan under this title;

“(ii) at the option of the entity, procedures for reviewing complaints of abuse or neglect of patients residing in board and care facilities; and

“(iii) procedures for acting upon such complaints under the criminal laws of the State or for referring such complaints to other State agencies for action.

“(B) For purposes of this paragraph, the term ‘board and care facility’ means a residential setting which receives payment (regardless of whether such payment is made under the State plan under this title) from or on behalf of two or more unrelated adults who reside in such facility, and for whom one or both of the following is provided:

“(i) Nursing care services provided by, or under the supervision of, a registered nurse, licensed practical nurse, or licensed nursing assistant.

“(ii) A substantial amount of personal care services that assist residents with the activities of daily living, including personal hygiene, dressing, bathing, eating, toileting, ambulation, transfer, positioning, self-medication, body care, travel to medical services, essential shopping, meal preparation, laundry, and housework.”

(d) EFFECTIVE DATE.—The amendments made by this section take effect on the date of enactment of this Act.

SEC. 408. ELIMINATION OF FRAUD AND ABUSE ASSOCIATED WITH CERTAIN PAYMENTS UNDER THE MEDICAID PROGRAM.

(a) REQUIREMENTS FOR PAYMENTS.—Section 1903(i) of the Social Security Act (42 U.S.C. 1396b(i)) is amended—

(1) in paragraph (19), by striking the period at the end and inserting “; or”;

(2) by inserting after paragraph (19) the following:

“(20) with respect to any amount expended for an item or service provided under the plan, or for any administrative expense incurred to carry out the plan, which is provided or incurred by, or on behalf of, a local educational agency or school district—

“(A) for which payment is made for a bundled group of individual items, services, and administrative expenses, unless payment for the grouped items, services, and administrative expenses is made in accordance with a system that is approved by the Secretary and that—

“(i) provides for an itemization to the Secretary for assuring accountability of cost of the grouped items, services, and administrative expenses and includes payment rates and the methodologies underlying the establishment of such rates;

“(ii) has an actuarially sound basis for determining the payment rates and the methodologies; and

“(iii) reconciles payments for the grouped items and services provided and administrative expenses incurred under this title with their cost;

or

“(B) for which payment is otherwise made using a fee-for-service methodology, unless payment for the item, service, or administrative expense is made in accordance with a system that is approved by the Secretary and that reimburses only for the cost of an item or service provided and an administrative expense incurred that is reasonable and related to the cost of providing or incurring such item, service, or administrative expense or that is based on such other tests of reasonableness as the Secretary prescribes in regulations; or

“(21) with respect to any transportation service provided by, or on behalf of, a local educational agency or school district for a child unless—

“(A) a medical need for transportation is noted in the individual education plan of the child, including a child residing in a geographic area within which school bus transportation is otherwise not provided;

“(B) the vehicle used to furnish such transportation service is specially equipped to accommodate individuals with special medical needs; and

“(C) the payment for such service—

“(i) is made only with respect to costs associated with transporting individuals whose medical needs require transport in such a vehicle; and

“(ii) reflects only the proportion of the transportation costs equal to—

“(I) the proportion of time spent by such individuals at such location in activities relating to the receipt of covered services under this title; or

“(II) such other proportion based on an allocation method that the Secretary finds reasonable in light of the benefit to the program under this title and consistent with the cost principles contained in OMB Circular A-87; or

“(22) with respect to any amount expended for an item or service under the plan or for any administrative expense to carry out the plan provided by a public agency that enters into a contract with an entity for the development and operation of submitting claims for such amount unless the agency—

“(A) uses a competitive bidding process or otherwise to contract with such entity at a reasonable rate commensurate with the services performed by such entity; and

“(B) requires that any fees (including any administrative fees) to be paid to the entity for the development of the claims procedure are identified as a non-contingent, specified dollar amount in the contract.”; and

(3) in the third sentence, by striking “(17), and (18)” and inserting “(17), (18), (19), (20), and (21)”.

(b) PROVISION OF ITEMS AND SERVICES THROUGH MEDICAID MANAGED CARE ORGANIZATIONS.—Section 1903(m)(2)(A) of the Social Security Act (42 U.S.C. 1396b(m)(2)(A)) is amended by redesignating clause (xi) (as added by section 4701(c)(3) of the Balanced Budget Act of 1997) as clause (xiii), by striking “and” at the end of clause (xi), and by inserting after clause (xi) the following:

“(xii) such contract provides that with respect to payment for, and coverage of, such services in any case in which—

“(I) a medicaid managed care organization is responsible for providing such services to a child eligible for benefits under this title but coverage of services required under the child’s individual education plan is not included in the managed care contract but is the responsibility of the local educational agency or school district in the State; or

“(II) acute care services are available in the schools to children enrolled under such contract,

that there are assurances in the State plan and in the managed care contract that coordination exists between the local educational agency or school district and the managed care plan to prevent duplication of services or duplication of payments under this title for such services.”

(c) ALLOWABLE SHARE OF FFP WITH RESPECT TO PAYMENT FOR SERVICES FURNISHED IN SCHOOL SETTING.—Section 1903 of the Social Security Act (42 U.S.C. 1396b) is amended by adding at the end the following:

“(x) In the case of any Federal financial participation amount determined under subsection (a) with respect to any expenditure for an item or service under the plan, or for any administrative expense to carry out the plan, which is furnished by a local educational agency or school district, the State shall provide that—

“(1) 100 percent of such amount be paid to such agency or district, or

“(2) a percentage of such amount be retained by the State, but only to the extent such percentage does not exceed the percentage of such expenditure funded by State general revenue sources dedicated for such purpose.”

(d) UNIFORM METHODOLOGY FOR SCHOOL-BASED CLAIMS.—Not later than 90 days after the date of enactment of this Act, the Administrator of the Health Care Financing Administration, in consultation with State medicaid and educational agencies and local school systems, shall develop and implement a uniform methodology for claims for payment of medical assistance and related administrative expenses furnished under title XIX of the Social Security Act by schools. Such methodology for administrative expenses shall be based on standards related to time studies and population estimates and a national standard for determining payment for such administrative expenses.

(e) EFFECTIVE DATE.—The amendments made by this section shall apply to items and services provided on and after the date of enactment of this Act, without regard to whether implementing regulations are in effect. The Secretary of Health and Human Services shall promulgate such final regulations as are necessary to carry out such amendments not later than 1 year after such date of enactment.

I. INTRODUCTION

A. PURPOSE AND SUMMARY

The Ticket to Work and Work Incentives Improvement Act of 1999 is designed to assist Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disabled beneficiaries in obtaining and keeping jobs through the provision of health, vocational rehabilitation, and other services.

B. BACKGROUND AND NEED FOR LEGISLATION

The Social Security disability insurance program insures workers and their families against the loss of income due to disability. More than 4.5 million people with disabilities receive Social Security Disability Insurance (SSDI) benefits because they have paid into the Social Security system. Another 4 million adults with disabilities receive Supplemental Security Income (SSI) payments. Americans rely on these benefits as insurance against the possibility that they will become disabled.

Historically, less than 1 percent of disabled beneficiaries leave the rolls because of successful rehabilitation. State Vocational Rehabilitation (VR) agencies have a limited capacity to serve SSA beneficiaries and therefore have had a negligible impact on the number of disabled beneficiaries who enter the workforce. The Congressional Budget Office (CBO) estimates that less than 15 percent of new disability beneficiaries are referred to state VR agencies and only about 10 percent of those referred are accepted for services. This means that fewer than 2 percent of new disability beneficiaries actually receive VR services designed to help them return to or enter the workforce.

In addition, beneficiaries with disabilities are staying on the rolls longer than in the past because of: (1) increased life expectancy; (2) earlier onset of disability beneficiaries; and (3) increased awards for individuals with mental impairments (who tend to be younger and physically healthier). Due in large part to these trends, SSA's disability programs have experienced tremendous growth in recent years. Between 1987 and 1997, the number of working-age beneficiaries on the SSDI and SSI disability rolls increased 64 percent. During this period, cash benefits to adults and children with disabilities increased from about \$25 billion to \$61 billion. These facts underscore the need for initiatives designed to encourage disabled beneficiaries to obtain employment and rehabilitation services and to enter the workforce.

It is equally true that, given the choice, many disability beneficiaries would rather be working. In hearings and through personal contacts, Members of the Committee have learned about the obstacles Social Security disability beneficiaries face in attempting to work, including fear of losing health and cash benefits, little known and complex work incentives, and the "all or nothing" nature of SSDI cash benefits that can make work at low wages financially unattractive. Because of the protracted application process and the difficulty proving a disability, beneficiaries also expressed their fear of having to qualify again for benefits if their work attempts were unsuccessful. After consulting individuals with disabilities, advocates, rehabilitation experts, providers of services, and the Administration, the Committee has developed a comprehensive proposal to help disabled individuals overcome these obstacles, which is supported on a widespread bipartisan basis.

H.R. 3070, the Ticket to Work and Work Incentives Improvement Act of 1999, would create a program to ease the transition of SSDI and SSI disabled beneficiaries into the workforce, by expanding access to vocational rehabilitation and employment support services and extending health care coverage for disabled beneficiaries who

return to work. The Commissioner of Social Security would be required to establish a demonstration project to test the gradual reduction of SSDI benefits when beneficiaries return to work. In addition, the proposal contains several technical amendments to Title II of the Social Security Act that have previously passed in the House and for which similar Title XVI provisions were enacted. The proposal also provides a two-year period allowing members of the clergy to revoke their exemption from Social Security coverage. The proposal contains a provision requiring the Commissioner to impose an assessment on attorney fees to recover the cost of certifying payments to attorneys.

C. LEGISLATIVE HISTORY

Since 1995, the Subcommittee on Social Security has held 6 hearings which have addressed needed program changes to encourage individuals with disabilities to work, and has received testimony from more than 36 witnesses. The Subcommittee held a hearing on March 11, 1999 and received testimony on the barriers preventing disabled beneficiaries from returning to work. During the 105th Congress, the Subcommittee held a hearing on March 17, 1998, and received testimony in support of H.R. 3433, the Ticket to Work and Self-sufficiency Act of 1998 from individuals with disabilities, advocates for the disabled, and providers of services. On May 6, 1998, the Full Committee ordered favorably reported, H.R. 3433, as amended, and the legislation passed the House by a vote of 410–1 on June 4, 1998. The Senate did not take up the bill during the 105th Congress.

On October 13, 1999, Mr. Hulshof (along with Committee Chairman Archer, Subcommittee Chairman Shaw, and Committee Members Camp, Dunn, English, Foley, Hayworth, Herger, Houghton, Ramstad, Thomas, and Weller) introduced H.R. 3070, the Ticket to Work and Work Incentives Improvement Act of 1999. On October 14, 1999, the Full Committee ordered favorably reported H.R. 3070 by a 33–1 vote, with a quorum present.

II. EXPLANATION OF PROVISIONS

A. SHORT TITLE

The short title of H.R. 3070 is the Ticket to Work and Work Incentives Improvement Act of 1999.

B. TICKET TO WORK AND SELF-SUFFICIENCY AND RELATED PROVISIONS

1. ESTABLISHMENT OF THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM (SECTION 101)

Present law

Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disabled individuals applying for or awarded benefits shall be promptly referred to the State vocational rehabilitation (VR) agency for necessary services. The Commissioner of Social Security is authorized to use trust fund and general revenue monies to reimburse State VR agencies for reasonable and nec-

essary costs of VR services when such services result in an individual performing work at the substantial gainful level (\$700 per month as of July 1, 1999) for 9 months.

Explanation of provision

The Committee bill would create a Ticket to Work and Self-Sufficiency Program. Under the program, the Commissioner of Social Security is authorized to provide SSDI and SSI disabled beneficiaries with a ticket which they may use to obtain services of their choice from an employment network (that is, provider of services) of their choice to enable them to enter the workforce.

The bill would provide State VR agencies with the option of participating in the Program as an employment network or remaining in the current law reimbursement system, including the option to elect either payment method on a case-by-case basis. A State VR agency which elects to participate in the Program would be reimbursed under current law provisions for those beneficiaries who began receiving services prior to the agency's election to participate. Services provided by State VR agencies participating in the Program would be governed by plans for VR services approved under Title I of the Rehabilitation Act. The Social Security Administration (SSA) would work with State VR agencies to establish agreements with employment networks that wished to refer clients to the State VR agencies for some of their services. It is the intent of the Committee that the agreements would be broad-based, rather than case-by-case agreements.

The Commissioner would contract with program managers (one or more organizations in the private or public sector with expertise and experience in the field of vocational rehabilitation or employment services) through a competitive bidding process, to help SSA administer the Program. Agreements with program managers would include performance standards, including measures for ease of access and success. Program managers would be precluded from delivering services in their own service area.

Program managers would recruit and recommend employment networks to the Commissioner, ensure adequate choices of services are available to beneficiaries, ensure beneficiary access to services, and provide assurances to SSA that employment networks are complying with agreement terms. In addition, program managers would make certain that beneficiaries are allowed changes in employment networks.

Employment networks would consist of a single provider (public or private) or an association of providers combined into a single entity which would assume responsibility for the coordination and delivery of services. Employment networks may include a one-stop delivery system established under Title I of the Workforce Investment Act of 1998. The employment networks would be required to demonstrate specific expertise and experience and would provide an array of services under the Program. The Commissioner would select and enter into agreements with employment networks, provide periodic quality assurance reviews of employment networks, and establish a method for resolving disputes between beneficiaries and employment networks. Employment networks would meet financial reporting requirements as prescribed by the Commissioner, and

prepare periodic performance reports which would be provided to beneficiaries holding a ticket and made available to the public.

Employment networks and beneficiaries would together develop an individual employment plan in such a way that the beneficiary could exercise informed choice in selecting an employment goal and specific services needed to achieve that goal.

H.R. 3070 authorizes payment to employment networks for outcomes and long-term results through one of two payment systems, each designed to ensure that as many providers as possible are available to serve beneficiaries with disabilities.

- The outcome payment system would provide payment to employment networks up to 40 percent of the average monthly disability benefit for each month benefits are not payable to the beneficiary due to work, but not for more than 60 months.

- The outcome-milestone payment system is similar to the outcome payment system, except it would provide for early payment(s) based on the achievement of one or more milestones directed towards the goal of permanent employment. (To ensure the cost-effectiveness of the Program, the total amount payable to a service under the outcome-milestone payment system must be less than the total amount that would have been payable under the outcome payment system.)

The Commissioner would periodically review both payment systems and, if necessary, alter the percentages, milestones, or payment periods to ensure that employment networks have adequate incentive to assist beneficiaries in entering the workforce. In addition, the Commissioner would submit a report to Congress with recommendations for methods to adjust payment rates to ensure adequate incentives for the provision of services to individuals with special needs.

H.R. 3070 would authorize transfers from the Social Security Trust Funds to carry out these provisions for Social Security beneficiaries, and authorizes appropriations to the Social Security Administration to carry out these provisions for SSI recipients.

The Committee bill defines “disabled beneficiary” for purposes of Program participation to include SSI disability benefits recipients and Social Security beneficiaries receiving disability insurance, disabled widow’s, and childhood disability benefits.

The Commissioner would prescribe regulations necessary to carry out the Program. The Program would be implemented on a graduated basis at phase-in sites selected by the Commissioner beginning no later than one year after enactment, with services available in every state within three additional years after the Program’s start. The Commissioner would design and conduct a series of evaluations to assess the cost-effectiveness and effects of the Program. The Commissioner would periodically provide to the Congress a detailed report of the Program’s progress, success, and any modifications needed.

An Advisory Panel would be created consisting of experts representing consumers, providers of services, employers, and employees, at least one-half of whom are individuals with disabilities or representatives of individuals with disabilities. The Advisory Panel would be composed of twelve members appointed as follows:

Four by the President, not more than two of whom may be of the same political party;

Two by the Speaker of the House of Representatives, in consultation with the Chairman of the Committee on Ways and Means;

Two by the Minority Leader of the House of Representatives, in consultation with ranking minority member of the Committee on Ways and Means;

Two by the Majority Leader of the Senate, in consultation with the Chairman of the Committee on Finance; and

Two members would be appointed by the Minority Leader of the Senate, in consultation with the ranking minority member of the Committee on Finance.

The Panel would advise the Commissioner and report to the Congress on Program implementation including such issues as the establishment of pilot sites, refinements to the Program, and the design of Program evaluations.

The Commissioner would prescribe regulations to address implementation issues such as the way in which tickets would be distributed to beneficiaries, the way in which State agencies would elect participation in the Program, the terms of agreements to be entered into with program managers and with employment networks, and procedures for effective oversight of the Program by the Commissioner.

Reason for change

The proposal is designed to increase choices available to beneficiaries and increase the supply of service providers available to help beneficiaries transition into the workforce. The proposal builds on the principles of consumer choice and empowerment, encouraging competition among providers of services, rewarding providers for results, and encouraging providers to have a continuing interest in beneficiaries' long-term success in maintaining employment.

Recognizing that State VR agencies are able to provide consumers with a wide range of specialized services, the proposal would provide the State VR agencies the option of electing on a case-by-case basis to participate in the Program or remaining under the current law reimbursement system.

The Commissioner of Social Security is the authorizing agent in certifying payments from the Trust Funds and the general fund of the Treasury and is, therefore responsible for overall administration of the Program.

With respect to the issuance of tickets, the Committee intends that the Commissioner would determine the method by which SSA would notify beneficiaries of the availability of tickets and the duration for which the tickets may be assigned to an employment network as well as the allowable renewal periods, if any, of the ticket.

The Committee also intends that the Commissioner prescribe the times at which payments would be made to employment networks. In addition, the Commissioner would determine the phase-in schedule for State participation in the program although the Program must be operational in all States within four years.

Given SSA's limited resources and experience in administering employment and vocational rehabilitation services, the bill estab-

lishes program managers to help SSA administer the Program on a national basis. The Committee wants to ensure that program managers attempt to maximize beneficiary access to needed services by recommending an adequate number of providers to the Commissioner for selection.

The Committee recognizes that individuals with disabilities can benefit from early assistance from groups providing dispute resolution services and believes that the Commissioner should take this into account when establishing a mechanism to resolve disputes between beneficiaries and providers.

Because State VR agencies have a limited ability to accommodate the significant number of beneficiaries with disabilities, the proposal creates a level playing field which allows other private and public entities to provide services along with the State VR agencies. Expanding the pool of providers from which a beneficiary may obtain employment and rehabilitation services will increase the number of beneficiaries who receive timely, high-quality employment, rehabilitation, and other support services. The Committee intends that services provided would enhance beneficiaries' employment skills make them more marketable in the workforce and ultimately help them secure and retain long-term employment. Employment networks would be established so that providers could pool their resources together, giving beneficiaries access to a wide array of services to meet their individualized needs.

The Committee encourages the Commissioner to ensure that services are available without being unduly restricted by State borders.

The Committee intends that the "other support services" which are offered by providers may include, but are not limited to, assistive technology services and devices, supported employment services, personal assistance services, and auxiliary aids and services.

The proposal would require that employment networks ensure that employment, vocational rehabilitation, and other support services are provided under individual employment plans. The employment network and the beneficiary would work together to develop an individual employment plan. The employment plan would provide beneficiaries with personal interest and meaningful participation in their attempt at obtaining work.

The Committee believes that an employment plan should:

- Be signed by both the beneficiary and a representative of the employment network in receipt of the beneficiary's ticket;

- Provide the beneficiary with the opportunity to amend the plan if required by a change in circumstances; and

- Be made available to the beneficiary and, as appropriate, in an accessible format chosen by the individual.

H.R. 3070 would authorize the Commissioner to pay employment networks under either an outcome payment system or an outcome-milestone payment system. Generally, providers bear a financial risk by providing services first, and being paid later according to their results (i.e., assisting beneficiaries to work, and remaining at work and off the benefit rolls). To help small providers participate in the Program, the proposal would provide for one or more milestone payments to providers when an employment-related result has been achieved. Without the outcome-milestone payment sys-

tem, provider participation in the Program would be limited to only a few large providers who have the necessary cash flow to serve a substantial number of disabled individuals. However, to ensure the cost-effectiveness of the Program, the total outcome-milestone payment would be required to be less than the total amount payable to a provider for each individual under the outcome payment system. Because the provider is paid for results under each payment system, the provider has an incentive to work with the beneficiary to find the most effective means of helping that beneficiary obtain and retain employment.

The Committee recognizes that implementing the Ticket to Work and Self-Sufficiency Program would require SSA to make system changes related to administering the Program, promulgate regulations, prepare field office instructions, design a Program evaluation methodology, and award a contract to program manager, among other changes. Therefore, the proposal would provide SSA with 1 year to prepare for Program implementation. The proposal also would provide for a phase-in of the Program to ensure that it is implemented in a feasible, cost-effective manner that provides expanded opportunities for beneficiaries to work and ultimately to assist them in leaving the disability program.

Since SSA has limited expertise in employment, vocational rehabilitation, or other support services, the proposal would create a Ticket to Work and Work Incentives Advisory Panel to advise the Commissioner in implementing the Program. The Advisory Panel would be an active body consisting of diverse experts representing consumers, providers of services, employers, and employees, one-half of whom would be individuals with disabilities or representative of individuals with disabilities. The Advisory Panel would provide guidance to the Commissioner on implementing the Program in an efficient, cost-effective manner that provides the maximum incentive to disabled beneficiaries to seek work. The Advisory Panel would also provide advice on the design and evaluation of the Program as well as advice on the design of the demonstration project providing for reductions in SSDI benefits based on earnings. The Committee expects the Commissioner to take full advantage of the Advisory Panel's expertise.

The bill would repeal the current law provision that specifies that refusal to accept VR services without good cause will lead to the loss of benefits. Although current law, SSA has not enforced this provision. Because the Program is a voluntary one, a benefit-withholding sanction is not feasible. In addition, research indicates that disabled beneficiaries who are most successful at work attempts are those who are self-motivated. Therefore, the Committee views the imposition of penalties against disabled beneficiaries who choose not to work as counter-productive.

Effective date

The proposal would be implemented on a graduated basis at phase-in sites selected by the Commissioner beginning no later than 1 year after enactment. The Program would be fully implemented as soon as practicable, but not later than 3 years after the Program begins.

2. WORK ACTIVITY STANDARD AS A BASIS FOR REVIEW OF AN
INDIVIDUAL'S DISABLED STATUS (SECTION 111)

Present law

Eligibility for Social Security disability insurance (SSDI) cash benefits requires an applicant to meet certain criteria, including the presence of a disability that renders the individual unable to engage in substantial gainful activity. Substantial gainful activity is defined as work that results in earnings exceeding an amount set in regulations (\$700 per month, as of July 1, 1999). Continuing disability reviews (CDRs) are conducted by the Social Security Administration (SSA) to determine whether an individual remains disabled and thus eligible for continued benefits. CDRs may be triggered by evidence of recovery from disability, including return to work. SSA is also required to conduct periodic CDRs every 3 years for beneficiaries with a nonpermanent disability, and at times determined by the Commissioner for beneficiaries with a permanent disability.

Explanation of provision

The Committee bill establishes the standard that CDRs for long-term SSDI beneficiaries (i.e., those receiving disability benefits for at least 24 months) would be limited to periodic CDRs. SSA would continue to evaluate work activity to determine whether eligibility for cash benefits continued, but a return to work would not trigger a review of the beneficiary's impairment to determine whether it continued to be disabling.

Reason for change

The provision is intended to encourage long-term SSDI beneficiaries to return to work by ensuring that work activity would not trigger an unscheduled medical review of their eligibility. However, like all beneficiaries, long-term beneficiaries would have benefits suspended if earnings exceeded the substantial gainful activity level, and would be subject to periodic continuing disability reviews.

Effective date

January 1, 2003.

3. EXPEDITED REINSTATEMENT OF DISABILITY BENEFITS (SECTION 112)

Present law

Individuals entitled to Social Security disability insurance (SSDI) benefits may receive expedited reinstatement of benefits following termination of benefits because of work activity any time during a 36-month extended period of eligibility. That is, benefits may be reinstated without the need for a new application and disability determination. After the close of the extended period of disability, an individual must file a new application with a new determination of disability by SSA before entitlement can be reestablished.

Section 1619 of the Social Security Act provides that Supplemental Security Income (SSI) beneficiaries who return to work despite a continuing disability may remain eligible for: (1) special SSI

benefits if their earned income is not enough to pay for the services previously covered by Medicaid, or (2) Medicaid even if no longer eligible for cash benefits. After their eligibility for any of these benefits has been suspended for 12 consecutive months, they must file a new application and receive a new determination of disability in order to become entitled to benefits again.

Explanation of provision

The Committee bill would establish that an individual: (1) whose entitlement to SSDI benefits had been terminated on the basis of work activity following completion of an extended period of eligibility; or (2) whose eligibility for SSI benefits (including special SSI eligibility status under section 1619(b) of the Social Security Act) had been terminated following suspension of those benefits for 12 consecutive months on account of excess income resulting from work activity, may request reinstatement of those benefits without filing a new application. The individual must have become unable to continue working due to his or her medical condition and must file a reinstatement request within the 60-month period following the month of such termination.

While the Commissioner is making a determination pertaining to a reinstatement request, the individual would be eligible for provisional benefits (cash benefits and Medicare or Medicaid, as appropriate) for a period of not more than 6 months. If the Commissioner makes a favorable determination, such individual's prior entitlement to benefits would be reinstated, as would be the prior benefits of his or her dependents who continue to meet the entitlement criteria. If the Commissioner makes an unfavorable determination, provisional benefits would end, but the provisional benefits already paid would not be considered an overpayment.

Reason for change

The provision is intended to encourage SSDI and SSI beneficiaries to return to work by providing assurance that cash and health benefits could be restored in a timely fashion if an individual must discontinue employment and continues to meet standards for disability set by the Social Security Administration.

Effective date

One year after enactment.

4. WORK INCENTIVES OUTREACH PROGRAM (SECTION 121)

Present law

The Social Security Administration prepares and distributes educational materials on work incentives for individuals receiving Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) benefits. Social Security personnel in its 1,300 field offices are available to answer questions about work incentives. Work incentives currently include: exclusions for impairment-related work expenses; trial work periods during which an individual may continue to receive cash benefits; a 36-month extended period of eligibility during which cash benefits can be reinstated at any time; continued eligibility for Medicaid and Medicare; contin-

ued payment of benefits while a beneficiary is enrolled in a vocational rehabilitation program; and plans for achieving self-support (PASS).

Explanation of provision

The Commissioner of Social Security would establish a community-based work incentives planning and assistance program for the purpose of disseminating accurate information to individuals on work incentives. Under this program, the Commissioner would:

Establish a program of grants, cooperative agreements, or contracts to provide benefits planning and assistance (including protection and advocacy services) to individuals with disabilities and outreach to individuals with disabilities who are potentially eligible for work incentive programs; and

Establish a corps of work incentive specialists located within the Social Security Administration.

The Commissioner would determine the qualifications of agencies eligible for grants, cooperative agreements, or contracts. Social Security Administration field offices and State Medicaid agencies are deemed ineligible. Eligible organizations may include Centers for Independent Living, protection and advocacy organizations, and client assistance programs (established in accordance with the Rehabilitation Act of 1973, as amended); State Developmental Disabilities Councils (established in accordance with the Developmental Disabilities Assistance and Bill of Rights Act); and State welfare agencies (funded under Title IV–A of the Social Security Act).

Up to \$23 million annually may be appropriated for this program for fiscal years 2000–2004. The grant amount in each State would be based on the number of beneficiaries in the State, subject to certain limits.

Reason for change

A recurring complaint among disabled beneficiaries and advocates for disabled individuals is that SSA’s work incentives are complex, difficult to understand, and poorly implemented. The proposal would improve both community-based sources of information through a grant program and expertise within the Social Security Administration with a corps of work incentives specialists similar to Plans for Achieving Self-Support specialists in SSA today. Work incentive specialists would be responsible for disseminating accurate and accessible information to disabled beneficiaries on all facets of SSA’s SSDI and SSI work incentives. The proposal is intended to improve information about and encourage the use of work incentives by SSDI and SSI beneficiaries.

Effective date

Date of enactment.

5. STATE GRANTS FOR WORK INCENTIVES ASSISTANCE TO DISABLED BENEFICIARIES (SECTION 122)

Present law

Grants to States to provide assistance to individuals with disabilities are authorized under the Developmental Disabilities Assist-

ance and Bill of Rights Act (42 U.S.C. 6041 et seq.). Such assistance includes information on and referral to programs and services and legal, administrative, and other appropriate remedies to ensure access to services.

Explanation of provision

The Commissioner of Social Security would make grants to existing protection and advocacy programs authorized by the States under the Developmental Disabilities Assistance and Bill of Rights Act. Services would include information and advice about obtaining vocational rehabilitation, employment services, advocacy, and other services a Social Security disability insurance (SSDI) or Supplemental Security Income (SSI) beneficiary may need to secure or regain gainful employment, including applying for and receiving work incentives.

Up to \$7 million annually may be appropriated for this program for each fiscal years 2000–2004. Individual grant amounts would be based on the number of beneficiaries in a State, subject to certain limits.

Reason for change

The proposal is intended to improve direct assistance to SSDI and SSI beneficiaries in making use of vocational rehabilitation, work incentives, and any related assistance that would help a beneficiary to go to work. Disabled beneficiaries and advocates report that the work incentives for SSI and SSDI beneficiaries are complex and difficult to understand, and information and assistance from the Social Security Administration is frequently not helpful. The Committee provision would improve “hands on” assistance by providing grants to existing State-authorized entities with expertise in working with people with disabilities. Since some beneficiaries attempt to work without receiving rehabilitation services, work incentive information services would be available to all beneficiaries, not just those participating in the Ticket program.

Effective date

Date of enactment.

B. EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

1. EXPANDING STATE OPTIONS UNDER THE MEDICAID PROGRAM FOR WORKERS WITH DISABILITIES (SECTION 201)

(This section is under the jurisdiction of the Committee on Commerce.)

Present law

Current law requires most States to provide Medicaid coverage for disabled individuals who are eligible for Supplemental Security Income (SSI). Individuals are considered disabled if they are unable to engage in substantial gainful activity (defined in Federal regulations as earnings of \$700 per month) due to a medically determinable physical or mental impairment which is expected to result in death, or which has lasted or can be expected to last for at

least 12 months. Eleven States link Medicaid eligibility to disability definitions which may be more restrictive than SSI criteria.

Eligibility for SSI is determined by certain federally-established income and resource standards. Individuals are eligible for SSI if their "countable" income falls below the Federal maximum monthly SSI benefit (\$500 for an individual, and \$751 for couples in 1999). Not all income is counted for SSI purposes. Excluded from income are the first \$20 of any monthly income (i.e., either unearned, such as social security and other pension benefits, or earned) and the first \$65 of earned income plus one-half of the remaining earnings. The Federal limit on resources is \$2,000 for an individual, and \$3,000 for couples. Certain resources are not counted, including an individual's home, and the first \$4,500 of the current market value of an automobile.

In addition, States must provide Medicaid coverage for certain individuals under 65 who are working. These persons are referred to as "qualified severely impaired individuals" under age 65. These are disabled and blind individuals whose earnings reach or exceed the basic SSI benefit standard, with disregards as determined by the States. (The current threshold for earnings is \$1,085 per month.) This special eligibility status applies as long as the individual:

Continues to be blind or have a disabling impairment;

Except for earnings, continues to meet all the other requirements for SSI eligibility;

Would be seriously inhibited from continuing or obtaining employment if Medicaid eligibility were to end; and

Has earnings that are not sufficient to provide a reasonable equivalent of benefits from SSI, State supplemental payments (if provided by the State), Medicaid, and publicly funded attendant care that would have been available in the absence of those earnings.

Recent law allowed States to increase the income limit for Medicaid coverage of disabled individuals. The Balanced Budget Act of 1997 (P.L. 105-33) allowed States to elect to provide Medicaid coverage to disabled persons who otherwise meet SSI eligibility criteria but have income up to 250 percent of the Federal poverty guidelines. Beneficiaries under the more liberal income limit may "buy into" Medicaid by paying premium costs. Premiums are set on a sliding scale based on an individual's income, as established by the State.

Explanation of provision

Under the proposal, States would have the option to establish one or two new Medicaid eligibility categories.

First, States would have the option to cover persons with disabilities whose income would otherwise make them ineligible for SSI. In addition, States may establish limits on resources and income that differ from the SSI requirements. This means that income levels set by the State could exceed 250 percent of the Federal poverty level and resources levels could exceed \$2,000 for individuals, and \$3,000 for couples, and the \$20 exclusion or disregard of monthly unearned income could be increased.

Second, if States provide Medicaid coverage to individuals as described above, they may also opt to continue providing coverage to individuals, aged 16–64 who cease to be eligible for Medicaid because of medical improvement, but who still have a serious medically determinable impairment and who are employed. States electing this option may also establish limits on resources and income for this group that differ from the Federal requirements. Individuals would be considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, or are engaged in work that meets criteria for work hours, wages, or other measures established by the State and approved by the Secretary of Health and Human Services (HHS).

Individuals covered under these options could “buy into” Medicaid coverage by paying premiums or other cost-sharing charges on a sliding fee scale based on their income, as established by the State. (Premium and cost-sharing changes do not apply to existing Medicaid mandatory or optional groups.) Individuals with earned income between 250 percent and 450 percent of the Federal poverty level would be required to pay the full cost of the Medicaid premium to the extent that such premiums do not exceed 7.5 percent of total income. In addition, States must require payment of 100 percent of premium for individuals with adjusted gross income above \$75,000 (adjusted annually for inflation), unless the State chooses to subsidize such premiums using State-only funds.

Federal funds paid to a State for Medicaid coverage of these new eligibility groups must be used to supplement State funds used for their existing programs that assist disabled individuals to work. In order to receive Federal funds, States are required to maintain their current level of effort for these groups.

Reason for change

These new Medicaid options are designed to make it possible for States to remove a significant barrier to employment confronting individuals with disabilities—the reality that increased earnings can result in the loss of health insurance coverage.

Effective date

On or after October 1, 1999.

2. EXTENDING MEDICARE COVERAGE FOR SSDI DISABILITY BENEFIT RECIPIENTS WHO ARE USING TICKETS TO WORK AND SELF-SUFFICIENCY (SECTION 202)

Present law

Social Security Disability Insurance (SSDI) beneficiaries are allowed to test their ability to work for at least nine months without affecting their disability or Medicare benefits. Disability payments stop when a beneficiary has monthly earnings at or above the substantial gainful activity level (\$700) after the 9-month period. If the beneficiary remains disabled but continues working, Medicare can continue for an additional 39 months.

Explanation of provision

Medicare coverage would be extended for an additional six-year period beyond current law for SSDI beneficiaries for a total period of 10 years.

The General Accounting Office is directed to conduct a study of the costs and effectiveness of this provision within 5 years after enactment.

Reason for change

According to beneficiaries, their advocates, and rehabilitation providers, the fear of losing medical benefits is the primary reason beneficiaries are reluctant to attempt work. This provision would eliminate beneficiaries' fear of losing medical coverage by extending medical coverage six additional years beyond current law provisions. Therefore, once an individual begins work, Medicare coverage would continue for 10 years.

Effective date

October 1, 2000.

3. GRANTS TO DEVELOP AND ESTABLISH STATE INFRASTRUCTURE TO SUPPORT WORKING INDIVIDUALS WITH DISABILITIES (SECTION 203)

(this section is under the jurisdiction of the committee on commerce.)

Present law

No provision.

Explanation of provision

H.R. 3070 would authorize the Secretary of HHS to award grants to States to design, establish and operate infrastructures that provide items and services to support working individuals with disabilities, and to conduct outreach campaigns to inform them about the infrastructures. States would be eligible for these grants under the following conditions:

They must provide Medicaid coverage to the first new eligibility category described above; and

They must provide personal assistance services to assist individuals eligible under the proposal to remain employed (that is, earn at least the Federal minimum wage and work at least 40 hours per month, or engage in work that meets criteria for work hours, wages, or other measures established by the State and approved by the Secretary of HHS).

Personal assistance services refers to a range of services provided by one or more persons to assist individuals with disabilities to perform daily activities on and off the job. These services would be designed to increase individuals' control in life and ability to perform daily activities on or off the job.

The Secretary of HHS would be required to develop a formula for the award of infrastructure grants. The formula must provide special consideration to States that extend Medicaid coverage to persons who cease to be eligible for SSDI and SSI because of an im-

provement in their medical condition, but who have a severe medically determinable impairment and are employed.

Grant amounts to States must be a minimum of \$500,000 per year, and may be up to a maximum of 15 percent of Federal and State Medicaid expenditures for individuals eligible under one or both of the new eligibility groups described in Section 201 above, whichever is greater.

States would be required to submit an annual report to the Secretary on the use of grant funds. In addition, the report must indicate the percent increase in the number of SSDI and SSI beneficiaries who receive a ticket to work and return to work.

For developing State infrastructure grants, H.R. 3070 authorizes the following amounts:

FY2000, \$20 million;

FY2001, \$25 million;

FY2002, \$30 million;

FY2003, \$35 million;

FY2004, \$40 million; and

FY2005–10, the amount of appropriations for the preceding fiscal year plus the percent increase in the CPI for All Urban Consumers for the preceding fiscal year.

The Secretary of HHS, in consultation with the Ticket to Work and Work Incentives Advisory Panel established by the bill, would be required to make a recommendation by October 1, 2009 to the Committee on Commerce in the House and the Committee on Finance in the Senate regarding whether the grant program should be continued after FY 2010.

Reason for change

The grant program would provide limited financial support to States committed to developing new systems of care for working disabled individuals.

Effective date

Date of enactment.

4. DEMONSTRATIONS OF COVERAGE UNDER THE MEDICAID PROGRAM OF WORKERS WITH POTENTIALLY SEVERE DISABILITIES (SECTION 204)

(This section is under the jurisdiction of the Committee on Commerce.)

Present law

No provision.

Explanation of provision

The Secretary would be authorized to establish a State demonstration program that would provide medical assistance equal to that provided under Medicaid for disabled persons age 16–64 who are “workers with a potentially severe disability.” These are individuals who meet a State’s definition of physical or mental impairment, who are employed, and who are reasonably expected to meet SSI’s definition of blindness or disability if they did not receive Medicaid services.

The Secretary is required to approve demonstration programs if the State meets the following requirements:

The State has elected to take up the first new Medicaid option to cover working persons with disabilities with incomes in excess of current limits;

Federal funds are used to supplement State funds used for workers with potentially severe disabilities at the time the demonstration is approved; and

The State conducts an independent evaluation of the demonstration program.

The proposal would allow the Secretary to approve demonstration programs that operate on a sub-State basis.

For purposes of the demonstration, individuals would be considered to be employed if they earn at least the Federal minimum wage and work at least 40 hours per month, or are engaged in work that meets threshold criteria for work house, wages, or other measures as defined by the demonstration project and approved by the Secretary.

H.R. 3070 authorizes the following amounts for these demonstrations:

FY2000, \$72 million;

FY2001, \$74 million;

FY2002, \$78 million; and

FY2003, \$81 million.

Over these four years, payments under this demonstration program could not exceed, in the aggregate, \$305 million, with \$5 million of this amount reserved for administrative expenses relating to required annual reports. Unexpended funds from previous years may be spent in subsequent years, but only through FY2005. The Secretary is required to allocate funds to States based on their applications and the availability of funds. Funds awarded to States would equal their Federal medical assistance percentage (FMAP) of expenditures for medical assistance to workers with a potentially severe disability.

The Secretary of HHS would be required to make a recommendation by October 1, 2002 to the Committee on Commerce in the House and the Committee on Finance in the Senate regarding whether the grant program should be continued after FY2003.

Reason for change

The demonstration would test whether providing individuals with potentially severe disabilities early access to insurance coverage can delay or prevent the onset of a fully disabling condition. Also, the demonstration would test whether access to insurance would make it possible for these individuals to remain in the work force longer, rather than moving on to the cash assistance rolls.

Effective date

Date of enactment.

5. ELECTION BY DISABLED BENEFICIARIES TO SUSPEND MEDIGAP INSURANCE WHEN COVERED UNDER A GROUP HEALTH PLAN (SECTION 205)

(This section is under the jurisdiction of the Committee on Commerce.)

Present law

No provision.

Explanation of provision

This provision would require Medigap supplemental insurance plans to provide that benefits and premiums of such plans would be suspended at the request of the policyholder if the policyholder is entitled to Medicare Part A benefits as a disabled individual and is covered under a group health plan (offered by an employer with 20 or more employees). If the suspension occurs and the policyholder loses coverage under the group health plan, the Medigap policy is required to be automatically reinstated (as of the date of the loss of group coverage) if the policyholder provides notice of the loss of such coverage within 90 days of the date of losing group coverage.

Reason for change

Disability beneficiaries who return to work would be able to participate in their employers' group health plan and suspend their Medigap supplemental insurance coverage without fear that the Medigap coverage could not be reinstated if their work effort failed.

Effective date

Date of enactment.

C. DEMONSTRATION PROJECTS AND STUDIES

1. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION AUTHORITY (SECTION 301)

Present law

Under authority which expired on June 9, 1996, the Commissioner could initiate experiments and demonstration projects to test ways to encourage Social Security Disability Insurance (SSDI) beneficiaries to return to work, and could waive compliance with certain benefit requirements in connection with such projects.

Explanation of provision

This provision would extend demonstration authority for five years, and would include authority for demonstration projects involving applicants as well as beneficiaries.

Reason for change

By extending and expanding this demonstration authority, the Committee bill is designed to aid the development of new methods for helping SSDI beneficiaries return to work.

The General Accounting Office has stated that setting return-to-work goals soon after the onset of disability and providing timely

rehabilitation services are critical in encouraging workers with disabilities to return to the workplace as soon as possible. SSA would be expected to initiate demonstration projects designed to develop early intervention methods and determine the effects of these methods on returning SSDI beneficiaries to work.

Effective date

Date of enactment.

2. DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN
DISABILITY INSURANCE BENEFITS BASED ON EARNINGS (SECTION 302)

Present law

No provision.

Explanation of provision

SSA would be required to conduct a demonstration project on the effects of gradually reducing Social Security Disability Insurance (SSDI) benefits \$1 for every \$2 in earnings over a level determined by the Commissioner.

Reason for change

At various disability-related hearings, the Committee learned about the problems unique to beneficiaries who have mental disabilities or chronic conditions, many of whom would like to work but have conditions that only permit them to work part time. SSDI beneficiaries lose cash benefits altogether when they work and earn over \$700 a month after participating in the 9-month trial work period. Because of the \$700 earnings cliff, many SSDI beneficiaries view remaining on the rolls as financially more attractive than risking the uncertainties of competitive employment, especially when low-wage jobs are the likely outcome.

To help beneficiaries overcome this earnings-cliff hurdle, the proposal would require SSA to test a gradual offset of SSDI cash benefits by reducing benefits \$1 for every \$2 in earnings over a determined level. A reduction in benefits based on earnings will help soften the current total loss of benefits to beneficiaries who attempt work. In addition, some experts assert that the results of a permanent provision allowing a SSDI benefit offset of \$1 for every \$2 earned over a determined level would result in prohibitive costs to the OASDI trust fund because it would encourage disabled individuals who currently work despite their impairments to seek benefits. The Subcommittee intends that this demonstration project would test whether the elimination of the earnings cliff would remove the disincentive for disabled individuals to leave the disability program and yield reliable evidence regarding any induced entry effect. In addition, the demonstration should evaluate the impact of such a provision on the benefits of individuals who are dually eligible for SSDI and Supplemental Security Income (SSI).

Effective date

Date of enactment.

3. STUDIES AND REPORTS (SECTION 303)

Present law

No provision.

Explanation of provision

The General Accounting Office (GAO) would assess the value of existing tax credits and disability-related employment initiatives under the Americans with Disabilities Act and other Federal laws. The report would be submitted within three years to the Senate Committee on Finance and the House Committee on Ways and Means.

The Committee bill would also direct GAO to evaluate the coordination under current law of work incentives for individuals eligible for both Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI). The report would be submitted within three years to the Senate Committee on Finance and the House Committee on Ways and Means.

In addition, GAO would examine the substantial gainful activity limit as a disincentive for return to work. The report would be submitted within two years to the Senate Committee on Finance and the House Committee on Ways and Means.

The Committee bill would direct the Commissioner of Social Security to identify all income disregards under the SSDI and SSI programs; to specify the most recent statutory or regulatory change in each disregard; to specify the current value of any disregard if the disregard had been indexed for inflation; to recommend any further changes; and to report certain additional information and recommendations on disregards related to grants, scholarships, or fellowships used in attending any educational institution. The report would be submitted within 90 days to the Senate Committee on Finance and the House Committee on Ways and Means.

Finally, H.R. 3070 would direct GAO to assess SSA's efforts to conduct disability demonstrations and to make a recommendation as to whether SSA's disability demonstration authority should be made permanent. The report would be submitted within five years to the Senate Committee on Finance and the House Committee on Ways and Means.

Reason for change

There is scant information available regarding whether tax credits and other disability-related employment incentives encourage employers to hire and retain individuals with disabilities. Also, testimony provided to the Subcommittee revealed that disabled beneficiaries suffer adverse effects when they move from SSI eligibility to OASDI entitlement, particularly with respect to work incentives. These reports would provide new information to evaluate or improve employment and related assistance to SSDI and SSI beneficiaries and to determine whether SSA should receive permanent demonstration authority to test additional improvements to the program.

Effective date

The reports by GAO and the Commissioner are required by various dates between 90 days and five years after the date of enactment.

D. MISCELLANEOUS AND TECHNICAL AMENDMENTS

1. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS (SECTION 401)

Present law

Public Law 104–121 included amendments to the Social Security and Supplemental Security Income (SSI) disability programs providing that no individual could be considered to be disabled if alcoholism or drug addiction would otherwise be a contributing factor material to the determination of disability. The effective date for all new and pending applications was the date of enactment (March 29, 1996). For those whose claim had been finally adjudicated before the date of enactment, the amendments would apply commencing with benefits for months beginning on or after January 1, 1997. Individuals receiving benefits due to drug addiction or alcoholism can reapply for benefits based on another impairment. If the individual applied within 120 days after the date of enactment, the Commissioner is required to complete the entitlement redetermination by January 1, 1997.

Public Law 104–121 provided for the appointment of representative payees for recipients allowed benefits due to another impairment who also have drug addiction or alcoholism conditions, and the referral of those individuals for treatment.

Explanation of provision

The Committee bill would clarify that the meaning of the term “final adjudication” includes a pending request for administrative or judicial review or a pending readjudication pursuant to class action or court remand. H.R. 3070 would also clarify that if the Commissioner does not perform the entitlement redetermination before January 1, 1997, that entitlement redetermination must be performed in lieu of a continuing disability review.

The provision also corrects an anomaly that currently excludes all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, from the requirement that a representative payee be appointed and that the beneficiary be referred for treatment.

Reason for change

The provision clearly defines “final adjudication” to avoid any misinterpretation by the courts. One court has concluded that it can award benefits through January 1, 1997, because the Commissioner’s decision denying benefits was issued before March 29, 1996.

As written, current law creates an anomaly, whereby all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, are excluded from the re-

quirement that a representative payee be appointed and that they be referred for treatment. The provision corrects this anomaly.

Effective date

The amendments would be effective as though they had been included in the enactment of Section 105 of Public Law 104–121.

2. TREATMENT OF PRISONERS (SECTION 402)

a. Implementation of Prohibition Against Payment of Title II Benefits to Prisoners

Present law

Current law prohibits prisoners from receiving Old Age, Survivors and Disability (OASDI) benefits while incarcerated if they are convicted of any crime punishable by imprisonment of more than 1 year. Federal, State, county or local prisons are required to make available, upon written request, the name and Social Security account number of any individual so convicted who is confined in a penal institution or correctional facility.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, commonly referred to as the welfare reform law, requires the Commissioner to make agreements with any interested State or local institution to provide monthly the names, social security account numbers, confinement dates, dates of birth, and other identifying information of residents who are Supplemental Security Income (SSI) recipients. The Commissioner is required to pay the institution \$400 for each SSI recipient who becomes ineligible as a result if the information is provided within 30 days of incarceration, and \$200 if the information is furnished after 30 days but within 90 days. P.L. 104–193 requires the Commissioner to study the desirability, feasibility, and cost of establishing a system for courts to directly furnish SSA with information regarding court orders affecting SSI recipients and requiring that State and local jails, prisons, and other institutions that enter into contracts with the Commissioner furnish the information by means of an electronic or similar data exchange system.

The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to these agreements to any Federal or federally-assisted cash, food, or medical assistance program for the purpose of determining program eligibility.

Explanation of provision

The Committee bill would amend prisoner provisions in the welfare reform law to include recipients of OASDI benefits in the prisoner reporting system.

The Commissioner would enter into an agreement with any interested State or local correctional institution to provide monthly the names, Social Security account numbers, confinement dates, dates of birth, and other identifying information regarding prisoners who receive OASDI benefits. Certain requirements for computer matching agreements would not apply. For each eligible individual who becomes ineligible as a result, the Commissioner would pay the institution an amount up to \$400 if the information is pro-

vided within 30 days of incarceration, and up to \$200 if provided after 30 days but within 90 days.

Payments to correctional institutions would be reduced by 50 percent for multiple reports on the same individual who receives both SSI and OASDI benefits. Payments made to the correctional institution would be made from OASI or DI Trust Funds, as appropriate.

The Commissioner would be required to provide on a reimbursable basis information obtained pursuant to these agreements to any Federal or Federally-assisted cash, food, or medical assistance program for the purpose of determining program eligibility.

Reason for change

The provision would encourage prisons to report lists of inmates to SSA by expanding the current reporting system for SSI beneficiaries to include OASDI beneficiaries as well. Both SSI and OASDI prisoner provisions were included in the House-passed version of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. OASDI provisions were deleted in the Senate because of Senate procedural rules. This language restores the OASDI provisions.

These provisions would provide new financial incentives for State and local correctional institutions to report information on inmates to the SSA so that payment of OASDI benefits to prisoners being supported at taxpayer expense are stopped promptly.

Privacy Act procedural requirements for computer matching agreements between the Commissioner and correctional institutions impose an excessively costly administrative burden that could hamper the administration of the prisoner payment provisions. Therefore, the Computer Matching and Privacy Protection Act would not apply to the information exchanged under these provisions.

The provision would require SSA to share and be reimbursed for any information obtained through these agreements that would assist other agencies providing certain Federal or Federally-assisted benefits in administering their programs.

Payments to institutions for inmates found to be receiving benefits would be restricted to a total of \$400, even if the prisoner is found to be receiving both SSI and OASDI benefits.

Effective date

These amendments would be effective for prisoners whose confinement begins on or after the first day of the fourth month after the month of enactment.

b. Elimination of title II requirement that confinement stem from crime punishable by imprisonment for more than 1 year

Present law

The Social Security Act bars payment of OASDI benefits to prisoners convicted of any crime punishable by imprisonment of more than one year and to those who are institutionalized because they are found guilty but insane.

Explanation of provision

This provision would broaden the prohibition of OASDI benefits to prisoners to be identical to those that apply to SSI benefits. In addition, it would replace “an offense punishable by imprisonment for more than 1 year” with “a criminal offense,” and include benefits payable to persons confined to: (1) a penal institution; or (2) other institution if found guilty but insane, regardless of the total duration of the confinement. An exception would be made for prisoners incarcerated for less than 30 days.

REASON FOR CHANGE

An audit conducted by the SSA Office of Inspector General determined that the language in existing law required that for each prisoner eligible for benefits, the duration of incarceration be determined on a case-by-case basis, based on data that can only be obtained from the courts. This is a costly, labor-intensive process that impeded timely suspension of benefits. Benefits would also be barred to persons who commit serious crimes but are found guilty by reason of insanity, regardless of the total duration of the institutionalization.

EFFECTIVE DATE

Effective for prisoners whose confinement begins on or after the first day of the fourth month after the month of enactment.

c. Conforming title XVI amendments

PRESENT LAW

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 required the Commissioner of SSA to enter into an agreement with any interested State or local institution (defined as a jail, prison, other correctional facility, or institution where the individual is confined due to a court order) under which the institution shall provide monthly the names, Social Security numbers, dates of birth, confinement dates, and other identifying information of prisoners. The Commissioner must pay to the institution for each eligible individual who becomes ineligible for SSI \$400 if the information is provided within 30 days of the individual’s becoming an inmate. The payment is \$200 if the information is furnished after 30 days but within 90 days.

EXPLANATION OF PROVISION

The amendment is designed to clarify the provision in the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 that, in cases in which an inmate receives benefits under both the SSI and Social Security programs, payments to correctional facilities would be restricted to \$400 or \$200, depending on when the report is furnished. The amendment also expands the categories of institutions eligible to report incarceration of prisoners.

REASON FOR CHANGE

Applies payment restriction to correctional facilities for OASDI benefits in the same manner that they apply to SSI payments.

Effective date

August 22, 1996.

d. *Continued Denial of Benefits to Sex Offenders Remaining Confined to Public Institutions Upon Completion of Prison Terms*

Present law

No provision.

Explanation of provision

The amendment would prohibit OASDI payments to sex offenders who, on completion of a prison term, remain confined in a public institution pursuant to a court finding that they continue to be sexually dangerous to others.

Reason for change

The denial of benefits is extended in the case of sex offenders who remain confined after completing their prison terms.

Effective date

The amendment would apply to benefits for months ending after the date of enactment.

3. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE (SECTION 403)

Present law

Practicing members of the clergy are automatically covered by Social Security as self-employed workers unless they file for an exemption from Social Security coverage within a period ending with the due date of the tax return for the second taxable year (not necessarily consecutive) in which they begin performing their ministerial services. Members of the clergy seeking the exemption must file statements with their church, order, or licensing or ordaining body stating their opposition to the acceptance of Social Security benefits on religious principles. If elected, this exemption is irrevocable.

Explanation of provision

The proposal would provide a 2-year "open season," beginning January 1, 2000, for members of the clergy who want to revoke their exemption from Social Security. This decision to join Social Security would be irrevocable. A member of the clergy choosing such coverage would become subject to self-employment taxes and his or her subsequent earnings would be credited for Social Security (and Medicare) benefit purposes.

Reason for change

Some members of the clergy elected not to participate in Social Security (and Medicare) early in their careers, before they fully understood the ramifications of doing so. Because the election is irrevocable, there is no way for them to gain access to the program under current law. Clergy typically have modest earnings throughout their working years and would be among those most likely to

rely on Social Security (and Medicare) for much of their basic living and health care expenses in retirement. This proposal gives members of the clergy a limited opportunity to enroll in the system, similar to those provided by Congress in 1977 and 1986.

Effective date

The proposal would be effective January 1, 2000, for a period of 2 years.

4. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI (SECTION 404)

Present law

Current law authorizes Title XVI funding for making grants to States and public and other organizations for paying part of the cost of cooperative research or demonstration projects.

Explanation of provision

This provision would clarify current law to include agreements or grants concerning Title II of the Social Security Act.

Reason for change

This provision is intended to correct an omission of intended Title II authority.

Effective date

August 15, 1994.

5. AUTHORIZATION FOR STATES TO PERMIT ANNUAL WAGE REPORTS (SECTION 405)

Present law

The Social Security Domestic Employment Reform Act of 1994 (P.L. 103-387) changed certain Social Security and Medicare tax rules. Specifically, the Act provided that domestic service employers (that is, individuals employing maids, gardeners, babysitters, and the like) would no longer owe taxes for any domestic employee who earned less than \$1,000 per year from the employer. In addition, the Act simplified certain reporting requirements. Domestic employers were no longer required to file quarterly returns regarding Social Security and Medicare taxes, nor the annual Federal Unemployment Tax Act (FUTA) return. Instead, all Federal reporting was consolidated on an annual Schedule H filed at the same time as the employer's personal income tax return.

Explanation of provision

The provision would allow States the option of permitting domestic service employers to file annual rather than quarterly wage reports pursuant to section 1137 of the Social Security Act, which provides for an income and eligibility verification system (IEVS) for certain public benefits.

Reason for change

This provision provides for consistency of domestic employer wage reporting with revised Federal requirements.

Effective date

Date of enactment.

6. ASSESSMENT ON ATTORNEYS WHO RECEIVE FEES VIA THE SOCIAL SECURITY ADMINISTRATION (SECTION 406)

Present law

The Commissioner of Social Security, using one of two processes, authorizes the fee that may be charged by an attorney or non-attorney to represent a claimant in administrative proceedings for Social Security, Supplemental Security Income (SSI), or Part B Black Lung benefits.

Under the fee agreement process, the representative and claimant submit a signed agreement reflecting the amount of the fee before the date of a favorable decision, and the agreement usually will be approved by the Commissioner if the specified fee does not exceed the lesser of 25 percent of the claimant's past-due benefits or \$4,000. The Commissioner then issues a notice of the maximum fee the representative can charge based on the approved agreement.

Under the fee petition process, the representative submits an itemized list of services and fees after a decision has been issued. The Commissioner will issue a notice of the fees that are approved or disapproved after reviewing the extent and types of services performed, the complexity of the case, and the amount of time spent by the representative on the case.

Social Security regulations provide that a representative may not charge or collect, directly or indirectly, a fee in any amount not approved by the Social Security Administration (SSA) or a Federal court. The statute and regulations further provide that SSA may suspend or disqualify from further practice before SSA a representative who breaks the rules governing representatives.

Under programs other than SSI, in favorable decisions in which the claimant is represented by an attorney, the Commissioner must withhold and certify direct payment to the attorney, out of the claimant's past-due benefits, an amount equal to the smaller of: (1) 25 percent of the past-due benefits, or (2) the fee authorized by the Commissioner under either the fee petition or fee agreement process. This payment provision does not apply to SSI benefits and an attorney must look to the SSI beneficiary for payment of the fee. In addition, it does not apply to fees requested by non-attorney representatives.

The costs associated with the processing, withholding, and certifying direct payment of attorney fees are currently absorbed in SSA's administrative budget.

Explanation of provision

The provision would require the Commissioner of Social Security to assess the fee withheld from past-due benefits and certified directly to the attorney. The assessment would be withheld from the

amount payable to the attorney and the attorney would be prohibited from recovering the assessment from the beneficiary. The provision specifies an assessment of 6.3 percent of the approved attorney's fee for fiscal year 2000. After fiscal year 2000, the percentage would be adjusted by the Commissioner as necessary to achieve full recovery of the costs associated with certifying fees to attorneys.

Reason for change

This provision is designed to recoup Social Security Administration costs for processing, withholding, and forwarding attorneys' fees, which currently are paid for out of the Social Security Trust Funds.

Effective date

Applicable to fees required to be certified for payment after December 31, 1999, or the last day of the first month beginning after the month of enactment.

7. EXTENSION OF AUTHORITY OF STATE MEDICAID FRAUD CONTROL UNITS (SECTION 407)

(This section is under the jurisdiction of the Committee on Commerce.)

Present law

Medicaid Fraud Control Units established as in State governments as entities separate from the State's Medicaid agency are authorized to investigate and refer for prosecution Medicaid fraud as well as patient abuse in facilities that participate in the Medicaid program.

Explanation of provision

This Committee bill would permit State Medicaid Fraud Control Units to investigate fraud related to any federal health care program, subject to the approval of the appropriate Inspector General, if the suspected fraud is related to Medicaid fraud. In such cases, the relevant Inspector General retains the authority to join the investigation or, after consultation, take over the investigation. Funds that are recovered would be returned to the federal health care program or the Medicaid program. Fraud control units would be permitted to investigate patient abuse in non-Medicaid residential health care facilities.

Reason for change

This provision would allow current State Medicaid Fraud Control Units to investigate fraud in other federal health care programs, expanding the scope of health care anti-fraud investigations and better coordinating such efforts across program bounds.

Effective date

Date of enactment.

8. ELIMINATION OF FRAUD AND ABUSE ASSOCIATED WITH CERTAIN
PAYMENTS UNDER THE MEDICAID PROGRAM (SECTION 408)

(This section is under the jurisdiction of the Committee on
Commerce.)

Present law

Public schools must provide children with disabilities with a free and appropriate public education in the least restrictive educational setting, including special education and related services according to their individualized education program. In order to assist schools in meeting this obligation, under certain circumstances States may turn to Medicaid as a source for health-related services such as occupational therapy, speech therapy, and physical therapy. Under certain conditions, school districts may directly bill their state Medicaid program for related services provided to disabled children enrolled in Medicaid. In addition, a school district may utilize a community-based organization to provide related services to disabled children enrolled in Medicaid.

In May of 1999, the Health Care Financing Administration (HCFA) clarified and changed federal policies with respect to reimbursement for school-based health services under Medicaid in three areas: (1) bundled rates for medical services provided to Medicaid-eligible children in schools; (2) Federal matching payments for school health-related transportation services; and (3) school health-related administrative activities.

Explanation of provision

This provision would stipulate that Medicaid payments for school-based services and related administrative costs are not to be made unless certain new conditions are met. First, individual items and services may not be bundled unless payment is made in accordance with a new system approved by the Secretary of Health and Human Services (HHS). Similarly, fee-for-service billing for individual items and services and administrative expenses is permitted only when payment is made in accordance with a system approved by the Secretary that meets new standards. This provision would also delineate new conditions for payment for transportation services, including medical need. Finally, the provision would delineate specific conditions under which payments for Medicaid covered items, services and administrative expenses can be made when a public agency such as a school district contracts with an entity to conduct claims processing functions.

H.R. 3070 would require that, with the exception of certain community and migrant health centers, no payments will be made to cover expenses for services provided by or through a managed care entity unless several conditions designed to prevent duplication of services or payments are met. The provision would place specific payment restrictions on States with respect to the Federal share of expenditures for items or services, or for administrative expenses furnished or incurred by local education agencies or school districts. Finally, the provision would specify that the Administrator of HCFA, in consultation with State Medicaid and education agencies and local school systems, will develop and implement a uni-

form methodology for claims made by schools for medical assistance and related administrative expenses under Medicaid.

Reason for change

This provision includes several measures designed to close loopholes in existing law pertaining to claiming and reimbursement practices involving school-based Medicaid.

Effective date

The changes made under this provision apply to items and services provided on and after the date of enactment without regard to whether implementing regulations are in effect. In addition, the Secretary of HHS must promulgate such final regulations as are necessary to carry out these provisions not later than one year after the date of enactment.

III. VOTE OF THE COMMITTEE

In compliance with clause 3(b) of rule XIII of the Rules of the House of Representatives, the following statements are made concerning the votes of the Committee on Ways and Means in its consideration of the bill, H.R. 3070.

MOTION TO REPORT THE BILL

The bill, H.R. 3070, as amended, was ordered favorably reported by a roll call vote of 33 yeas to 1 nay (with a quorum being present). The vote was as follows:

| Representatives | Yea | Nay | Present | Representatives | Yea | Nay | Present |
|----------------------|-------|-------|---------|----------------------|-------|-------|---------|
| Mr. Archer | X | ..... | ..... | Mr. Rangel | X | ..... | ..... |
| Mr. Crane | X | ..... | ..... | Mr. Stark | X | ..... | ..... |
| Mr. Thomas | X | ..... | ..... | Mr. Matsui | X | ..... | ..... |
| Mr. Shaw | X | ..... | ..... | Mr. Coyne | X | ..... | ..... |
| Mrs. Johnson | X | ..... | ..... | Mr. Levin | X | ..... | ..... |
| Mr. Houghton | X | ..... | ..... | Mr. Cardin | X | ..... | ..... |
| Mr. Heger | X | ..... | ..... | Mr. McDermott | X | ..... | ..... |
| Mr. McCreery | X | ..... | ..... | Mr. Kleczka | X | ..... | ..... |
| Mr. Camp ..... | ..... | ..... | ..... | Mr. Lewis (GA) | X | ..... | ..... |
| Mr. Ramstad | X | ..... | ..... | Mr. Neal | X | ..... | ..... |
| Mr. Nussle | X | ..... | ..... | Mr. McNulty ..... | ..... | ..... | ..... |
| Mr. Johnson | X | ..... | ..... | Mr. Jefferson ..... | ..... | ..... | ..... |
| Ms. Dunn ..... | ..... | ..... | ..... | Mr. Tanner ..... | ..... | ..... | ..... |
| Mr. Collins | X | ..... | ..... | Mr. Becerra ..... | ..... | ..... | ..... |
| Mr. Portman | X | ..... | ..... | Mrs. Thurman | X | ..... | ..... |
| Mr. English | X | ..... | ..... | Mr. Doggett ..... | ..... | X | ..... |
| Mr. Watkins | X | ..... | ..... |  |  |  |  |
| Mr. Hayworth | X | ..... | ..... |  |  |  |  |
| Mr. Weller | X | ..... | ..... |  |  |  |  |
| Mr. Hulshof | X | ..... | ..... |  |  |  |  |
| Mr. McClinnis | X | ..... | ..... |  |  |  |  |
| Mr. Lewis (KY) | X | ..... | ..... |  |  |  |  |
| Mr. Foley | X | ..... | ..... |  |  |  |  |

VOTES ON AMENDMENTS

A rollcall vote was conducted on the following amendment to the Chairman's amendment in the nature of a substitute.

An amendment by Messrs. Matsui and Stark, to strike 406 of the bill, relating to attorney's fees, and replace it with a provision re-

lating to partial hospitalization services under the Medicare program, was defeated by a roll call vote of 12 yeas to 21 nays. The vote was as follows:

| Representatives | Yea | Nay | Present | Representatives | Yea | Nay | Present |
|----------------------|-----|-----|---------|----------------------|-----|-------|---------|
| Mr. Archer | | X | ..... | Mr. Rangel | X | ..... | ..... |
| Mr. Crane | | X | ..... | Mr. Stark | X | ..... | ..... |
| Mr. Thomas | | X | ..... | Mr. Matsui | X | ..... | ..... |
| Mr. Shaw | | X | ..... | Mr. Coyne | X | ..... | ..... |
| Mrs. Johnson | | X | ..... | Mr. Levin | X | ..... | ..... |
| Mr. Houghton | | X | ..... | Mr. Cardin | X | ..... | ..... |
| Mr. Herger | | X | ..... | Mr. McDermott | X | ..... | ..... |
| Mr. McCreery | | X | ..... | Mr. Kleczka | X | ..... | ..... |
| Mr. Camp | | | | Mr. Lewis (GA) | X | ..... | ..... |
| Mr. Ramstad | | X | ..... | Mr. Neal | X | ..... | ..... |
| Mr. Nussle | | X | ..... | Mr. McNulty ..... |  | ..... | ..... |
| Mr. Johnson | | X | ..... | Mr. Jefferson ..... |  | ..... | ..... |
| Ms. Dunn | | | | Mr. Tanner ..... |  | ..... | ..... |
| Mr. Collins | | X | ..... | Mr. Becerra ..... |  | ..... | ..... |
| Mr. Portman | | X | ..... | Mrs. Thurman | X | ..... | ..... |
| Mr. English | | X | ..... | Mr. Doggett | X | ..... | ..... |
| Mr. Watkins | | X | ..... |  |  |  |  |
| Mr. Hayworth | | X | ..... |  |  |  |  |
| Mr. Weller | | X | ..... |  |  |  |  |
| Mr. Hulshof | | X | ..... |  |  |  |  |
| Mr. McInnis | | X | ..... |  |  |  |  |
| Mr. Lewis (KY) | | X | ..... |  |  |  |  |
| Mr. Foley | | X | ..... |  |  |  |  |

IV. BUDGET EFFECTS OF THE BILL

A. COMMITTEE ESTIMATE OF BUDGETARY EFFECTS

In compliance with clause 3(d)(2) of rule XIII of the Rules of the House of Representatives, the following statement is made:

The Committee agrees with the estimate prepared by the Congressional Budget Office (CBO) which is included below.

B. STATEMENT REGARDING NEW BUDGET AUTHORITY AND TAX EXPENDITURES

In compliance with clause 3(c)(2) of rule XIII of the Rules of the House of Representatives, the Committee states the Committee's bill effects on direct spending and revenues would add to the total federal surplus by \$18 million over the 2000–2004 period. Revenues are increased due to the revocation by members of the clergy of exemption from Social Security coverage.

C. COST ESTIMATE PREPARED BY THE CONGRESSIONAL BUDGET OFFICE

In compliance with clause 3(c)(3) of rule XIII of the House of Representatives requiring a cost estimate prepared by the Congressional Budget Office, the following report prepared by CBO is provided:

U.S. CONGRESS,
 CONGRESSIONAL BUDGET OFFICE,
 Washington, DC, October 15, 1999.

Hon. BILL ARCHER,
 Chairman, Committee on Ways and Means,
 House of Representatives, Washington, DC.

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed preliminary cost estimate for H.R. 3070, the Ticket to Work and Work Incentives Improvement Act of 1999. We will provide a more detailed analysis next week.

If you wish further details on this estimate, we will be pleased to provide them. The principal CBO staff contacts are Kathy Ruffing and Jeanne De Sa.

Sincerely,

BARRY B. ANDERSON
 (For Dan L. Crippen, Director).

Enclosure.

H.R. 3070—Ticket to Work and Work Incentives Improvement Act of 1999

Summary: H.R. 3070 would alter cash and health-care benefits for people with disabilities. Title I would revamp the system under which people collecting benefits from Disability Insurance (DI) and Supplemental Security Income (SSI) receive vocational rehabilitation (VR) services and would make it easier for working beneficiaries to retain or regain cash benefits. Title II would provide states with options to extend Medicaid coverage to certain disabled workers, enhance Medicare coverage for people who leave the DI rolls because of work, and authorize grants and demonstration projects (subject to future appropriation) for states to assist disabled workers. Title III would require several demonstration projects affecting DI recipients. To offset the costs of the bill, title IV would tighten restrictions on the payment of Social Security benefits to prisoners, give certain members of the clergy another opportunity to enroll in the Social Security system, levy a processing charge on attorneys who represent DI claimants, and reduce some Medicare and Medicaid costs.

CBO estimates that the bill's effects on direct spending and revenues would add to the total federal surplus by \$18 million over the 2000–2004 period; of that amount, \$168 million would represent an increase in the off-budget Social Security surplus, offset by a \$150 million reduction in the on-budget surplus. The bill's effects on direct spending and revenues would reduce the total federal surplus over the 2000–2009 period. Because H.R. 3070 would affect receipts and direct spending, pay-as-you-go procedures would apply. Furthermore, assuming appropriation of the necessary sums, additional discretionary spending under this bill would total about \$565 million over the 2000–2004 period.

Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance program under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the

provisions of H.R. 3070 either fall within that exclusion or contain no intergovernmental mandates. Provisions of the bill that are not excluded from the application of UMRA contain one private-sector mandate; CBO estimates that its cost would be well below the threshold specified in UMRA.

Estimated cost to the Federal Government: The estimated budgetary impact of H.R. 3070 on direct spending and revenues is summarized in Table 1. This legislation would affect budget functions 550 (Health), 570 (Medicare), 600 (Income Security), and 650 (Social Security).

Basis of estimate: For purposes of estimating the budgetary effects of H.R. 3070, CBO assumes enactment by December 1, 1999. Most provisions of H.R. 3070 as reported by the Committee on Ways and Means are the same as those in S. 331, a bill that was passed by the Senate in July. Differences between the two bills are summarized in Table 2. The major differences that affect CBO's estimate are:

- Both bills would stop continuing disability reviews (CDRs) that are triggered by a report of earnings. The people affected would still be subject to periodic CDRs, which generally occur every three years. In S. 331, this provision would be effective immediately, whereas H.R. 3070 would delay it until January 2003. As a result, costs would be smaller over the 2000–2005 period.

- Both bills would provide extended Medicare coverage for people who leave the DI rolls because of work. Under current law, those people already get three years of Medicare coverage (a period commonly called the extended period of eligibility, or EPE) after their cash benefits are suspended. The Senate bill would grant indefinite Medicare coverage to people who graduate from the EPE in the next six years, then revert to current law for later graduates. The Ways and Means bill would grant six years of extra coverage for all people who complete the EPE after September 2000. Consequently, the Ways and Means approach is less costly at first but more expensive beginning in 2007.

TABLE 1. ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 3070, BY PROVISION

| | By fiscal year, in millions of dollars— | | | | | | | | | |
|---|---|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| TITLE I | | | | | | | | | | |
| Establishment of the Ticket to Work and Self-Sufficiency Program: | | | | | | | | | | |
| Disability Insurance | (1) | (1) | 2 | 3 | -5 | -21 | -45 | -51 | -52 | -53 |
| Medicare | (1) | (1) | (1) | (1) | 1 | 1 | 1 | -3 | -11 | -25 |
| Supplemental Security Income | (1) | (1) | 1 | 1 | -2 | -7 | -16 | -22 | -27 | -32 |
| Subtotal (effect on outlays) | (1) | (1) | 3 | 4 | -7 | -27 | -60 | -75 | -90 | -110 |
| Bar on Work CDRs for Certain DI Beneficiaries With Earnings: | | | | | | | | | | |
| Disability Insurance | 0 | 0 | 0 | 5 | 15 | 20 | 25 | 25 | 25 | 25 |
| Medicare | 0 | 0 | 0 | 2 | 5 | 8 | 9 | 10 | 10 | 11 |

TABLE 1. ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 3070, BY PROVISION—
Continued

| | By fiscal year, in millions of dollars— | | | | | | | | | |
|--|---|------------------|------------------|------------------|------|------|------------------|------------------|------------------|------------------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Subtotal (effect on outlays) | 0 | 0 | 0 | 7 | 20 | 28 | 34 | 35 | 35 | 36 |
| Expedited Reinstatement of DI Benefits Within 60 Months of Termination: | | | | | | | | | | |
| Disability Insurance | 0 | 1 | 1 | 1 | 2 | 3 | 3 | 4 | 5 | 6 |
| Medicare | 0 | (¹) | (¹) | (¹) | 1 | 1 | 1 | 2 | 2 | 3 |
| Subtotal (effect on outlays) | 0 | 1 | 1 | 1 | 3 | 4 | 4 | 6 | 7 | 9 |
| TITLE II | | | | | | | | | | |
| State Option to Eliminate Income, Resource, and Asset Limitations for Medicaid Buy-in: Medicaid | 15 | 16 | 18 | 20 | 22 | 24 | 26 | 29 | 32 | 35 |
| State Option to Continue Medicaid Buy-in for Participants Whose DI or SSI Benefits Are Terminated After a CDR: Medicaid | 1 | 2 | 3 | 4 | 5 | 6 | 8 | 9 | 11 | 13 |
| Six-Year Extension of Medicare for Former DI Beneficiaries Who Exhaust Their Current Law EPE, effective October 2000: Medicare | 0 | 10 | 29 | 48 | 74 | 104 | 141 | 161 | 186 | 219 |
| TITLE III | | | | | | | | | | |
| Five-Year Extension of DI Demonstration Project Authority: Disability Insurance | 3 | 5 | 5 | 5 | 5 | 3 | (¹) | (¹) | (¹) | (¹) |
| \$1-for-\$2 Demonstration Projects: | | | | | | | | | | |
| DI Benefit Costs | 0 | 0 | 3 | 8 | 13 | 18 | 19 | 18 | 18 | 18 |
| Medicare Costs | 0 | 0 | 0 | 0 | 2 | 4 | 7 | 9 | 9 | 9 |
| Subtotal (effect on outlays) | 0 | 0 | 3 | 8 | 15 | 22 | 26 | 27 | 28 | 27 |
| TITLE IV | | | | | | | | | | |
| Provisions Affecting Prisoners: | | | | | | | | | | |
| Payments to Prison Officials (OASDI) | 2 | 7 | 8 | 9 | 9 | 10 | 10 | 10 | 10 | 10 |
| Payments to Prison Officials (SSI) | (¹) | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Savings in Benefits (OASDI) | -5 | -24 | -28 | -31 | -35 | -35 | -35 | -35 | -35 | -35 |
| Savings in Benefits (SSI) | -2 | -7 | -8 | -9 | -11 | -11 | -11 | -11 | -11 | -11 |
| Subtotal (effect on outlays) | -5 | -24 | -27 | -31 | -36 | -35 | -35 | -35 | -35 | -35 |

TABLE 1. ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 3070, BY PROVISION—
Continued

| | By fiscal year, in millions of dollars— | | | | | | | | | |
|--|---|------------------|------------------|------------------|------------------|------------------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Open Season for Clergy to Enroll in Social Security: Off-Budget (OASDI) | | | | | | | | | | |
| Revenues | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| On-Budget (HI) Revenues | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
| Other On-Budget Revenues | (¹) | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 |
| OASDI Benefits | (¹) | (¹) | (¹) | (¹) | (¹) | (¹) | 1 | 1 | 1 | 1 |
| Subtotal (effect on total surplus) | 3 | 8 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 11 |
| Collection of Processing Fees from Attorneys Who Represent Successful DI Claimants: Disability Insurance | -15 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 |
| Expansion of Certain Anti-Fraud Provisions in Medicaid: Medicare | 0 | -3 | -5 | -5 | -5 | -5 | -5 | -5 | -5 | -5 |
| Restriction on Medicaid Payments for School-Based Services: Medicaid | -3 | -11 | -16 | -18 | -22 | -27 | -32 | -38 | -45 | -52 |
| TOTAL | | | | | | | | | | |
| Outlays: | | | | | | | | | | |
| On-Budget | 12 | 7 | 22 | 43 | 70 | 99 | 130 | 143 | 152 | 166 |
| Off-Budget | -16 | -36 | -33 | -25 | -21 | -27 | -47 | -53 | -53 | -53 |
| Total | -4 | -28 | -11 | 18 | 49 | 72 | 82 | 90 | 99 | 113 |
| Revenues: | | | | | | | | | | |
| On-Budget | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Off-Budget | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
| Total | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Deficit (-) or Surplus (+): | | | | | | | | | | |
| On-Budget | -11 | -6 | -21 | -42 | -69 | -98 | -129 | -142 | -151 | -165 |
| Off-Budget | 18 | 43 | 42 | 34 | 30 | 36 | 57 | 63 | 64 | 64 |
| Total | 7 | 37 | 21 | -8 | -39 | -61 | -72 | -79 | -88 | -102 |

¹ Less than \$500,000.

Notes: Components may not sum to totals due to rounding.

OASDI=Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, SSI=Supplemental Security Income, CDR=Continuing Disability Review, EPE=extended period of eligibility, HI=Hospital Insurance (Medicare Part A).

TABLE 2. DIFFERENCES BETWEEN CBO ESTIMATES OF S. 331 AS PASSED BY THE SENATE AND H.R. 3070 AS REPORTED BY THE COMMITTEE ON WAYS AND MEANS

| | By fiscal year, in millions of dollars— | | | | | | | | | |
|----------------------------------|---|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| CBO ESTIMATE OF S. 331 AS PASSED | | | | | | | | | | |
| Outlays | 50 | 117 | 174 | 201 | 227 | 193 | 176 | 167 | 166 | 162 |
| Revenues | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Surplus | -47 | -108 | -164 | -191 | -217 | -182 | -165 | -156 | -155 | -150 |

TABLE 2. DIFFERENCES BETWEEN CBO ESTIMATES OF S. 331 AS PASSED BY THE SENATE AND H.R. 3070 AS REPORTED BY THE COMMITTEE ON WAYS AND MEANS—Continued

| | By fiscal year, in millions of dollars— | | | | | | | | | |
|--------------------------------------|---|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Restrict School-based Medicaid | -3 | -11 | -16 | -18 | -22 | -27 | -32 | -38 | -45 | -52 |
| Total ... | -54 | -146 | -185 | -182 | -176 | -121 | -94 | -78 | -68 | -49 |
| | H.R. 3070, AS REPORTED | | | | | | | | | |
| Outlays | -4 | -28 | -11 | 18 | 49 | 72 | 82 | 90 | 99 | 113 |
| Revenues | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Surplus | 7 | 37 | 21 | -8 | -39 | -61 | -72 | -79 | -88 | -102 |

¹ Less than \$500,000.

Notes: Components may not sum to totals due to rounding.

OASDI=Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, CDR=Continuing Disability Review, EPE=extended period of eligibility, HHS=Department of Health and Human Services.

- Both measures would establish two new grant programs to be administered by the Department of Health and Human Services: one that would encourage states, along with the Social Security Administration (SSA), to publicize information about the work incentives and vocational rehabilitation services available under law, and another that would temporarily permit states to grant Medicaid-like benefits to people with serious medical conditions who are not yet sufficiently disabled to qualify for cash benefits. In the Senate's bill, these grants would occur automatically, without any further Congressional action; in the Ways and Means version, they would be subject to future appropriation.

- Both bills would extend SSA's demonstration authority, which sometimes requires the agency to waive certain provisions of law. The Senate bill would extend it permanently, the Ways and Means bill for the next five years.

- The two bills contain a subtle difference in their provisions affecting prisoners. The Senate bill would require suspension of Social Security benefits for convicted criminals who are incarcerated throughout a month. The Ways and Means bill would suspend benefits if the prisoner were confined during a month and thus would result in larger savings. For example, a felon whose six-month sentence ran from January 15 to July 15 would be subject to a longer suspension in the Ways and Means bill. H.R. 3070 contains an exemption for prisoners whose entire sentence is less than 30 days.

- The Ways and Means bill adds a provision that would require SSA to collect a processing charge from attorneys who represent successful DI claimants at the appeals level. Currently, in cases where the attorney and client have consented, SSA withholds the attorney's fee from the beneficiary's initial lump-sum check and remits it to the attorney. The provision would require that SSA withhold 6.3 percent of the attorney fee, or about \$165 on average, to cover its processing costs.

- The Ways and Means bill adds a provision that would expand the authority of state Medicaid Fraud Control Units (MFCUs) in two ways. First, it would explicitly allow MFCUs to investigate and prosecute fraud in federal health care programs other than Medicaid if the suspected fraud is primarily related to Medicaid and

the MFCU receives approval from the relevant federal agency. Funds collected as the result of such investigations would be credited to the relevant federal health care program. Second, the provision would give states the option to review complaints of abuse or neglect of patients who reside in board and care facilities.

CBO estimates that the provision would result in savings to Medicare of \$5 million a year once it is fully phased in because MFCUs would recover somewhat larger amounts of restitution for Medicare fraud than they do under current law. Other federal health programs would also receive higher restitution, but CBO estimates these amounts to be less than \$500,000 each year. To the extent that states choose to investigate abuse and neglect in board and care facilities, MFCU expenses could be higher, but CBO expects that most of these investigations would be undertaken with current resources so that increased costs to Medicaid would be negligible.

- Finally, the Ways and Means bill adds a series of provisions that would introduce new requirements as to how school districts may bill Medicaid when they provide health services to Medicaid beneficiaries. CBO estimates that those provisions would lower net federal Medicaid outlays by \$70 million over the 2000–2004 period and by \$264 million over the 2000–2009 period.

Under current law, states can receive federal Medicaid reimbursement for school-based services provided to Medicaid beneficiaries and related administrative costs. There have been recent concerns that some of the reimbursement practices may be inappropriate. H.R. 3070 would: strengthen reporting requirements for school-based services; narrow the circumstances under which transportation could be reimbursed; require the Health Care Financing Administration to develop and implement a uniform methodology for states to file claims for payment of school-based medical assistance and administration; constrain the arrangements that states may enter into with contractors; and limit the amount of federal reimbursement that may be retained by the state.

CBO expects that those provisions would lead to lower Medicaid claims in the future as some of the controversial practices are deterred. The savings would be partially offset by increased administrative costs in the short term as states implement new procedures, and by new claims from states that begin to file claims under a new uniform methodology.

H.R. 3070 would authorize several new grant programs and other activities, subject to future appropriation action.

Title I would establish a Work Incentives Advisory Panel, authorize a new outreach program to be funded by grants to community-based organizations that work with the disabled, and authorize grants to each state's protection and advocacy program. Title II would establish two new grant programs to encourage states to provide better health care coverage to people with disabilities. (These two are identical to grant programs that would be established under S. 331, except that in the Senate-passed bill they would not be subject to future appropriation action.) Altogether, the new programs would be authorized to receive about \$0.6 billion in budget authority over the 2000–2004 period.

SSA would also incur greater administrative expenses to implement the new vocational rehabilitation program and other activities under the bill. CBO judges that those extra expenses would cost the agency between \$15 million and \$40 million a year.

Pay-as-you-go considerations: The Balanced Budget and Emergency Deficit Control Act sets up pay-as-you-go procedures for legislation affecting direct spending or receipts. The net changes in outlays and governmental receipts that are subject to pay-as-you-go procedures are shown in Table 3. For the purposes of enforcing pay-as-you-go procedures, only the effects in the current year, the budget year, and the succeeding four years are counted.

TABLE 3. SUMMARY OF THE PAY-AS-YOU-GO EFFECTS OF H.R. 3070

| | By fiscal year, in millions of dollars)— | | | | | | | | | |
|------------------------|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Changes in outlays ... | 12 | 7 | 22 | 43 | 70 | 99 | 130 | 143 | 152 | 166 |
| Changes in receipts .. | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

Estimated impact on the private sector: Provisions of the bill not excluded from consideration by UMRA include one private-sector mandate on insurers who provide medigap coverage to Medicare beneficiaries who are eligible because of disability. It would require such insurers to reinstate coverage that disabled beneficiaries had previously suspended because they had group health plan coverage, if the beneficiaries lose that group coverage and request reinstatement within 90 days of that loss. Because of restrictions on the premiums that could be charged for reinstated coverage, this provision could impose costs that insurers might not immediately recover from premiums. However, because of the small number of beneficiaries this provision would affect, the costs that might be imposed on medigap insurers would be well below the threshold specified in UMRA (\$100 million in 1996, adjusted annually for inflation).

Estimated impact on state, local, and tribal governments: Section 4 of the Unfunded Mandates Reform Act excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance programs under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the provisions of H.R. 3070 either fall within that exclusion or contain no intergovernmental mandates.

The bill includes optional programs for states that would result in greater state spending if they chose to participate as well as additional grants to states for specific programs. While the bill includes a number of optional expansions for Medicaid, additional requirements on how school districts bill Medicaid for health services would result in a cut in Medicaid funding for those purposes.

Title II contains a number of optional programs for states to expand their Medicaid program to cover workers with disabilities who want to buy into Medicaid and to continue Medicaid coverage for individuals who lose their eligibility for DI or SSI following a continuing disability review. CBO estimates that state costs attributable to these optional expansions during the first five years

would total about \$70 million for the first option and about \$10 million for the second. States would also have the option of charging participants premiums or other fees to offset a portion of those costs. States that implement the first of these Medicaid options would be eligible for grants to develop and operate programs to support working individuals with disabilities. CBO estimates that states would receive a total of about \$40 million during the first five years the program is in effect.

Title II would also allow states to establish demonstration projects that would provide health services equal to those available under Medicaid to working individuals with physical or mental impairments who, without such services, could become blind or disabled. CBO estimates that state costs attributable to this optional coverage would total \$215 million over the first five years of implementation. Federal funding for these demonstration projects would be subject to annual appropriation.

Finally, new requirements on how school districts may bill Medicaid for health services would result in a decrease in federal Medicaid funding of \$70 million over the 2000–2004 period, as described in the Basis of Estimates section.

Estimate Prepared by: Federal Cost: Kathy Ruffing (DI and SSI), Jeanne De Sa and Dorothy Rosenbaum (Medicare and Medicaid), and Noah Meyerson (Social Security receipts. Impact on State, Local, and Tribal Governments: Leo Lex. Impact on the Private Sector: Bruce Vavrichek.

Estimate Approved by: Robert A. Sunshine, Assistant Director for Budget Analysis.

V. OTHER MATTERS REQUIRED TO BE DISCUSSED UNDER THE RULES OF THE HOUSE

A. COMMITTEE OVERSIGHT FINDINGS AND RECOMMENDATIONS

In compliance with clause 3(c)(1) of rule XIII of the Rules of the House of Representatives, the Committee reports that the need for legislation was confirmed through its ongoing oversight of the Social Security Administration and the Social Security programs.

B. SUMMARY OF FINDINGS AND RECOMMENDATIONS OF THE GOVERNMENT REFORM AND OVERSIGHT COMMITTEE

In compliance with clause 3(c)(4) of rule XIII of the Rules of the House of Representatives, the Committee states that no oversight findings and recommendations have been submitted to this Committee by the Committee on Government Reform and Oversight with respect to the provisions contained in this bill.

C. CONSTITUTIONAL AUTHORITY STATEMENT

With respect to clause 3(d)(1) of rule XIII of the Rules of the House of Representatives, relating to Constitutional Authority, the Committee states that the Committee's action in reporting the bill is derived from Article I of the Constitution, Section 8 ("The Congress shall have power to lay and collect taxes, duties, imposts and excises, to pay the debts and to provide for *** the general Welfare of the United States ***).

VI. APPLICABILITY OF FEDERAL ADVISORY COMMITTEE ACT

Pursuant to the Federal Advisory Committee Act (5 U.S.C., App., section 5(b)), the Committee states that any advisory bodies created by the bill, such as the Ticket to Work and Work Incentives Improvement Advisory Panel are consciously created, and are deemed appropriate and necessary to carry out the purposes of the bill. It is the view of the Committee that the functions of any such advisory bodies are not being and could be performed by one or more agencies or by an advisory committee already in existence, or by enlarging the mandate of an existing advisory committee.

VII. CHANGES IN EXISTING LAW MADE BY THE BILL AS REPORTED

In the opinion of the Committee, in order to expedite the business of the House of Representatives, it is necessary to dispense with the required clause 3(e) of rule XIII of the Rules of the House of Representatives, related to showing changes in existing law made by the bill, as reported.

VIII. ADDITIONAL VIEWS

While Democratic Members of the Committee on Ways and Means largely voted in favor of H.R. 3070, they did so on the basis of the provisions of the bill that fall within the Committee's jurisdiction and with the full expectation that the shortcomings of the bill that fall outside the Committee's jurisdiction would be resolved prior to floor consideration.

Specifically, Committee Democrats strenuously object to two Medicaid-related provisions contained in H.R. 3070. Every Democrat on the Ways and Means Committee cosponsored H.R. 1180, a bipartisan version of the Ticket to Work and Work Incentives Improvement Act. As reported by the Committee on Commerce, the Medicaid provisions of H.R. 1180 would directly appropriate the funds necessary to finance grants to States to design, establish, and operate infrastructures that provide support services for working individuals with disabilities. Similarly, H.R. 1180 as reported would directly appropriate the funds necessary for State demonstration projects to provide medical assistance equal to that available through Medicaid to workers aged 16 to 64 with potentially severe disabilities. Rather than directly appropriate such funds, H.R. 3070 merely authorizes discretionary spending for such provisions.

As a result, H.R. 3070 leaves these two vitally important innovations subject to the uncertainty of the annual appropriations process. Yet, secure funding for the infrastructure grants and the demonstration project are absolutely essential to ensure that people with disabilities actually benefit from the other provisions of H.R. 3070 and that people with disabilities do not lose the ability to work in the first place. As Secretary of Health and Human Services Donna Shalala pointed out in her October 14 letter to chairman Archer: "These grant programs are incentives for the states to adopt the Medicaid buy-in portion of the legislation. Without state support, the success of the Medicaid buy-in will be limited."

Unfortunately, these two items lie outside the jurisdiction of the Committee on Ways and Means and therefore could not be addressed during the Committee's markup of H.R. 3070. The Democratic Members of the Ways and Means Committee strongly urge the Committee on Commerce to devise a means to pay for the infrastructure grants to States and for the Medicaid demonstration project contained in the Ticket to Work and Work Incentives Improvement Act when the bill is considered in the Committee on Rules. The Democratic Members of the Committee on Ways and Means hope that, once the Committee on Commerce provides a secure source of funding for these crucial grants and demonstrations, this legislation will help to improve the lives of people with disabilities, people who want to work and who want to contribute even more to a brighter future for all Americans.

During the markup of H.R. 3070, Committee Democrats attempted to rectify the one major flaw in the bill that fell within Ways and Means jurisdiction: a new fee upon attorneys who represent Social Security disability claimants. Under current law, when an attorney successfully represents a disability claimant and that claimant is entitled to past-due benefits, SSA withholds a portion of those past-due benefits in order to pay the attorney for the services he or she provided. H.R. 3070 imposes a fee of 6.3 percent on all such payments to attorneys. Such a fee would likely deter some attorneys from representing disability claimants. Yet, claimants with professional, expert legal representation are far more likely to receive the benefits to which they are entitled as a result of their contributions to the Social Security system. (For instance, in 1998, 57.6 percent of claimants represented by an attorney, but only 35.7 percent of those without one, were awarded benefits at the hearing level.) Accordingly, Committee Democrats offered an amendment to strike the attorney fee provision and replace it with a provision to reduce the misuse of partial hospitalization services under the Medicare program. Committee Republicans voted en bloc against the amendment, thereby signaling their opposition to adequate legal representation for Social Security disability claimants and their support for unabated Medicare fraud.

Despite these shortcomings, Committee Democrats largely voted in favor of H.R. 3070 because it builds upon previous, bipartisan versions of the Ticket to Work and Work Incentives Improvement Act, all of which would make significant progress in helping Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) beneficiaries to participate more fully in the nation's economy and to provide for themselves and their families. Like H.R. 1180, which was introduced earlier this year in a bipartisan fashion, this bill creates a Ticket to Work program to offer disabled beneficiaries greater choice in obtaining vocational rehabilitation services, employment services, and other support services. Like H.R. 1180, this bill greatly extends Medicare coverage for disabled beneficiaries who return to the workforce.

H.R. 3070 and all of the other versions of the bill recognize that many, many disabled beneficiaries urgently want to return to the workplace and to make the most of their talents and abilities, but they are simply unable to do so, for a number of reasons. While people with disabilities possess the clear desire to work, they often require vocational rehabilitation, job training, or some other form of assistance in order to find a job and to hold that job over the long run. Just as importantly, under current law, people with disabilities are often discouraged from securing employment, for if they are successful in returning to work, they lose not only their SSDI or SSI benefits, but, after a short time, the Medicare coverage too. As representatives from the U.S. General Accounting Office testified before the Social Security Subcommittee earlier this year, “* * * the loss of health coverage is a big concern and barrier to people who are attempting to move from disability into the work force and stay in the work force.”

Committee Democrats voted to report H.R. 3070 favorably because it makes great strides towards removing the most formidable obstacle that people with disabilities face in returning to work—the

loss of their health care coverage. The bill would extend by 6 years the period during which disability beneficiaries who return to work receive Medicare coverage.

The bill would improve the supports that persons with disabilities receive during their transition back into the labor force in other areas as well. H.R. 3070 would afford SSDI and SSI beneficiaries a much greater choice of service providers and would thus enable them to match their particular needs with the capacities of private entities or public agencies more readily. Specifically, the bill would provide disability beneficiaries with a "Ticket to Work," which could be presented to either a private vocational rehabilitation provider or to a State vocational rehabilitation agency in exchange for services such as physical therapy or job training. The Ticket program would spur providers, both public and private, to offer the most effective services possible, since, under the Ticket program, providers share in the savings to government that arise when a SSDI or SSI beneficiary returns to the workforce and no longer receives benefit payments.

Committee Democrats believe that, rather than maintain the current barriers to work, public policy should strive to facilitate the transition back to the workforce for people with disabilities. Moreover, rather than penalize people with disabilities once they do return to work, public policy should ensure that they do not have to bear the costly burden of health insurance before they are able to do so.

C.B. RANGEL.
 PETE STARK.
 KAREN L. THURMAN.
 RICHARD E. NEAL.
 JERRY KLECZKA.
 JIM McDERMOTT.
 BEN CARDIN.
 WILLIAM J. JEFFERSON.
 ROBERT T. MATSUI.
 WILLIAM J. COYNE.
 SANDER LEVIN.
 JOHN TANNER.
 MICHAEL R. McNULTY.
 XAVIER BECERRA.
 JOHN LEWIS.

IX. DISSENTING VIEWS

This bill has followed a most curious path. In March, a number of us joined in the bipartisan filing of H.R. 1180, a comprehensive effort to facilitate individuals with disabilities seeking employment. Eventually, some 247 Members of the House joined as cosponsors of H.R. 1180. On July 1, the Commerce Committee recommended it on voice vote. A companion was approved by the Senate 99–0. Instead of considering this measure, the Committee took up a bill filed at 6:30 p.m. the prior evening and quickly replaced with a substitute at markup. The only purpose of such maneuvering was to make a modest bill in H.R. 1180 even more modest.

I voted against H.R. 3070 because of what was missing. This bill circumvents broadly supported and essential provisions in H.R. 1180. The National Council on Independent Living stated that H.R. 3070, “significantly limits the opportunities for people with disabilities to return to work or to gain and maintain employment.” Catholic Charities USA stated that these missing provisions were among the most important provisions in H.R. 1180. The Secretary of the U.S. Department of Health and Human Services expressed serious concerns regarding provisions that were eliminated and advised that the Committee, “should recognize the partnership we depend on with the states, and restore the mandatory funding.” Further, H.R. 3070 drops the guarantee of lifetime health care coverage for SSDI recipients who do go back to work and instead extends Medicare coverage an additional six years. Without lifetime coverage, this merely defers the eventual choice between work and health care coverage.

H.R. 3070 pretends to set up state grants to establish support services for individuals with disabilities who choose to return to work. We should support states in their efforts to develop the best plans for getting the disabled back to work such as by addressing transportation needs. Only through the filing of a separate bill eliminating the funding for these state grants has the Committee been able to use jurisdictional cover as an excuse for its unfortunate actions.

Similarly, H.R. 3070 merely authorizes and drops the financial support for state demonstration projects to allow those with potentially severe diseases to get Medicaid coverage. This will directly and adversely effect people afflicted with Multiple Sclerosis, Parkinson’s disease, diabetes, epilepsy, and people with HIV who have chosen to work until their disease makes that an impossibility. These demonstration grants, if paid for rather than just described in this bill, would have allowed these individuals to gain access to crucial medicines and support only available through Medicaid, in order to keep their disability from progressing and to allow them to work. This bill rejects support for creative state programs in favor of encouraging workers to quit their jobs, stay at home and

wait until they have deteriorated to a point where they can then qualify for SSI payments and Medicaid rather than collecting a paycheck.

By eliminating this provision, we are denying individuals the opportunity to get medical support earlier in the progression of their disease to allow them to be healthier and more productive. All the medical advances we hear of, including expensive and unaffordable drug therapies, show so much promise in slowing the progression of these diseases.

I agree that we must fully pay for this initiative rather than ignoring the fiscal consequences of legislation as the House leadership did with its recent irresponsible tax cut. However, no visible effort was made to pay for the abandoned provisions.

A number of my colleagues voted for H.R. 3070 just to move the process along. I agree that it is important to get this matter to conference with the Senate. The same recalcitrant House leadership that is promoting a weakened H.R. 3070 succeeded in blocking meaningful support for individuals with disabilities proposed in the Senate during the last Congress. Let us hope they will not again block individuals with disabilities from securing the opportunities they deserve.

LLOYD DOGGETT.



CONGRESSIONAL BUDGET OFFICE

COST ESTIMATE

October 15, 1999

H.R. 3070

Ticket to Work and Work Incentives Improvement Act of 1999

As ordered reported by the Committee on Ways and Means on October 14, 1999

SUMMARY

H.R. 3070 would alter cash and health-care benefits for people with disabilities. Title I would revamp the system under which people collecting benefits from Disability Insurance (DI) and Supplemental Security Income (SSI) receive vocational rehabilitation (VR) services and would make it easier for working beneficiaries to retain or regain cash benefits. Title II would provide states with options to extend Medicaid coverage to certain disabled workers, enhance Medicare coverage for people who leave the DI rolls because of work, and authorize grants and demonstration projects (subject to future appropriation) for states to assist disabled workers. Title III would require several demonstration projects affecting DI recipients. To offset the costs of the bill, title IV would tighten restrictions on the payment of Social Security benefits to prisoners, give certain members of the clergy another opportunity to enroll in the Social Security system, levy a processing charge on attorneys who represent DI claimants, and reduce some Medicare and Medicaid costs.

CBO estimates that the bill's effects on direct spending and revenues would add to the total federal surplus by \$18 million over the 2000-2004 period; of that amount, \$168 million would represent an increase in the off-budget Social Security surplus, offset by a \$150 million reduction in the on-budget surplus. The bill's effects on direct spending and revenues would reduce the total federal surplus over the 2000-2009 period. Because H.R. 3070 would affect receipts and direct spending, pay-as-you-go procedures would apply. Furthermore, assuming appropriation of the necessary sums, additional discretionary spending under this bill would total about \$565 million over the 2000-2004 period.

Section 4 of the Unfunded Mandates Reform Act (UMRA) excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance program under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the provisions of H.R. 3070 either fall within that exclusion or contain no intergovernmental mandates. Provisions of the bill that are not excluded from the application of UMRA contain one

private-sector mandate; CBO estimates that its cost would be well below the threshold specified in UMRA.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated budgetary impact of H.R. 3070 on direct spending and revenues is summarized in Table 1. This legislation would affect budget functions 550 (Health), 570 (Medicare), 600 (Income Security), and 650 (Social Security).

TABLE 1.
ESTIMATED DIRECT SPENDING AND REVENUE EFFECTS OF H.R. 3070, BY PROVISION

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|--|--|----------|----------|----------|-----------|-----------|------------|------------|------------|------------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Title I | | | | | | | | | | |
| Establishment of the Ticket to Work and Self-Sufficiency Program | | | | | | | | | | |
| Disability Insurance | a | a | 2 | 3 | -5 | -21 | -45 | -51 | -52 | -53 |
| Medicare | a | a | a | a | 1 | 1 | 1 | -3 | -11 | -25 |
| Supplemental Security Income | <u>a</u> | <u>a</u> | <u>1</u> | <u>1</u> | <u>-2</u> | <u>-7</u> | <u>-16</u> | <u>-22</u> | <u>-27</u> | <u>-32</u> |
| Subtotal (effect on outlays) | a | a | 3 | 4 | -7 | -27 | -60 | -75 | -90 | -110 |
| Bar on Work CDRs for Certain DI Beneficiaries With Earnings | | | | | | | | | | |
| Disability Insurance | 0 | 0 | 0 | 5 | 15 | 20 | 25 | 25 | 25 | 25 |
| Medicare | <u>0</u> | <u>0</u> | <u>0</u> | <u>2</u> | <u>5</u> | <u>8</u> | <u>9</u> | <u>10</u> | <u>10</u> | <u>11</u> |
| Subtotal (effect on outlays) | 0 | 0 | 0 | 7 | 20 | 28 | 34 | 35 | 35 | 36 |
| Expedited Reinstatement of DI Benefits Within 60 Months of Termination | | | | | | | | | | |
| Disability Insurance | 0 | 1 | 1 | 1 | 2 | 3 | 3 | 4 | 5 | 6 |
| Medicare | <u>0</u> | <u>a</u> | <u>a</u> | <u>a</u> | <u>1</u> | <u>1</u> | <u>1</u> | <u>2</u> | <u>2</u> | <u>3</u> |
| Subtotal (effect on outlays) | 0 | 1 | 1 | 1 | 3 | 4 | 4 | 6 | 7 | 9 |

Title II

State Option to Eliminate Income, Resource, and Asset Limitations for Medicaid Buy-in

| | | | | | | | | | | |
|----------|----|----|----|----|----|----|----|----|----|----|
| Medicaid | 15 | 16 | 18 | 20 | 22 | 24 | 26 | 29 | 32 | 35 |
|----------|----|----|----|----|----|----|----|----|----|----|

State Option to Continue Medicaid Buy-in for Participants Whose DI or SSI Benefits Are Terminated After a CDR

| | | | | | | | | | | |
|----------|---|---|---|---|---|---|---|---|----|----|
| Medicaid | 1 | 2 | 3 | 4 | 5 | 6 | 8 | 9 | 11 | 13 |
|----------|---|---|---|---|---|---|---|---|----|----|

Six-Year Extension of Medicare for Former DI Beneficiaries Who Exhaust Their Current Law EPE, effective October 2000

| | | | | | | | | | | |
|----------|---|----|----|----|----|-----|-----|-----|-----|-----|
| Medicare | 0 | 10 | 29 | 48 | 74 | 104 | 141 | 161 | 186 | 219 |
|----------|---|----|----|----|----|-----|-----|-----|-----|-----|

Title III

Five-Year Extension of DI Demonstration Project Authority

| | | | | | | | | | | |
|----------------------|---|---|---|---|---|---|---|---|---|---|
| Disability Insurance | 3 | 5 | 5 | 5 | 5 | 3 | a | a | a | a |
|----------------------|---|---|---|---|---|---|---|---|---|---|

\$1-for-\$2 Demonstration Projects

| | | | | | | | | | | |
|------------------|---|---|---|---|----|----|----|----|----|----|
| DI Benefit Costs | 0 | 0 | 3 | 8 | 13 | 18 | 19 | 18 | 18 | 18 |
|------------------|---|---|---|---|----|----|----|----|----|----|

| | | | | | | | | | | |
|----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| Medicare Costs | <u>0</u> | <u>0</u> | <u>0</u> | <u>0</u> | <u>2</u> | <u>4</u> | <u>7</u> | <u>9</u> | <u>9</u> | <u>9</u> |
|----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|

| | | | | | | | | | | |
|------------------------------|---|---|---|---|----|----|----|----|----|----|
| Subtotal (effect on outlays) | 0 | 0 | 3 | 8 | 15 | 22 | 26 | 27 | 28 | 27 |
|------------------------------|---|---|---|---|----|----|----|----|----|----|

Title IV

Provisions Affecting Prisoners

| | | | | | | | | | | |
|--------------------------------------|---|---|---|---|---|----|----|----|----|----|
| Payments to Prison Officials (OASDI) | 2 | 7 | 8 | 9 | 9 | 10 | 10 | 10 | 10 | 10 |
|--------------------------------------|---|---|---|---|---|----|----|----|----|----|

| | | | | | | | | | | |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|
| Payments to Prison Officials (SSI) | a | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
|------------------------------------|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | | |
|-----------------------------|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Savings in Benefits (OASDI) | -5 | -24 | -28 | -31 | -35 | -35 | -35 | -35 | -35 | -35 |
|-----------------------------|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|

| | | | | | | | | | | |
|---------------------------|-----------|-----------|-----------|-----------|------------|------------|------------|------------|------------|------------|
| Savings in Benefits (SSI) | <u>-2</u> | <u>-7</u> | <u>-8</u> | <u>-9</u> | <u>-11</u> | <u>-11</u> | <u>-11</u> | <u>-11</u> | <u>-11</u> | <u>-11</u> |
|---------------------------|-----------|-----------|-----------|-----------|------------|------------|------------|------------|------------|------------|

| | | | | | | | | | | |
|------------------------------|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Subtotal (effect on outlays) | -5 | -24 | -27 | -31 | -36 | -35 | -35 | -35 | -35 | -35 |
|------------------------------|----|-----|-----|-----|-----|-----|-----|-----|-----|-----|

Open Season for Clergy to Enroll in Social Security

| | | | | | | | | | | |
|-----------------------------|---|---|---|---|---|----|----|----|----|----|
| Off-Budget (OASDI) Revenues | 2 | 7 | 9 | 9 | 9 | 10 | 10 | 10 | 10 | 11 |
|-----------------------------|---|---|---|---|---|----|----|----|----|----|

| | | | | | | | | | | |
|-------------------------|---|---|---|---|---|---|---|---|---|---|
| On-Budget (HI) Revenues | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 2 |
|-------------------------|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | | |
|--------------------------|---|----|----|----|----|----|----|----|----|----|
| Other On-Budget Revenues | a | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 |
|--------------------------|---|----|----|----|----|----|----|----|----|----|

| | | | | | | | | | | |
|----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|
| OASDI Benefits | <u>a</u> | <u>a</u> | <u>a</u> | <u>a</u> | <u>a</u> | <u>a</u> | <u>1</u> | <u>1</u> | <u>1</u> | <u>1</u> |
|----------------|----------|----------|----------|----------|----------|----------|----------|----------|----------|----------|

| | | | | | | | | | | |
|------------------------------------|---|---|----|----|----|----|----|----|----|----|
| Subtotal (effect on total surplus) | 3 | 8 | 10 | 10 | 10 | 10 | 10 | 10 | 11 | 11 |
|------------------------------------|---|---|----|----|----|----|----|----|----|----|

Collection of Processing Fees from Attorneys Who Represent Successful DI Claimants

| | | | | | | | | | | |
|--|------------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| Disability Insurance | -15 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 |
| Expansion of Certain Anti-Fraud Provisions in Medicaid | | | | | | | | | | |
| Medicare | 0 | -3 | -5 | -5 | -5 | -5 | -5 | -5 | -5 | -5 |
| Restriction on Medicaid Payments for School-Based Services | | | | | | | | | | |
| Medicaid | -3 | -11 | -16 | -18 | -22 | -27 | -32 | -38 | -45 | -52 |
| Total | | | | | | | | | | |
| Outlays | | | | | | | | | | |
| On-Budget | 12 | 7 | 22 | 43 | 70 | 99 | 130 | 143 | 152 | 166 |
| Off-Budget | <u>-16</u> | <u>-36</u> | <u>-33</u> | <u>-25</u> | <u>-21</u> | <u>-27</u> | <u>-47</u> | <u>-53</u> | <u>-53</u> | <u>-53</u> |
| Total | -4 | -28 | -11 | 18 | 49 | 72 | 82 | 90 | 99 | 113 |
| Revenues | | | | | | | | | | |
| On-Budget | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Off-Budget | <u>2</u> | <u>7</u> | <u>9</u> | <u>9</u> | <u>9</u> | <u>10</u> | <u>10</u> | <u>10</u> | <u>10</u> | <u>11</u> |
| Total | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Deficit (-) or Surplus (+) | | | | | | | | | | |
| On-Budget | -11 | -6 | -21 | -42 | -69 | -98 | -129 | -142 | -151 | -165 |
| Off-Budget | <u>18</u> | <u>43</u> | <u>42</u> | <u>34</u> | <u>30</u> | <u>36</u> | <u>57</u> | <u>63</u> | <u>64</u> | <u>64</u> |
| Total | 7 | 37 | 21 | -8 | -39 | -61 | -72 | -79 | -88 | -102 |

Notes: Components may not sum to totals due to rounding.

OASDI=Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, SSI=Supplemental Security Income, CDR=Continuing Disability Review, EPE=extended period of eligibility, HI=Hospital Insurance (Medicare Part A).

a. Less than \$500,000.

BASIS OF ESTIMATE

For purposes of estimating the budgetary effects of H.R. 3070, CBO assumes enactment by December 1, 1999. Most provisions of H.R. 3070 as reported by the Committee on Ways and Means are the same as those in S. 331, a bill that was passed by the Senate in July. Differences between the two bills are summarized in Table 2. The major differences that affect CBO's estimate are:

- Both bills would stop continuing disability reviews (CDRs) that are triggered by a report of earnings. The people affected would still be subject to periodic CDRs, which generally occur every three years. In S. 331, this provision would be effective immediately, whereas H.R. 3070 would delay it until January 2003. As a result, costs would be smaller over the 2000-2005 period.

- Both bills would provide extended Medicare coverage for people who leave the DI rolls because of work. Under current law, those people already get three years of Medicare coverage (a period commonly called the extended period of eligibility, or EPE) after their cash benefits are suspended. The Senate bill would grant indefinite Medicare coverage to people who graduate from the EPE in the next six years, then revert to current law for later graduates. The Ways and Means bill would grant six years of extra coverage for all people who complete the EPE after September 2000. Consequently, the Ways and Means approach is less costly at first but more expensive beginning in 2007.
- Both measures would establish two new grant programs to be administered by the Department of Health and Human Services: one that would encourage states, along with the Social Security Administration (SSA), to publicize information about the work incentives and vocational rehabilitation services available under law, and another that would temporarily permit states to grant Medicaid-like benefits to people with serious medical conditions who are not yet sufficiently disabled to qualify for cash benefits. In the Senate's bill, these grants would occur automatically, without any further Congressional action; in the Ways and Means version, they would be subject to future appropriation.
- Both bills would extend SSA's demonstration authority, which sometimes requires the agency to waive certain provisions of law. The Senate bill would extend it permanently, the Ways and Means bill for the next five years.
- The two bills contain a subtle difference in their provisions affecting prisoners. The Senate bill would require suspension of Social Security benefits for convicted criminals who are incarcerated throughout a month. The Ways and Means bill would suspend benefits if the prisoner were confined during a month and thus would result in larger savings. For example, a felon whose six-month sentence ran from January 15 to July 15 would be subject to a longer suspension in the Ways and Means bill. H.R. 3070 contains an exemption for prisoners whose entire sentence is less than 30 days.
- The Ways and Means bill adds a provision that would require SSA to collect a processing charge from attorneys who represent successful DI claimants at the appeals level. Currently, in cases where the attorney and client have consented, SSA withholds the attorney's fee from the beneficiary's initial lump-sum check and remits it to the attorney. The provision would require that SSA withhold 6.3 percent of the attorney fee, or about \$165 on average, to cover its processing costs.
- The Ways and Means bill adds a provision that would expand the authority of state Medicaid Fraud Control Units (MFCUs) in two ways. First, it would explicitly allow MFCUs to investigate and prosecute fraud in federal health care programs other than Medicaid if the suspected fraud is primarily related to Medicaid and the MFCU receives approval from the relevant federal agency. Funds collected as the result of such investigations would be credited to the relevant federal health care program. Second, the provision would give states the option to review complaints of abuse or

neglect of patients who reside in board and care facilities.

CBO estimates that the provision would result in savings to Medicare of \$5 million a year once it is fully phased in because MFCUs would recover somewhat larger amounts of restitution for Medicare fraud than they do under current law. Other federal health programs would also receive higher restitution, but CBO estimates these amounts to be less than \$500,000 each year. To the extent that states choose to investigate abuse and neglect in board and care facilities, MFCU expenses could be higher, but CBO expects that most of these investigations would be undertaken with current resources so that increased costs to Medicaid would be negligible.

- Finally, the Ways and Means bill adds a series of provisions that would introduce new requirements as to how school districts may bill Medicaid when they provide health services to Medicaid beneficiaries. CBO estimates that those provisions would lower net federal Medicaid outlays by \$70 million over the 2000-2004 period and by \$264 million over the 2000-2009 period.

Under current law, states can receive federal Medicaid reimbursement for school-based services provided to Medicaid beneficiaries and related administrative costs. There have been recent concerns that some of the reimbursement practices may be inappropriate. H.R. 3070 would: strengthen reporting requirements for school-based services; narrow the circumstances under which transportation could be reimbursed; require the Health Care Financing Administration to develop and implement a uniform methodology for states to file claims for payment of school-based medical assistance and administration; constrain the arrangements that states may enter into with contractors; and limit the amount of federal reimbursement that may be retained by the state.

CBO expects that those provisions would lead to lower Medicaid claims in the future as some of the controversial practices are deterred. The savings would be partially offset by increased administrative costs in the short term as states implement new procedures, and by new claims from states that begin to file claims under a new uniform methodology.

TABLE 2.
DIFFERENCES BETWEEN CBO ESTIMATES OF S. 331 AS PASSED BY THE SENATE AND H.R. 3070 AS REPORTED BY THE COMMITTEE ON WAYS AND MEANS

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|---|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| CBO estimate of S. 331 as Passed | | | | | | | | | | |
| Outlays | 50 | 117 | 174 | 201 | 227 | 193 | 176 | 167 | 166 | 162 |
| Revenues | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Surplus | -47 | -108 | -164 | -191 | -217 | -182 | -165 | -156 | -155 | -150 |

Changes from S. 331 as Passed

Outlays

Bar on Work CDRs for Certain DI Beneficiaries

| | | | | | | | | | | |
|----------------------|----|-----|-----|-----|----|----|---|---|---|---|
| Disability Insurance | -5 | -15 | -20 | -15 | -5 | -5 | 0 | 0 | 0 | 0 |
| Medicare (net) | -2 | -6 | -7 | -5 | -3 | a | 0 | 0 | 0 | 0 |

Extension of Medicare for Former DI Beneficiaries Who Exhaust Their Current-Law EPE

| | | | | | | | | | | |
|----------------|-----|-----|-----|-----|-----|-----|----|----|----|----|
| Medicare (net) | -10 | -19 | -19 | -20 | -21 | -21 | -6 | 17 | 35 | 62 |
|----------------|-----|-----|-----|-----|-----|-----|----|----|----|----|

Grants to States to Provide Infrastructure to Support Working Individuals with Disabilities

| | | | | | | | | | | |
|-------------|----|----|----|----|----|-----|-----|-----|-----|-----|
| HHS Outlays | -6 | -7 | -7 | -8 | -9 | -10 | -11 | -12 | -13 | -14 |
|-------------|----|----|----|----|----|-----|-----|-----|-----|-----|

Demonstration Project for States Covering Workers with Potentially Severe Disabilities

| | | | | | | | | | | |
|-------------|-----|-----|-----|-----|-----|-----|---|---|---|---|
| HHS Outlays | -11 | -51 | -76 | -76 | -76 | -15 | 0 | 0 | 0 | 0 |
|-------------|-----|-----|-----|-----|-----|-----|---|---|---|---|

Extension of DI Demonstration Project Authority

| | | | | | | | | | | |
|----------------------|---|---|---|---|---|----|----|----|----|----|
| Disability Insurance | 0 | 0 | 0 | 0 | 0 | -3 | -5 | -5 | -5 | -5 |
|----------------------|---|---|---|---|---|----|----|----|----|----|

Provisions Affecting Prisoners

| | | | | | | | | | | |
|-------|----|----|-----|-----|-----|-----|-----|-----|-----|-----|
| OASDI | -2 | -9 | -10 | -10 | -10 | -10 | -10 | -10 | -10 | -10 |
|-------|----|----|-----|-----|-----|-----|-----|-----|-----|-----|

Attorney fee provision

| | | | | | | | | | | |
|----------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|
| Disability Insurance | -15 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 | -25 |
|----------------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|

Expansion of Medicaid Anti-fraud Authority

| | | | | | | | | | | |
|--|---|----|----|----|----|----|----|----|----|----|
| | 0 | -3 | -5 | -5 | -5 | -5 | -5 | -5 | -5 | -5 |
|--|---|----|----|----|----|----|----|----|----|----|

Restrict School-based Medicaid

| | | | | | | | | | | |
|--|-----------|------------|------------|------------|------------|------------|------------|------------|------------|------------|
| | <u>-3</u> | <u>-11</u> | <u>-16</u> | <u>-18</u> | <u>-22</u> | <u>-27</u> | <u>-32</u> | <u>-38</u> | <u>-45</u> | <u>-52</u> |
|--|-----------|------------|------------|------------|------------|------------|------------|------------|------------|------------|

| | | | | | | | | | | |
|-------|-----|------|------|------|------|------|-----|-----|-----|-----|
| Total | -54 | -146 | -185 | -182 | -176 | -121 | -94 | -78 | -68 | -49 |
|-------|-----|------|------|------|------|------|-----|-----|-----|-----|

H.R. 3070, as Reported

| | | | | | | | | | | |
|----------|----|-----|-----|----|-----|-----|-----|-----|-----|------|
| Outlays | -4 | -28 | -11 | 18 | 49 | 72 | 82 | 90 | 99 | 113 |
| Revenues | 3 | 8 | 10 | 10 | 10 | 11 | 11 | 11 | 11 | 12 |
| Surplus | 7 | 37 | 21 | -8 | -39 | -61 | -72 | -79 | -88 | -102 |

Notes: Components may not sum to totals due to rounding.

OASDI=Old-Age, Survivors, and Disability Insurance, DI=Disability Insurance, CDR=Continuing Disability Review, EPE=extended period of eligibility, HHS=Department of Health and Human Services

a. Less than \$500,000.

H.R. 3070 would authorize several new grant programs and other activities, subject to future appropriation action.

Title I would establish a Work Incentives Advisory Panel, authorize a new outreach program to be funded by grants to community-based organizations that work with the disabled, and authorize grants to each state's protection and advocacy program. Title II would establish two new grant programs to encourage states to provide better health care coverage to people with disabilities. (These two are identical to grant programs that would be established under S. 331, except that in the Senate-passed bill they would not be subject to future appropriation action.) Altogether, the new programs would be authorized to receive about \$0.6 billion in budget authority over the 2000-2004 period.

SSA would also incur greater administrative expenses to implement the new vocational rehabilitation program and other activities under the bill. CBO judges that those extra expenses would cost the agency between \$15 million and \$40 million a year.

PAY-AS-YOU-GO CONSIDERATIONS

The Balanced Budget and Emergency Deficit Control Act sets up pay-as-you-go procedures for legislation affecting direct spending or receipts. The net changes in outlays and governmental receipts that are subject to pay-as-you-go procedures are shown in Table 3. For the purposes of enforcing pay-as-you-go procedures, only the effects in the current year, the budget year, and the succeeding four years are counted.

TABLE 3.
SUMMARY OF THE PAY-AS-YOU-GO EFFECTS OF H.R.
3070

| | By Fiscal Year, in Millions of Dollars | | | | | | | | | |
|---------------------|--|------|------|------|------|------|------|------|------|------|
| | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 | 2009 |
| Changes in outlays | 12 | 7 | 22 | 43 | 70 | 99 | 130 | 143 | 152 | 166 |
| Changes in receipts | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

ESTIMATED IMPACT ON THE PRIVATE SECTOR

Provisions of the bill not excluded from consideration by UMRA include one private-sector mandate on insurers who provide medigap coverage to Medicare beneficiaries who are eligible because of disability. It would require such insurers to reinstate coverage that disabled beneficiaries had previously suspended because they had group health plan coverage, if the beneficiaries lose that group coverage and request reinstatement within 90 days of that loss. Because of restrictions on the premiums that could be charged for reinstated coverage, this provision could impose costs that insurers might not immediately recover from premiums. However, because of the small number of beneficiaries this provision would affect, the costs that might be imposed on medigap insurers would be well below the threshold specified in UMRA (\$100 million in 1996, adjusted annually for inflation).

ESTIMATED IMPACT ON STATE, LOCAL, AND TRIBAL GOVERNMENTS

Section 4 of the Unfunded Mandates Reform Act excludes from the application of that act any legislative provisions that relate to the Old-Age, Survivors, and Disability Insurance programs under title II of the Social Security Act, including tax provisions in the Internal Revenue Code. CBO has determined that the provisions of H.R. 3070 either fall within that exclusion or contain no intergovernmental mandates.

The bill includes optional programs for states that would result in greater state spending if they chose to participate as well as additional grants to states for specific programs. While the bill includes a number of optional expansions for Medicaid, additional requirements on how school districts bill Medicaid for health services would result in a cut in Medicaid funding for those purposes.

Title II contains a number of optional programs for states to expand their Medicaid program to cover workers with disabilities who want to buy into Medicaid and to continue Medicaid coverage for individuals who lose their eligibility for DI or SSI following a continuing disability review. CBO estimates that state costs attributable to these optional expansions during the first five years would total about \$70 million for the first option and about \$10 million for the second. States would also have the option of charging participants premiums or other fees to offset a portion of those costs. States that implement the first of these Medicaid options would be eligible for grants to develop and operate programs to support working individuals with disabilities. CBO estimates that states would receive a total of about \$40 million during the first five years the program is in effect.

Title II would also allow states to establish demonstration projects that would provide health services equal to those available under Medicaid to working individuals with physical or mental impairments who, without such services, could become blind or disabled. CBO estimates that state costs attributable to this optional coverage would total \$215 million over the first five years of implementation. Federal funding for these demonstration projects would be subject to annual appropriation.

Finally, new requirements on how school districts may bill Medicaid for health services would result in a decrease in federal Medicaid funding of \$70 million over the 2000-2004 period, as described in the Basis of Estimates section.

ESTIMATE PREPARED BY:

Federal Cost: Kathy Ruffing (DI and SSI), Jeanne De Sa and Dorothy Rosenbaum (Medicare and Medicaid), and Noah Meyerson (Social Security receipts)
Impact on State, Local, and Tribal Governments: Leo Lex
Impact on the Private Sector: Bruce Vavrichek

ESTIMATE APPROVED BY:

Robert A. Sunshine
Assistant Director for Budget Analysis

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of Budgetary and
Economic Terms](#)

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106TH CONGRESS
1ST SESSION

H. R. 1091

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MARCH 11, 1999

Mr. HULSHOF introduced the following bill; which was referred to the Committee on Ways and Means, and in addition to the Committee on Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To amend the Social Security Act to expand the availability of health care coverage for working individuals with disabilities, to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.**

2 (a) **SHORT TITLE.**—This Act may be cited as the
3 “Ticket to Work and Self-Sufficiency Act of 1999”.

4 (b) **TABLE OF CONTENTS.**—The table of contents is
5 as follows:

Sec. 1. Short title and table of contents.

TITLE I—EXPANDED AVAILABILITY OF HEALTH CARE SERVICES

Sec. 101. Expanding State options under Medicaid for workers with disabilities.

Sec. 102. Extending Medicare coverage for OASDI disability benefit recipients
who are using tickets to work and self-sufficiency.

Sec. 103. Grants to develop and establish State infrastructures to support
working individuals with disabilities.

Sec. 104. Demonstration of coverage of workers with potentially severe disabili-
ties.

TITLE II—TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

Sec. 201. Establishment of the Ticket to Work and Self-Sufficiency Program.

Sec. 202. Effective date.

Sec. 203. Graduated implementation of Program.

Sec. 204. The Ticket to Work and Self-Sufficiency Advisory Panel.

Sec. 205. Demonstration projects and studies.

TITLE III—TECHNICAL AMENDMENTS

Sec. 301. Technical amendments relating to drug addicts and alcoholics.

Sec. 302. Treatment of prisoners.

Sec. 303. Revocation by members of the clergy of exemption from social secu-
rity coverage.

Sec. 304. Additional technical amendment relating to cooperative research or
demonstration projects under titles II and XVI.

Sec. 305. Authorization for State to permit annual wage reports.

6 **TITLE I—EXPANDED AVAILABIL-**
7 **ITY OF HEALTH CARE SERV-**
8 **ICES**

9 **SEC. 101. EXPANDING STATE OPTIONS UNDER MEDICAID**
10 **FOR WORKERS WITH DISABILITIES.**

11 (a) **STATE OPTION TO ELIMINATE INCOME, ASSETS,**
12 **AND RESOURCE LIMITATIONS FOR WORKERS WITH DIS-**
13 **ABILITIES BUYING INTO MEDICAID.**—Section

1 1902(a)(10)(A)(ii) of the Social Security Act (42 U.S.C.
2 1396a(a)(10)(A)(ii)) is amended—

3 (1) in subclause (XIII), by striking “or” at the
4 end;

5 (2) in subclause (XIV), by adding “or” at the
6 end; and

7 (3) by adding at the end the following:

8 “(XV) who, but for earnings in
9 excess of the limit established under
10 section 1905(q)(2)(B), and subject to
11 limitations on assets, resources, or un-
12 earned income that may be set by the
13 State, would be considered to be re-
14 ceiving supplemental security income
15 (subject, notwithstanding section
16 1916, to payment of premiums or
17 other cost-sharing charges (set on a
18 sliding scale based on income that the
19 State may determine and that may re-
20 quire an individual with income that
21 exceeds 250 percent of the income of-
22 ficial poverty line (as defined by the
23 Office of Management and Budget,
24 and revised annually in accordance
25 with section 673(2) of the Omnibus

1 Budget Reconciliation Act of 1981)
 2 applicable to a family of the size in-
 3 volved to pay an amount equal to 100
 4 percent of the premium cost for pro-
 5 viding medical assistance to the indi-
 6 vidual), so long as any such premiums
 7 or other cost-sharing charges are the
 8 same as any premiums or other cost-
 9 sharing charges imposed for individ-
 10 uals described in subclause (XVI));”.

11 (b) STATE OPTION TO EXPAND OPPORTUNITIES FOR
 12 WORKERS WITH DISABILITIES TO BUY INTO MEDIC-
 13 AID.—

14 (1) ELIGIBILITY.—Section 1902(a)(10)(A)(ii)
 15 of the Social Security Act (42 U.S.C.
 16 1396a(a)(10)(A)(ii)), as amended by subsection (a),
 17 is amended—

18 (A) in subclause (XIV), by striking “or” at
 19 the end;

20 (B) in subclause (XV), by adding “or” at
 21 the end; and

22 (C) by adding at the end the following:

23 “(XVI) who are working individ-
 24 uals with disabilities described in sec-
 25 tion 1905(v) (subject, notwithstanding

1 section 1916, to payment of premiums
2 or other cost-sharing charges (set on
3 a sliding scale based on income) that
4 the State may determine so long as
5 any such premiums or other cost-shar-
6 ing charges are the same as any pre-
7 miums or other cost-sharing charges
8 imposed for individuals described in
9 subclause (XV)), but only if the State
10 provides medical assistance to individ-
11 uals described in subclause (XV);”.

12 (2) DEFINITION OF WORKING INDIVIDUALS
13 WITH DISABILITIES.—Section 1905 of the Social Se-
14 curity Act (42 U.S.C. 1396d) is amended by adding
15 at the end the following:

16 “(v)(1) The term ‘working individuals with disabil-
17 ities’ means individuals ages 16 through 64 who—

18 “(A) by reason of medical improvement, cease
19 to be eligible for benefits under section 223(d) or
20 1614(a)(3) at the time of a regularly scheduled con-
21 tinuing disability review but who continue to have a
22 severe medically determinable impairment; and

23 “(B) are employed.

24 “(2) An individual is considered to be ‘employed’ if
25 the individual—

1 “(A) is earning at least the applicable minimum
2 wage requirement under section 6 of the Fair Labor
3 Standards Act (29 U.S.C. 206) and working at least
4 40 hours per month; or

5 “(B) is engaged in a work effort that meets
6 substantial and reasonable threshold criteria for
7 hours of work, wages, or other measures, as defined
8 by the State and approved by the Secretary.”.

9 (3) CONFORMING AMENDMENT.—Section
10 1905(a) of the Social Security Act (42 U.S.C.
11 1396d(a)) is amended in the matter preceding para-
12 graph (1)—

13 (A) in clause (x), by striking “or” at the
14 end;

15 (B) in clause (xi), by adding “or” at the
16 end; and

17 (C) by inserting after clause (xi), the fol-
18 lowing:

19 “(xii) individuals described in subsection (v),”.

20 (c) PROHIBITION AGAINST SUPPLANTATION OF
21 STATE FUNDS; MAINTENANCE OF EFFORT REQUIRE-
22 MENT; CONDITION FOR APPROVAL OF STATE PLAN
23 AMENDMENT.—

24 (1) NO SUPPLANTATION OF STATE FUNDS.—

25 Federal funds paid to a State for medical assistance

1 provided to an individual described in subclause
2 (XV) or (XVI) of section 1902(a)(10)(A)(ii) of the
3 Social Security Act (42 U.S.C. 1396a(a)(10)(A)(ii))
4 must be used to supplement but not supplant the
5 level of State funds expended as of October 1, 1998
6 for programs to enable working individuals with dis-
7 abilities to work.

8 (2) MAINTENANCE OF EFFORT.—With respect
9 to a fiscal year quarter, no Federal funds may be
10 paid to a State for medical assistance provided to an
11 individual described in subclause (XV) or (XVI) of
12 section 1902(a)(10)(A)(ii) of the Social Security Act
13 (42 U.S.C. 1396a(a)(10)(A)(ii)) for such fiscal year
14 quarter if the Secretary of Health and Human Serv-
15 ices determines that the total of the State expendi-
16 tures for programs to enable working individuals
17 with disabilities to work for the preceding fiscal year
18 quarter is less than the total of such expenditures
19 for the same fiscal year quarter of the preceding fis-
20 cal year.

21 (3) CONDITION FOR APPROVAL OF STATE PLAN
22 AMENDMENTS.—No State plan amendment that pro-
23 poses to provide medical assistance to an individual
24 described in subclause (XV) or (XVI) of section
25 1902(a)(10)(A)(ii) of the Social Security Act (42

1 U.S.C. 1396a(a)(10)(A)(ii)) may be approved unless
2 the chief executive officer of the State certifies to
3 the Secretary of Health and Human Services that
4 the plan, as so amended, will satisfy the require-
5 ments of paragraphs (1) and (2) of this subsection.

6 (d) EFFECTIVE DATE.—

7 (1) IN GENERAL.—The amendments made by
8 this section shall apply on and after October 1,
9 1999.

10 (2) EXTENSION OF EFFECTIVE DATE FOR
11 STATE LAW AMENDMENT.—In the case of a State
12 plan under title XIX of the Social Security Act
13 which the Secretary of Health and Human Services
14 determines requires State legislation in order for the
15 plan to meet the additional requirements imposed by
16 the amendments made by this section, the State
17 plan shall not be regarded as failing to comply with
18 the requirements of this section solely on the basis
19 of its failure to meet these additional requirements
20 before the first day of the first calendar quarter be-
21 ginning after the close of the first regular session of
22 the State legislature that begins after the date of en-
23 actment of this Act. For purposes of the previous
24 sentence, in the case of a State that has a 2-year
25 legislative session, each year of the session is consid-

1 ered to be a separate regular session of the State
2 legislature.

3 **SEC. 102. EXTENDING MEDICARE COVERAGE FOR OASDI**
4 **DISABILITY BENEFIT RECIPIENTS WHO ARE**
5 **USING TICKETS TO WORK AND SELF-SUFFI-**
6 **CIENCY.**

7 (a) IN GENERAL.—The next to last sentence of sec-
8 tion 226(b) of the Social Security Act (42 U.S.C. 426)
9 is amended—

10 (1) by striking “throughout all of which” and
11 inserting “throughout the first 24 months of which”;
12 and

13 (2) by inserting after “but not in excess of 24
14 such months” the following: “(plus 24 additional
15 such months in the case of an individual who the
16 Commissioner determines is using a ticket to work
17 and self-sufficiency issued under section 1148, but
18 only for additional months that occur in the 7-year
19 period beginning on the date of the enactment of the
20 Ticket to Work and Self-Sufficiency Act of 1999)”.

21 (b) REPORT.—Not later than 6 months prior to the
22 end of the 7-year period beginning on the date of the en-
23 actment of this Act, the Secretary of Health and Human
24 Services and the Commissioner of Social Security shall
25 submit in writing to each House of the Congress their rec-

1 ommendations for further legislative action with respect
2 to the amendments made by subsection (a), taking into
3 account experience derived from efforts to achieve full im-
4 plementation of the Ticket to Work and Self Sufficiency
5 Program under section 1148 of the Social Security Act.

6 **SEC. 103. GRANTS TO DEVELOP AND ESTABLISH STATE IN-**
7 **FRASTRUCTURES TO SUPPORT WORKING IN-**
8 **DIVIDUALS WITH DISABILITIES.**

9 (a) ESTABLISHMENT.—

10 (1) IN GENERAL.—The Secretary of Health and
11 Human Services (in this section referred to as the
12 “Secretary”) shall award grants described in sub-
13 section (b) to States to support the design, establish-
14 ment, and operation of State infrastructures that
15 provide items and services to support working indi-
16 viduals with disabilities. A State may submit an ap-
17 plication for a grant authorized under this section at
18 such time, in such manner, and containing such in-
19 formation as the Secretary may determine.

20 (2) DEFINITION OF STATE.—In this section,
21 the term “State” means each of the 50 States, the
22 District of Columbia, Puerto Rico, Guam, the
23 United States Virgin Islands, American Samoa, and
24 the Commonwealth of the Northern Mariana Is-
25 lands.

1 (b) GRANTS FOR INFRASTRUCTURE AND OUT-
2 REACH.—

3 (1) IN GENERAL.—Out of the funds appro-
4 priated under subsection (e), the Secretary shall
5 award grants to States to—

6 (A) support the establishment, implemen-
7 tation, and operation of the State infrastruc-
8 tures described in subsection (a); and

9 (B) conduct outreach campaigns regarding
10 the existence of such infrastructures.

11 (2) ELIGIBILITY FOR GRANTS.—

12 (A) IN GENERAL.—No State may receive a
13 grant under this subsection unless—

14 (i) the State has an approved amend-
15 ment to the State plan under title XIX of
16 the Social Security Act (42 U.S.C. 1396 et
17 seq.) that—

18 (I) provides medical assistance
19 under such plan to individuals de-
20 scribed in section
21 1902(a)(10)(A)(ii)(XV) of the Social
22 Security Act (42 U.S.C.
23 1396a(a)(10)(A)(ii)(XV)); or

24 (II) provides medical assistance
25 under such plan to individuals de-

1 scribed in subclauses (XV) and (XVI)
2 of section 1902(a)(10)(A)(ii) of the
3 Social Security Act (42 U.S.C.
4 1396a(a)(10)(A)(ii)); and
5 (ii) the State demonstrates to the sat-
6 isfaction of the Secretary that the State
7 makes personal assistance services avail-
8 able under the State plan under title XIX
9 of the Social Security Act (42 U.S.C. 1396
10 et seq.) to the extent necessary to enable
11 individuals described in subclause (I) or
12 (II) of clause (i) to remain employed (as
13 determined under section 1905(v)(2) of the
14 Social Security Act (42 U.S.C.
15 1396d(v)(2)).

16 (B) DEFINITION OF PERSONAL ASSIST-
17 ANCE SERVICES.—In this paragraph, the term
18 “personal assistance services” means a range of
19 services, provided by 1 or more persons, de-
20 signed to assist an individual with a disability
21 to perform daily activities on and off the job
22 that the individual would typically perform if
23 the individual did not have a disability. Such
24 services shall be designed to increase the indi-

1 vidual’s control in life and ability to perform ev-
2 eryday activities on or off the job.

3 (3) DETERMINATION OF AWARDS.—

4 (A) IN GENERAL.—Subject to subpara-
5 graph (B), the Secretary shall determine a for-
6 mula for awarding grants to States under this
7 section that provides special consideration to
8 States that provide medical assistance under
9 title XIX of the Social Security Act to individ-
10 uals described in section
11 1902(a)(10)(A)(ii)(XVI) of that Act (42 U.S.C.
12 1396a(a)(10)(A)(ii)(XVI)).

13 (B) AWARD LIMITS.—

14 (i) MINIMUM AWARDS.—No State that
15 submits an approved application for fund-
16 ing under this section shall receive a grant
17 for a fiscal year that is less than \$500,000.

18 (ii) MAXIMUM AWARDS.—No State
19 that submits an approved application for
20 funding under this section shall receive a
21 grant for a fiscal year that exceeds 15 per-
22 cent of the total expenditures by the State
23 (including the reimbursed Federal share of
24 such expenditures) for medical assistance
25 for individuals eligible under subclause

1 (XV) or (XVI) of section
2 1902(a)(10)(A)(ii), whichever is greater, as
3 estimated by the State and approved by
4 the Secretary.

5 (c) AVAILABILITY OF FUNDS.—

6 (1) FUNDS ALLOCATED TO STATES.—Funds al-
7 located to a State under a grant made under this
8 section for a fiscal year shall remain available until
9 expended.

10 (2) FUNDS NOT ALLOCATED TO STATES.—

11 Funds not allocated to States in the fiscal year for
12 which they are appropriated shall remain available
13 in succeeding fiscal years for allocation by the Sec-
14 retary using the allocation formula established by
15 the Secretary under subsection (c)(3)(A).

16 (d) ANNUAL REPORT.—A State that receives a grant

17 under this section shall submit an annual report to the
18 Secretary on the use of funds provided under the grant.

19 Each report shall include the percentage increase in the
20 number of title II disability beneficiaries, as defined in sec-

21 tion 1148(k)(2) of the Social Security Act (as amended
22 by section 201) in the State, and title XVI disability bene-

23 ficiaries, as defined in section 1148(k)(3) of the Social Se-
24 curity Act (as so amended) in the State who return to

25 work.

1 (e) APPROPRIATION.—Out of any funds in the Treas-
2 ury not otherwise appropriated, there is authorized to be
3 appropriated and there is appropriated to make grants
4 under this section—

5 (1) for fiscal year 2000, \$20,000,000;

6 (2) for fiscal year 2001, \$25,000,000;

7 (3) for fiscal year 2002, \$30,000,000;

8 (4) for fiscal year 2003, \$35,000,000;

9 (5) for fiscal year 2004, \$40,000,000; and

10 (6) for fiscal years 2005 through 2010, the
11 amount appropriated for the preceding fiscal year
12 increased by the percentage increase (if any) in the
13 Consumer Price Index for All Urban Consumers
14 (United States city average) for the preceding fiscal
15 year.

16 (f) RECOMMENDATION.—Not later than October 1,
17 2009, the Secretary of Health and Human Services, in
18 consultation with the Ticket to Work and Self-Sufficiency
19 Advisory Panel established under section 202, shall submit
20 a recommendation to the Committee on Commerce and the
21 Committee on Ways and Means of the House of Rep-
22 resentatives and the Committee on Finance of the Senate
23 regarding whether the grant program established under
24 this section should be continued after fiscal year 2010.

1 **SEC. 104. DEMONSTRATION OF COVERAGE OF WORKERS**
2 **WITH POTENTIALLY SEVERE DISABILITIES.**

3 (a) STATE APPLICATION.—A State may apply to the
4 Secretary of Health and Human Services (in this section
5 referred to as the “Secretary”) for approval of a dem-
6 onstration project (in this section referred to as a “dem-
7 onstration project”) under which up to a specified maxi-
8 mum number of individuals who are workers with a poten-
9 tially severe disability (as defined in subsection (b)(1)) are
10 provided medical assistance equal to that provided under
11 section 1905(a) of the Social Security Act (42 U.S.C.
12 1396d(a)) to individuals described in section
13 1902(a)(10)(A)(ii)(XV) of that Act (42 U.S.C.
14 1396a(a)(10)(A)(ii)(XV)).

15 (b) WORKER WITH A POTENTIALLY SEVERE DIS-
16 ABILITY DEFINED.—For purposes of this section—

17 (1) IN GENERAL.—The term “worker with a
18 potentially severe disability” means, with respect to
19 a demonstration project, an individual who—

20 (A) is at least 16, but less than 65, years
21 of age;

22 (B) has a specific physical or mental im-
23 pairment that, as defined by the State under
24 the demonstration project, is reasonably ex-
25 pected, but for the receipt of items and services
26 described in section 1905(a) of the Social Secu-

1 rity Act, to become blind or disabled (as defined
2 under section 1614(a) of the Social Security
3 Act); and

4 (C) is employed (as defined in paragraph
5 (2)).

6 (2) DEFINITION OF EMPLOYED.—An individual
7 is considered to be “employed” if the individual—

8 (A) is earning at least the applicable mini-
9 mum wage requirement under section 6 of the
10 Fair Labor Standards Act (29 U.S.C. 206) and
11 working at least 40 hours per month; or

12 (B) is engaged in a work effort that meets
13 substantial and reasonable threshold criteria for
14 hours of work, wages, or other measures, as de-
15 fined under the demonstration project and ap-
16 proved by the Secretary.

17 (c) APPROVAL OF DEMONSTRATION PROJECTS.—

18 (1) IN GENERAL.—Subject to paragraph (3),
19 the Secretary shall approve applications under sub-
20 section (a) that meet the requirements of paragraph
21 (2) and such additional terms and conditions as the
22 Secretary may require. The Secretary may waive the
23 requirement of section 1902(a)(1) of the Social Se-
24 curity Act (42 U.S.C. 1396a(a)(1)) to allow for sub-
25 State demonstrations.

1 (2) TERMS AND CONDITIONS OF DEMONSTRA-
2 TION PROJECTS.—The Secretary may not approve a
3 demonstration project under this section unless the
4 State provides assurances satisfactory to the Sec-
5 retary that the following conditions are or will be
6 met:

7 (A) ELECTION OF OPTIONAL CATEGORY.—

8 The State has elected to provide coverage under
9 its plan under title XIX of the Social Security
10 Act of individuals described in section
11 1902(a)(10)(A)(ii)(XV) of the Social Security
12 Act.

13 (B) MAINTENANCE OF STATE EFFORT.—

14 Federal funds paid to a State pursuant to this
15 section must be used to supplement, but not
16 supplant, the level of State funds expended for
17 workers with potentially severe disabilities
18 under programs in effect for such individuals at
19 the time the demonstration project is approved
20 under this section.

21 (C) INDEPENDENT EVALUATION.—The

22 State provides for an independent evaluation of
23 the project.

24 (3) LIMITATIONS ON FEDERAL FUNDING.—

1 (A) APPROPRIATION.—Out of any funds in
2 the Treasury not otherwise appropriated, there
3 is authorized to be appropriated and there is
4 appropriated to carry out this section—

5 (i) for fiscal year 2000, \$70,000,000;

6 (ii) for fiscal year 2001, \$73,000,000;

7 (iii) for fiscal year 2002, \$77,000,000;

8 and

9 (iv) for fiscal year 2003, \$80,000,000.

10 (B) LIMITATION ON PAYMENTS.—In no
11 case may—

12 (i) the aggregate amount of payment
13 made by the Secretary to States under this
14 section exceed \$300,000,000; or

15 (ii) payment be provided by the Sec-
16 retary for a fiscal year after fiscal year
17 2005.

18 (C) FUNDS ALLOCATED TO STATES.—The
19 Secretary shall allocate funds to States based
20 on their applications and the availability of
21 funds. Funds allocated to a State under a grant
22 made under this section for a fiscal year shall
23 remain available until expended.

24 (D) FUNDS NOT ALLOCATED TO STATES.—
25 Funds not allocated to States in the fiscal year

1 for which they are appropriated shall remain
2 available in succeeding fiscal years for alloca-
3 tion by the Secretary using the allocation for-
4 mula established under this section.

5 (E) PAYMENTS TO STATES.—Subject to
6 the succeeding provisions of this section, the
7 Secretary shall pay to each State with a dem-
8 onstration project approved under this section,
9 from its allocation under subparagraph (C), an
10 amount for each quarter equal to the Federal
11 medical assistance percentage (as defined in
12 section 1905(b) of the Social Security Act (42
13 U.S.C. 1395d(b)) of expenditures in the quarter
14 for medical assistance provided to workers with
15 a potentially severe disability.

16 (d) STATE DEFINED.—In this section, the term
17 “State” has the meaning given such term for purposes of
18 title XIX of the Social Security Act.

19 **TITLE II—TICKET TO WORK AND**
20 **SELF-SUFFICIENCY PROGRAM**

21 **SEC. 201. ESTABLISHMENT OF THE TICKET TO WORK AND**
22 **SELF-SUFFICIENCY PROGRAM.**

23 (a) IN GENERAL.—Part A of title XI of the Social
24 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
25 ing at the end the following new section:

1 provided in paragraph (4)) an employment network,
2 which is serving under the Program and to which
3 such ticket is assigned by the beneficiary, for such
4 employment services, vocational rehabilitation serv-
5 ices, and other support services as the employment
6 network may provide to the beneficiary.

7 “(4) PAYMENTS TO EMPLOYMENT NET-
8 WORKS.—The Commissioner shall pay an employ-
9 ment network under the Program in accordance with
10 the outcome payment system under subsection
11 (h)(2) or under the outcome-milestone payment sys-
12 tem under subsection (h)(3) (whichever is elected
13 pursuant to subsection (h)(1)). An employment net-
14 work may not request or receive compensation for
15 such services from the beneficiary.

16 “(c) STATE PARTICIPATION.—

17 “(1) PERIODIC ELECTIONS.—Each State agen-
18 cy administering or supervising the administration
19 of the State plan approved under title I of the Reha-
20 bilitation act of 1973 may elect to participate in the
21 Program (or to revoke any such election) as an em-
22 ployment network. The Commissioner shall provide
23 for periodic opportunities for exercising such elec-
24 tions (and revocations).

1 “(2) TREATMENT OF STATE AGENCIES.—Any
2 such election (or revocation) by a State agency de-
3 scribed in paragraph (1) taking effect during any
4 period for which an individual residing in the State
5 is a disabled beneficiary and a client of the State
6 agency shall not be effective with respect to such in-
7 dividual to the extent that such election (or revoca-
8 tion) would result in any change in the method of
9 payment to the State agency with respect to the in-
10 dividual from the method of payment to the State
11 agency with respect to the individual in effect imme-
12 diately before such election (or revocation).

13 “(3) EFFECT OF PARTICIPATION BY STATE
14 AGENCY.—

15 “(A) STATE AGENCIES PARTICIPATING.—

16 In any case in which a State agency described
17 in paragraph (1) elects under paragraph (1) to
18 participate in the Program—

19 “(i) the employment services, voca-
20 tional rehabilitation services, and other
21 support services which, upon assignment of
22 tickets to work and self-sufficiency, are
23 provided to disabled beneficiaries by the
24 State agency acting as an employment net-
25 work shall be governed by plans for voca-

1 tional rehabilitation services approved
2 under title I of the Rehabilitation Act of
3 1973; and

4 “(ii) the provisions of section 222(d)
5 and the provisions of subsections (d) and
6 (e) of section 1615 shall not apply with re-
7 spect to such State.

8 “(B) STATE AGENCIES ADMINISTERING
9 MATERNAL AND CHILD HEALTH SERVICES PRO-
10 GRAMS.—Subparagraph (A) shall not apply
11 with respect to any State agency administering
12 a program under title V of this Act.

13 “(4) SPECIAL REQUIREMENTS APPLICABLE TO
14 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

15 “(A) IN GENERAL.—In any case in which
16 an employment network has been assigned a
17 ticket to work and self-sufficiency by a disabled
18 beneficiary, no State agency shall be deemed re-
19 quired, under this section, title I of the Reha-
20 bilitation Act of 1973, or a State plan approved
21 under such title, to accept any referral of such
22 disabled beneficiary from such employment net-
23 work unless such employment network and such
24 State agency have entered into a written agree-

1 ment that meets the requirements of subpara-
2 graph (B).

3 “(B) TERMS OF AGREEMENT.—An agree-
4 ment required by subparagraph (A) shall speci-
5 fy, in accordance with regulations prescribed
6 pursuant to subparagraph (C)—

7 “(i) the extent (if any) to which the
8 employment network holding the ticket will
9 provide to the State agency—

10 “(I) reimbursement for costs in-
11 curred in providing services described
12 in subparagraph (A) to the disabled
13 beneficiary; and

14 “(II) other amounts from pay-
15 ments made by the Commissioner to
16 the employment network pursuant to
17 subsection (h); and

18 “(ii) any other conditions that may be
19 required by such regulations.

20 “(C) REGULATIONS.—The Commissioner
21 of Social Security and the Secretary of Edu-
22 cation shall jointly prescribe regulations specify-
23 ing the terms of agreements required by sub-
24 paragraph (A) and otherwise necessary to carry
25 out the provisions of this paragraph.

1 “(D) PENALTY.—No payment may be
2 made to an employment network pursuant to
3 subsection (h) in connection with services pro-
4 vided to any disabled beneficiary if such em-
5 ployment network makes referrals described in
6 subparagraph (A) in violation of the terms of
7 the contract required under subparagraph (A)
8 or without having entered into such a contract.

9 “(d) RESPONSIBILITIES OF THE COMMISSIONER OF
10 SOCIAL SECURITY.—

11 “(1) SELECTION AND QUALIFICATIONS OF PRO-
12 GRAM MANAGERS.—The Commissioner of Social Se-
13 curity shall enter into agreements with one or more
14 organizations in the private or public sector for serv-
15 ice as a program manager to assist the Commis-
16 sioner in administering the Program. Any such pro-
17 gram manager shall be selected by means of a com-
18 petitive bidding process, from among organizations
19 in the private or public sector with available exper-
20 tise and experience in the field of vocational rehabili-
21 tation or employment services.

22 “(2) TENURE, RENEWAL, AND EARLY TERMI-
23 NATION.—Each agreement entered into under para-
24 graph (1) shall provide for early termination upon
25 failure to meet performance standards which shall be

1 specified in the agreement and which shall be
2 weighted to take into account any performance in
3 prior terms. Such performance standards shall in-
4 clude (but are not limited to)—

5 “(A) measures for ease of access by bene-
6 ficiaries to services; and

7 “(B) measures for determining the extent
8 to which failures in obtaining services for bene-
9 ficiaries fall within acceptable parameters, as
10 determined by the Commissioner.

11 “(3) PRECLUSION FROM DIRECT PARTICIPA-
12 TION IN DELIVERY OF SERVICES IN OWN SERVICE
13 AREA.—Agreements under paragraph (1) shall
14 preclude—

15 “(A) direct participation by a program
16 manager in the delivery of employment services,
17 vocational rehabilitation services, or other sup-
18 port services to beneficiaries in the service area
19 covered by the program manager’s agreement;
20 and

21 “(B) the holding by a program manager of
22 a financial interest in an employment network
23 or service provider which provides services in a
24 geographic area covered under the program
25 manager’s agreement.

1 “(4) SELECTION OF EMPLOYMENT NET-
2 WORKS.—The Commissioner shall select and enter
3 into agreements with employment networks for serv-
4 ice under the Program. Such employment networks
5 shall be in addition to State agencies serving as em-
6 ployment networks pursuant to elections under sub-
7 section (c).

8 “(5) TERMINATION OF AGREEMENTS WITH EM-
9 PLOYMENT NETWORKS.—The Commissioner shall
10 terminate agreements with employment networks for
11 inadequate performance, as determined by the Com-
12 missioner.

13 “(6) QUALITY ASSURANCE.—The Commissioner
14 shall provide for such periodic reviews as are nec-
15 essary to provide for effective quality assurance in
16 the provision of services by employment networks.
17 The Commissioner shall take into account the views
18 of consumers and the program manager under which
19 the employment networks serve and shall consult
20 with providers of services to develop performance
21 measurements. The Commissioner shall ensure that
22 the results of the periodic reviews are made available
23 to beneficiaries who are prospective service recipients
24 as they select employment networks. The Commis-
25 sioner shall ensure the performance of periodic sur-

1 veys of beneficiaries receiving services under the
2 Program designed to measure customer service satis-
3 faction.

4 “(7) DISPUTE RESOLUTION.—The Commis-
5 sioner shall provide for a mechanism for resolving
6 disputes between beneficiaries and employment net-
7 works and between program managers and employ-
8 ment networks. The Commissioner shall afford a
9 party to such a dispute a reasonable opportunity for
10 a full and fair review of the matter in dispute.

11 “(e) PROGRAM MANAGERS.—

12 “(1) IN GENERAL.—A program manager shall
13 conduct tasks appropriate to assist the Commis-
14 sioner in carrying out the Commissioner’s duties in
15 administering the Program.

16 “(2) RECRUITMENT OF EMPLOYMENT NET-
17 WORKS.—A program manager shall recruit, and rec-
18 ommend for selection by the Commissioner, employ-
19 ment networks for service under the Program. The
20 program manager shall carry out such recruitment
21 and provide such recommendations, and shall mon-
22 itor all employment networks serving in the Program
23 in the geographic area covered under the program
24 manager’s agreement, to the extent necessary and
25 appropriate to ensure that adequate choices of serv-

1 ices are made available to beneficiaries. Employment
2 networks may serve under the Program only pursu-
3 ant to an agreement entered into with the Commis-
4 sioner under the Program incorporating the applica-
5 ble provisions of this section and regulations there-
6 under, and the program manager shall provide and
7 maintain assurances to the Commissioner that pay-
8 ment by the Commissioner to employment networks
9 pursuant to this section is warranted based on com-
10 pliance by such employment networks with the terms
11 of such agreement and this section. The program
12 manager shall not impose numerical limits on the
13 number of employment networks to be recommended
14 pursuant to this paragraph.

15 “(3) FACILITATION OF ACCESS BY BENE-
16 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
17 gram manager shall facilitate access by beneficiaries
18 to employment networks. The program manager
19 shall ensure that each beneficiary is allowed changes
20 in employment networks for good cause, as deter-
21 mined by the Commissioner, without being deemed
22 to have rejected services under the Program. The
23 program manager shall establish and maintain lists
24 of employment networks available to beneficiaries
25 and shall make such lists generally available to the

1 public. The program manager shall ensure that all
2 information provided to disabled beneficiaries pursu-
3 ant to this paragraph is provided in accessible for-
4 mat.

5 “(4) ENSURING AVAILABILITY OF ADEQUATE
6 SERVICES.—The program manager shall ensure that
7 employment services, vocational rehabilitation serv-
8 ices, and other support services are provided to
9 beneficiaries throughout the geographic area covered
10 under the program manager’s agreement, including
11 rural areas.

12 “(5) REASONABLE ACCESS TO SERVICES.—The
13 program manager shall take such measures as are
14 necessary to ensure that sufficient employment net-
15 works are available and that each beneficiary receiv-
16 ing services under the Program has reasonable ac-
17 cess to employment services, vocational rehabilitation
18 services, and other support services. Such services
19 may include case management, benefits counseling,
20 supported employment, career planning, career plan
21 development, vocational assessment, job training,
22 placement, follow-up services, and such other serv-
23 ices as may be specified by the Commissioner under
24 the Program. The program manager shall ensure
25 that such services are coordinated.

1 “(f) EMPLOYMENT NETWORKS.—

2 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
3 WORKS.—Each employment network serving under
4 the Program shall consist of an agency or instru-
5 mentality of a State (or a political subdivision there-
6 of) or a private entity, which assumes responsibility
7 for the coordination and delivery of services under
8 the Program to individuals assigning to the employ-
9 ment network tickets to work and self-sufficiency
10 issued under subsection (b). No employment network
11 may serve under the Program unless it demonstrates
12 to the Commissioner substantial expertise and expe-
13 rience in the field of employment services, vocational
14 rehabilitation services, or other support services for
15 individuals with disabilities and provides an array of
16 such services. An employment network shall consist
17 of either a single provider of such services or of an
18 association of such providers organized so as to com-
19 bine their resources into a single entity. An employ-
20 ment network may meet the requirements of sub-
21 section (e)(4) by providing services directly, or by
22 entering into agreements with other individuals or
23 entities providing appropriate employment services,
24 vocational rehabilitation services, or other support
25 services.

1 “(2) REQUIREMENTS RELATING TO PROVISION
2 OF SERVICES.—Each employment network serving
3 under the Program shall be required under the
4 terms of its agreement with the Commissioner to—

5 “(A) serve prescribed service areas;

6 “(B) meet, and maintain compliance with,
7 both general selection criteria (such as profes-
8 sional and governmental certification and edu-
9 cational credentials) and specific selection cri-
10 teria (such as the extent of work experience by
11 the provider with specific populations); and

12 “(C) take such measures as are necessary
13 to ensure that employment services, vocational
14 rehabilitation services, and other support serv-
15 ices provided under the Program by, or under
16 agreements entered into with, the employment
17 network are provided under appropriate individ-
18 ual work plans meeting the requirements of
19 subsection (g).

20 “(3) ANNUAL FINANCIAL REPORTING.—Each
21 employment network shall meet financial reporting
22 requirements as prescribed by the Commissioner.

23 “(4) PERIODIC OUTCOMES REPORTING.—Each
24 employment network shall prepare periodic reports,
25 on at least an annual basis, itemizing for the covered

1 period specific outcomes achieved with respect to
2 specific services provided by the employment net-
3 work. Such reports shall conform to a national
4 model prescribed under this section. Each employ-
5 ment network shall provide a copy of the latest re-
6 port issued by the employment network pursuant to
7 this paragraph to each beneficiary upon enrollment
8 under the Program for services to be received
9 through such employment network. Upon issuance of
10 each report to each beneficiary, a copy of the report
11 shall be maintained in the files of the employment
12 network pertaining to the beneficiary. The program
13 manager shall ensure that copies of all such reports
14 issued under this paragraph are made available to
15 the public under reasonable terms.

16 “(g) INDIVIDUAL WORK PLANS.—

17 “(1) IN GENERAL.—Each employment network
18 shall—

19 “(A) take such measures as are necessary
20 to ensure that employment services, vocational
21 rehabilitation services, and other support serv-
22 ices provided under the Program by, or under
23 agreements entered into with, the employment
24 network are provided under appropriate individ-

1 ual work plans as defined by the Commissioner;
2 and

3 “(B) develop and implement each such in-
4 dividual work plan, in the case of each bene-
5 ficiary receiving such services, in a manner that
6 affords such beneficiary the opportunity to ex-
7 ercise informed choice in selecting an employ-
8 ment goal and specific services needed to
9 achieve that employment goal.

10 A beneficiary’s individual work plan shall take effect
11 upon approval by the beneficiary.

12 “(2) VOCATIONAL EVALUATION.—In devising
13 the work plan, the employment network shall under-
14 take a vocational evaluation with respect to the ben-
15 eficiary. Each vocational evaluation shall set forth in
16 writing such elements and shall be in such format as
17 the Commissioner shall prescribe. The Commissioner
18 may provide for waiver by the beneficiary of such a
19 vocational evaluation, subject to regulations which
20 shall be prescribed by the Commissioner providing
21 for the permissible timing of, and the circumstances
22 permitting, such a waiver.

23 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

24 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
25 PLOYMENT NETWORKS.—

1 “(A) IN GENERAL.—The Program shall
2 provide for payment authorized by the Commis-
3 sioner to employment networks under either an
4 outcome payment system or an outcome-mile-
5 stone payment system. Each employment net-
6 work shall elect which payment system will be
7 utilized by the employment network, and, for
8 such period of time as such election remains in
9 effect, the payment system so elected shall be
10 utilized exclusively in connection with such em-
11 ployment network (except as provided in sub-
12 paragraph (B)).

13 “(B) METHOD OF PAYMENT TO EMPLOY-
14 MENT NETWORKS.—Any such election by an
15 employment network taking effect during any
16 period for which a disabled beneficiary is receiv-
17 ing services from such employment network
18 shall not be effective with respect to such bene-
19 ficiary to the extent that such election would re-
20 sult in any change in the method of payment to
21 the employment network with respect to serv-
22 ices provided to such beneficiary from the meth-
23 od of payment to the employment network with
24 respect to services provided to such beneficiary
25 as of immediately before such election.

1 “(2) OUTCOME PAYMENT SYSTEM.—

2 “(A) IN GENERAL.—The outcome payment
3 system shall consist of a payment structure gov-
4 erning employment networks electing such sys-
5 tem under paragraph (1)(A) which meets the
6 requirements of this paragraph.

7 “(B) PAYMENTS MADE DURING OUTCOME
8 PAYMENT PERIOD.—The outcome payment sys-
9 tem shall provide for a schedule of payments to
10 an employment network, in connection with
11 each individual who is a beneficiary, for each
12 month, during the individual’s outcome pay-
13 ment period, for which benefits (described in
14 paragraphs (2) and (3) of subsection (k)) are
15 not payable to such individual.

16 “(C) COMPUTATION OF PAYMENTS TO EM-
17 PLOYMENT NETWORK.—The payment schedule
18 of the outcome payment system shall be de-
19 signed so that—

20 “(i) the payment for each of the 60
21 months during the outcome payment pe-
22 riod for which benefits (described in para-
23 graphs (2) and (3) of subsection (k)) are
24 not payable is equal to a fixed percentage
25 of the payment calculation base for the cal-

1 endar year in which such month occurs;
2 and

3 “(ii) such fixed percentage is set at a
4 percentage which does not exceed 40 per-
5 cent.

6 “(3) OUTCOME-MILESTONE PAYMENT SYS-
7 TEM.—

8 “(A) IN GENERAL.—The outcome-mile-
9 stone payment system shall consist of a pay-
10 ment structure governing employment networks
11 electing such system under paragraph (1)(A)
12 which meets the requirements of this para-
13 graph.

14 “(B) EARLY PAYMENTS UPON ATTAIN-
15 MENT OF MILESTONES IN ADVANCE OF OUT-
16 COME PAYMENT PERIODS.—The outcome-mile-
17 stone payment system shall provide for one or
18 more milestones, with respect to beneficiaries
19 receiving services from an employment network
20 under the Program, which are directed toward
21 the goal of permanent employment. Such mile-
22 stones shall form a part of a payment structure
23 which provides, in addition to payments made
24 during outcome payment periods, payments
25 made prior to outcome payment periods in

1 amounts based on the attainment of such mile-
2 stones.

3 “(C) LIMITATION ON TOTAL PAYMENTS TO
4 EMPLOYMENT NETWORK.—The payment sched-
5 ule of the outcome milestone payment system
6 shall be designed so that the total of the pay-
7 ments to the employment network with respect
8 to each beneficiary is less than, on a net
9 present value basis (using an interest rate de-
10 termined by the Commissioner that appro-
11 priately reflects the cost of funds faced by pro-
12 viders), the total amount to which payments to
13 the employment network with respect to the
14 beneficiary would be limited if the employment
15 network were paid under the outcome payment
16 system.

17 “(4) DEFINITIONS.—For purposes of this
18 subsection—

19 “(A) PAYMENT CALCULATION BASE.—The
20 term ‘payment calculation base’ means, for any
21 calendar year—

22 “(i) in connection with a title II dis-
23 ability beneficiary, the average disability
24 insurance benefit payable under section

1 223 for all beneficiaries for months during
2 the preceding calendar year; and

3 “(ii) in connection with a title XVI
4 disability beneficiary (who is not concur-
5 rently a title II disability beneficiary), the
6 average payment of supplemental security
7 income benefits based on disability payable
8 under title XVI (excluding State sup-
9 plementation) for months during the pre-
10 ceding calendar year to all beneficiaries
11 who have attained at least 18 years of age.

12 “(B) OUTCOME PAYMENT PERIOD.—The
13 term ‘outcome payment period’ means, in con-
14 nection with any individual who had assigned a
15 ticket to work and self-sufficiency to an employ-
16 ment network under the Program, a period—

17 “(i) beginning with the first month,
18 ending after the date on which such ticket
19 was assigned to the employment network,
20 for which benefits (described in paragraphs
21 (2) and (3) of subsection (k)) are not pay-
22 able to such individual by reason of en-
23 gagement in work activity; and

24 “(ii) ending with the 60th month
25 (consecutive or otherwise), ending after

1 such date, for which such benefits are not
2 payable to such individual by reason of en-
3 gagement in work activity.

4 “(5) PERIODIC REVIEW AND ALTERATIONS OF
5 PRESCRIBED SCHEDULES.—

6 “(A) PERCENTAGES AND PERIODS.—The
7 Commissioner of Social Security shall periodi-
8 cally review the percentage specified in para-
9 graph (2)(C), the total payments permissible
10 under paragraph (3)(C), and the period of time
11 specified in paragraph (4)(B) to determine
12 whether such percentages, such permissible pay-
13 ments, and such period provide an adequate in-
14 centive for employment networks to assist bene-
15 ficiaries to enter the workforce, while providing
16 for appropriate economies. The Commissioner
17 may alter such percentage, such total permis-
18 sible payments, or such period of time to the
19 extent that the Commissioner determines, on
20 the basis of the Commissioner’s review under
21 this paragraph, that such an alteration would
22 better provide the incentive and economies de-
23 scribed in the preceding sentence.

24 “(B) NUMBER AND AMOUNT OF MILE-
25 STONE PAYMENTS.—The Commissioner shall

1 periodically review the number and amounts of
2 milestone payments established by the Commis-
3 sioner pursuant to this section to determine
4 whether they provide an adequate incentive for
5 employment networks to assist beneficiaries to
6 enter the workforce, taking into account infor-
7 mation provided to the Commissioner by pro-
8 gram managers, the Ticket to Work and Self-
9 Sufficiency Advisory Panel, and other reliable
10 sources. The Commissioner may from time to
11 time alter the number and amounts of mile-
12 stone payments initially established by the
13 Commissioner pursuant to this section to the
14 extent that the Commissioner determines that
15 such an alteration would allow an adequate in-
16 centive for employment networks to assist bene-
17 ficiaries to enter the workforce. Such alteration
18 shall be based on information provided to the
19 Commissioner by program managers, the Ticket
20 to Work and Self-Sufficiency Advisory Panel, or
21 other reliable sources.

22 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
23 any period for which an individual is using a ticket to work
24 and self-sufficiency issued under this section, the Commis-
25 sioner (and any applicable State agency) may not initiate

1 a continuing disability review or other review under section
2 221 of whether the individual is or is not under a disability
3 or a review under title XVI similar to any such review
4 under section 221.

5 “(j) AUTHORIZATIONS.—

6 “(1) TITLE II DISABILITY BENEFICIARIES.—

7 There are authorized to be transferred from the
8 Federal Old-Age and Survivors Insurance Trust
9 Fund and the Federal Disability Insurance Trust
10 Fund each fiscal year such sums as may be nec-
11 essary to carry out the provisions of this section
12 with respect to title II disability beneficiaries. Money
13 paid from the Trust Funds under this section with
14 respect to title II disability beneficiaries who are en-
15 titled to benefits under section 223 or who are enti-
16 tled to benefits under section 202(d) on the basis of
17 the wages and self-employment income of such bene-
18 ficiaries, shall be charged to the Federal Disability
19 Insurance Trust Fund, and all other money paid
20 from the Trust Funds under this section shall be
21 charged to the Federal Old-Age and Survivors Insur-
22 ance Trust Fund. The Commissioner of Social Secu-
23 rity shall determine according to such methods and
24 procedures as shall be prescribed under this
25 section—

1 “(A) the total amount to be paid to pro-
2 gram managers and employment networks
3 under this section; and

4 “(B) subject to the provisions of the pre-
5 ceding sentence, the amount which should be
6 charged to each of the Trust Funds.

7 “(2) TITLE XVI DISABILITY BENEFICIARIES.—
8 Amounts authorized to be appropriated to the Social
9 Security Administration under section 1601 (as in
10 effect pursuant to the amendments made by section
11 301 of the Social Security Amendments of 1972)
12 shall include amounts necessary to carry out the
13 provisions of this section with respect to title XVI
14 disability beneficiaries.

15 “(k) DEFINITIONS.—For purposes of this section—

16 “(1) DISABLED BENEFICIARY.—The term ‘dis-
17 abled beneficiary’ means a title II disability bene-
18 ficiary or a title XVI disability beneficiary.

19 “(2) TITLE II DISABILITY BENEFICIARY.—The
20 term ‘title II disability beneficiary’ means an individ-
21 ual entitled to disability insurance benefits under
22 section 223 or to monthly insurance benefits under
23 section 202 based on such individual’s disability (as
24 defined in section 223(d)). An individual is a title II

1 disability beneficiary for each month for which such
2 individual is entitled to such benefits.

3 “(3) TITLE XVI DISABILITY BENEFICIARY.—

4 The term ‘title XVI disability beneficiary’ means an
5 individual eligible for supplemental security income
6 benefits under title XVI on the basis of blindness
7 (within the meaning of section 1614(a)(2)) or dis-
8 ability (within the meaning of section 1614(a)(3)).
9 An individual is a title XVI disability beneficiary for
10 each month for which such individual is eligible for
11 such benefits.

12 “(4) SUPPLEMENTAL SECURITY INCOME BENE-
13 FIT.—The term ‘supplemental security income bene-
14 fit under title XVI’ means a cash benefit under sec-
15 tion 1611 or 1619(a), and does not include a State
16 supplementary payment, administered federally or
17 otherwise.

18 “(l) REGULATIONS.—The Commissioner of Social Se-
19 curity shall prescribe such regulations as are necessary to
20 carry out the provisions of this section.”.

21 (b) CONFORMING AMENDMENTS.—

22 (1) AMENDMENTS TO TITLE II.—

23 (A) Section 221(c) of such Act (42 U.S.C.
24 421(c)) is amended by adding at the end the
25 following new paragraph:

1 “(4) For suspension of reviews under this subsection
2 in the case of an individual using a ticket to work and
3 self-sufficiency, see section 1148(i).”.

4 (B) Section 222(a) of such Act (42 U.S.C.
5 422(a)) is repealed.

6 (C) Section 222(b) of such Act (42 U.S.C.
7 422(b)) is repealed.

8 (D) Section 225(b)(1) of such Act (42
9 U.S.C. 425(b)(1)) is amended by striking “a
10 program of vocational rehabilitation services”
11 and inserting “a program consisting of the
12 Ticket to Work and Self-Sufficiency Program
13 under section 1148 or another program of voca-
14 tional rehabilitation services, employment serv-
15 ices, or other support services”.

16 (2) AMENDMENTS TO TITLE XVI.—

17 (A) Section 1615(a) of such Act (42
18 U.S.C. 1382d(a)) is amended to read as follows:

19 “SEC. 1615. (a) In the case of any blind or disabled
20 individual who—

21 “(1) has not attained age 16; and

22 “(2) with respect to whom benefits are paid
23 under this title,

1 the Commissioner of Social Security shall make provision
2 for referral of such individual to the appropriate State
3 agency administering the State program under title V.”.

4 (B) Section 1615(c) of such Act (42
5 U.S.C. 1382d(e)) is repealed.

6 (C) Section 1631(a)(6)(A) of such Act (42
7 U.S.C. 1383(a)(6)(A)) is amended by striking
8 “a program of vocational rehabilitation serv-
9 ices” and inserting “a program consisting of
10 the Ticket to Work and Self-Sufficiency Pro-
11 gram under section 1148 or another program of
12 vocational rehabilitation services, employment
13 services, or other support services”.

14 (D) Section 1633(c) of such Act (42
15 U.S.C. 1383b(e)) is amended—

16 (i) by inserting “(1)” after “(c)”; and

17 (ii) by adding at the end the following

18 new paragraph:

19 “(2) For suspension of continuing disability reviews
20 and other reviews under this title similar to reviews under
21 section 221 in the case of an individual using a ticket to
22 work and self-sufficiency, see section 1148(i).”.

23 (c) SPECIFIC REGULATIONS REQUIRED.—

24 (1) IN GENERAL.—The Commissioner of Social
25 Security shall prescribe such regulations as are nec-

1 essary to implement the amendments made by this
2 section.

3 (2) SPECIFIC MATTERS TO BE INCLUDED IN
4 REGULATIONS.—The matters which shall be ad-
5 dressed in such regulations shall include (but are not
6 limited to)—

7 (A) the form and manner in which tickets
8 to work and self-sufficiency may be distributed
9 to beneficiaries pursuant to section 1148(b)(1)
10 of such Act;

11 (B) the format and wording of such tick-
12 ets, which shall incorporate by reference any
13 contractual terms governing service by employ-
14 ment networks under the Program;

15 (C) the form and manner in which State
16 agencies may elect participation in the Ticket to
17 Work and Self-Sufficiency Program (and revoke
18 such an election) pursuant to section
19 1148(c)(1) of such Act and provision for peri-
20 odic opportunities for exercising such elections
21 (and revocations);

22 (D) the status of State agencies under sec-
23 tion 1148(c)(2) at the time that State agencies
24 exercise elections (and revocations) under such
25 section 1148(c)(1);

1 (E) the terms of agreements to be entered
2 into with program managers pursuant to sec-
3 tion 1148(d) of such Act, including (but not
4 limited to)—

5 (i) the terms by which program man-
6 agers are precluded from direct participa-
7 tion in the delivery of services pursuant to
8 section 1148(d)(3) of such Act;

9 (ii) standards which must be met by
10 quality assurance measures referred to in
11 paragraph (6) of section 1148(d) and
12 methods of recruitment of employment net-
13 works utilized pursuant to paragraph (2)
14 of section 1148(e); and

15 (iii) the format under which dispute
16 resolution will operate under section
17 1148(d)(7).

18 (F) the terms of agreements to be entered
19 into with employment networks pursuant to sec-
20 tion 1148(d)(4) of such Act, including (but not
21 limited to)—

22 (i) the manner in which service areas
23 are specified pursuant to section
24 1148(f)(2)(A) of such Act;

1 (ii) the general selection criteria and
2 the specific selection criteria which are ap-
3 plicable to employment networks under
4 section 1148(f)(2)(B) of such Act in select-
5 ing service providers;

6 (iii) specific requirements relating to
7 annual financial reporting by employment
8 networks pursuant to section 1148(f)(3) of
9 such Act; and

10 (iv) the national model to which peri-
11 odic outcomes reporting by employment
12 networks must conform under section
13 1148(f)(4) of such Act;

14 (G) standards which must be met by indi-
15 vidual work plans pursuant to section 1148(g)
16 of such Act;

17 (H) standards which must be met by pay-
18 ment systems required under section 1148(h) of
19 such Act, including (but not limited to)—

20 (i) the form and manner in which
21 elections by employment networks of pay-
22 ment systems are to be exercised pursuant
23 to section 1148(h)(1)(A);

1 (ii) the terms which must be met by
2 an outcome payment system under section
3 1148(h)(2);

4 (iii) the terms which must be met by
5 an outcome-milestone payment system
6 under section 1148(h)(3);

7 (iv) any revision of the percentage
8 specified in paragraph (2)(C) of section
9 1148(h) of such Act or the period of time
10 specified in paragraph (4)(B) of such sec-
11 tion 1148(h); and

12 (v) annual oversight procedures for
13 such systems; and

14 (I) procedures for effective oversight of the
15 Program by the Commissioner of Social Secu-
16 rity, including periodic reviews and reporting
17 requirements.

18 (d) WORK INCENTIVE SPECIALISTS.—The Commis-
19 sioner shall establish a corps of trained, accessible, and
20 responsive work incentive specialists to specialize in title
21 II and title XVI disability work incentives for the purpose
22 of disseminating accurate information to disabled bene-
23 ficiaries (as defined in section 1148(k)(1) of the Social
24 Security Act as amended by this section) with respect to
25 inquiries and issues relating to work incentives.

1 **SEC. 202. EFFECTIVE DATE.**

2 Subject to section 203, the amendments made by sec-
3 tion 201 shall take effect with the first month following
4 one year after the date of the enactment of this Act.

5 **SEC. 203. GRADUATED IMPLEMENTATION OF PROGRAM.**

6 (a) IN GENERAL.—Not later than one year after the
7 date of the enactment of this Act, the Commissioner of
8 Social Security shall commence implementation of the
9 amendments made by section 201 (other than paragraphs
10 (1)(C) and (2)(B) of section 201(b)) in graduated phases
11 at phase-in sites selected by the Commissioner. Such
12 phase-in sites shall be selected so as to ensure, prior to
13 full implementation of the Ticket to Work and Self-Suffi-
14 ciency Program, the development and refinement of refer-
15 ral processes, payment systems, computer linkages, man-
16 agement information systems, and administrative proc-
17 esses necessary to provide for full implementation of such
18 amendments. Section 202 shall apply with respect to para-
19 graphs (1)(C) and (2)(B) of section 201(b) without regard
20 to this section.

21 (b) REQUIREMENTS.—Implementation of the Pro-
22 gram at each phase-in site shall be carried out on a wide
23 enough scale to permit a thorough evaluation of the alter-
24 native methods under consideration, so as to ensure that
25 the most efficacious methods are determined and in place
26 for full implementation of the Program on a timely basis.

1 (c) FULL IMPLEMENTATION.—The Commissioner
2 shall ensure that the Program is fully implemented as
3 soon as practicable on or after the effective date specified
4 in section 202 but not later than six years after such date.

5 (d) ONGOING EVALUATION OF PROGRAM.—

6 (1) IN GENERAL.—The Commissioner shall de-
7 sign and conduct a series of evaluations to assess
8 the cost-effectiveness of activities carried out under
9 this title and the amendments made thereby, as well
10 as the effects of this title and the amendments made
11 thereby on work outcomes for beneficiaries receiving
12 tickets to work and self-sufficiency under the Pro-
13 gram.

14 (2) METHODOLOGY.—

15 (A) DESIGN AND IMPLEMENTATION.—The
16 Commissioner shall design the series of evalua-
17 tions after receiving relevant advice from ex-
18 perts in the fields of disability, vocational reha-
19 bilitation, and program evaluation and individ-
20 uals using tickets to work and self-sufficiency
21 under the Program. In designing and carrying
22 out such evaluations, the Commissioner shall
23 consult with the Comptroller General of the
24 United States and other agencies of the Federal
25 Government and with private organizations with

1 appropriate expertise. Before provision of serv-
2 ices begins under any phase of Program imple-
3 mentation, the Commissioner shall ensure that
4 plans for such evaluations and data collection
5 methods are in place and ready for implementa-
6 tion.

7 (B) SPECIFIC MATTERS TO BE AD-
8 DRESSED.—Each such evaluation shall address
9 (but is not limited to):

10 (i) the annual cost (including net
11 cost) of the Program and the annual cost
12 (including net cost) that would have been
13 incurred in the absence of the Program;

14 (ii) the determinants of return to
15 work, including the characteristics of bene-
16 ficiaries in receipt of tickets under the Pro-
17 gram;

18 (iii) the types of employment services,
19 vocational rehabilitation services, and other
20 support services furnished to beneficiaries
21 in receipt of tickets under the Program
22 who return to work and to those who do
23 not return to work;

24 (iv) the duration of employment serv-
25 ices, vocational rehabilitation services, and

1 other support services furnished to bene-
2 ficiaries in receipt of tickets under the Pro-
3 gram who return to work and the duration
4 of such services furnished to those who do
5 not return to work and the cost to employ-
6 ment networks of furnishing such services;

7 (v) the employment outcomes, includ-
8 ing wages, occupations, benefits, and hours
9 worked, of beneficiaries who return to work
10 after receiving tickets under the Program
11 and those who return to work without re-
12 ceiving such tickets;

13 (vi) the characteristics of providers
14 whose services are provided within an em-
15 ployment network under the Program;

16 (vii) the extent (if any) to which em-
17 ployment networks display a greater will-
18 ingness to provide services to disabled
19 beneficiaries;

20 (viii) the characteristics (including
21 employment outcomes) of those bene-
22 ficiaries who receive services under the out-
23 come payment system and of those bene-
24 ficiaries who receive services under the out-
25 come-milestone payment system;

1 (ix) measures of satisfaction among
2 beneficiaries in receipt of tickets under the
3 Program; and

4 (x) reasons for (including comments
5 solicited from beneficiaries regarding) their
6 choice not to use their tickets or their in-
7 ability to return to work despite the use of
8 thier tickets.

9 (3) PERIODIC EVALUATION REPORTS.—Follow-
10 ing the close of the third and fifth fiscal years end-
11 ing after the effective date under section 202, and
12 prior to the close of the seventh fiscal year ending
13 after such date, the Commissioner shall transmit to
14 the Committee on Ways and Means of the House of
15 Representatives and the Committee on Finance of
16 the Senate a report containing the Commissioner's
17 evaluation of the progress of activities conducted
18 under the provisions of this section and the amend-
19 ments made thereby. Each such report shall set
20 forth the Commissioner's evaluation of the extent to
21 which the Program has been successful and the
22 Commissioner's conclusions on whether or how the
23 Program should be modified. Each such report shall
24 include such data, findings, materials, and rec-

1 ommendations as the Commissioner may consider
2 appropriate.

3 (e) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL
4 IN ADVANCE OF FULL IMPLEMENTATION OF AMEND-
5 MENTS IN SUCH STATE.—

6 (1) IN GENERAL.—In the case of any State in
7 which the amendments made by section 201 have
8 not been fully implemented pursuant to this section,
9 the Commissioner shall determine by regulation the
10 extent to which—

11 (A) the requirement under section 222(a)
12 of the Social Security Act for prompt referrals
13 to a State agency; and

14 (B) the authority of the Commissioner
15 under section 222(d)(2) of such Act to provide
16 vocational rehabilitation services in such State
17 by agreement or contract with other public or
18 private agencies, organizations, institutions, or
19 individuals,
20 shall apply in such State.

21 (2) EXISTING AGREEMENTS.—Nothing in para-
22 graph (1) or the amendments made by section 201
23 shall be construed to limit, impede, or otherwise af-
24 fect any agreement entered into pursuant to section
25 222(d)(2) of the Social Security Act before the date

1 of the enactment of this Act with respect to services
2 provided pursuant to such agreement to beneficiaries
3 receiving services under such agreement as of such
4 date, except with respect to services (if any) to be
5 provided after six years after the effective date pro-
6 vided in section 202.

7 **SEC. 204. THE TICKET TO WORK AND SELF-SUFFICIENCY**
8 **ADVISORY PANEL.**

9 (a) ESTABLISHMENT.—There is established in the ex-
10 ecutive branch a panel to be known as the “Ticket to Work
11 and Self-Sufficiency Advisory Panel” (in this section re-
12 ferred to as the “Panel”).

13 (b) DUTIES OF PANEL.—It shall be the duty of the
14 Panel to—

15 (1) advise the Commissioner of Social Security
16 on establishing phase-in sites for the Ticket to Work
17 and Self-Sufficiency Program and on fully imple-
18 menting the Program thereafter;

19 (2) advise the Commissioner with respect to the
20 refinement of access of disabled beneficiaries to em-
21 ployment networks, payment systems, and manage-
22 ment information systems and advise the Commis-
23 sioner whether such measures are being taken to the
24 extent necessary to ensure the success of the Pro-
25 gram;

1 (3) advise the Commissioner regarding the most
2 effective designs for research and demonstration
3 projects associated with the Program or conducted
4 pursuant to section 205(a);

5 (4) advise the Commissioner on the develop-
6 ment of performance measurements relating to qual-
7 ity assurance under section 1148(d)(6) of the Social
8 Security Act; and

9 (5) furnish progress reports on the Program to
10 the President and each House of the Congress.

11 (c) MEMBERSHIP.—

12 (1) NUMBER AND APPOINTMENT.—The Panel
13 shall be composed of six members as follows:

14 (A) one member appointed by the Chair-
15 man of the Committee on Ways and Means of
16 the House of Representatives;

17 (B) one member appointed by the ranking
18 minority member of the Committee on Ways
19 and Means of the House of Representatives;

20 (C) one member appointed by the Chair-
21 man of the Committee on Finance of the Sen-
22 ate;

23 (D) one member appointed by the ranking
24 minority member of the Committee on Finance
25 of the Senate; and

1 (E) two members appointed by the Presi-
2 dent, who may not be of the same political
3 party.

4 (2) REPRESENTATION.—Of the members ap-
5 pointed under paragraph (1), at least four shall have
6 experience or expert knowledge as a recipient, pro-
7 vider, employer, or employee in the fields of, or re-
8 lated to, employment services, vocational rehabilita-
9 tion services, and other support services, of whom—

10 (A) at least one shall represent the inter-
11 ests of recipients of employment services, voca-
12 tional rehabilitation services, and other support
13 services;

14 (B) at least one shall represent the inter-
15 ests of providers of employment services, voca-
16 tional rehabilitation services, and other support
17 services;

18 (C) at least one shall represent the inter-
19 ests of private employers;

20 (D) at least one shall represent the inter-
21 ests of employees; and

22 (E) at least one shall be an individual who
23 is or has been a recipient of benefits under title
24 II or title XVI based on disability.

25 (3) TERMS.—

1 (A) IN GENERAL.—Each member shall be
2 appointed for a term of 4 years (or, if less, for
3 the remaining life of the Panel), except as pro-
4 vided in subparagraphs (B) and (C). The initial
5 members shall be appointed not later than 90
6 days after the date of the enactment of this
7 Act.

8 (B) TERMS OF INITIAL APPOINTEES.—As
9 designated by the President at the time of ap-
10 pointment, of the members first appointed—

11 (i) three of the members appointed
12 under paragraph (1) shall be appointed for
13 a term of 2 years; and

14 (ii) three of the members appointed
15 under paragraph (1) shall be appointed for
16 a term of 4 years.

17 (C) VACANCIES.—Any member appointed
18 to fill a vacancy occurring before the expiration
19 of the term for which the member's predecessor
20 was appointed shall be appointed only for the
21 remainder of that term. A member may serve
22 after the expiration of that member's term until
23 a successor has taken office. A vacancy in the
24 Panel shall be filled in the manner in which the
25 original appointment was made.

1 (4) BASIC PAY.—Members shall each be paid at
2 a rate equal to the daily equivalent of the rate of
3 basic pay for level 4 of the Senior Executive Service,
4 as in effect from time to time under section 5382 of
5 title 5, United States Code, for each day (including
6 travel time) during which they are engaged in the
7 actual performance of duties vested in the Panel.

8 (5) TRAVEL EXPENSES.—Each member shall
9 receive travel expenses, including per diem in lieu of
10 subsistence, in accordance with sections 5702 and
11 5703 of title 5, United States Code.

12 (6) QUORUM.—Four members of the Panel
13 shall constitute a quorum but a lesser number may
14 hold hearings.

15 (7) CHAIRPERSON.—The Chairperson of the
16 Panel shall be designated by the President. The
17 term of office of the Chairperson shall be 4 years.

18 (8) MEETINGS.—The Panel shall meet at least
19 quarterly and at other times at the call of the Chair-
20 person or a majority of its members.

21 (d) DIRECTOR AND STAFF OF PANEL; EXPERTS AND
22 CONSULTANTS.—

23 (1) DIRECTOR.—The Panel shall have a Direc-
24 tor who shall be appointed by the Panel. The Direc-
25 tor shall be paid at a rate not to exceed the maxi-

1 mum rate of pay payable for GS-15 of the General
2 Schedule.

3 (2) STAFF.—Subject to rules prescribed by the
4 Panel, the Director may appoint and fix the pay of
5 additional personnel as the Director considers appro-
6 priate.

7 (3) EXPERTS AND CONSULTANTS.—Subject to
8 rules prescribed by the Panel, the Director may pro-
9 cure temporary and intermittent services under sec-
10 tion 3109(b) of title 5, United States Code.

11 (4) STAFF OF FEDERAL AGENCIES.—Upon re-
12 quest of the Panel, the head of any Federal depart-
13 ment or agency may detail, on a reimbursable basis,
14 any of the personnel of that department or agency
15 to the Panel to assist it in carrying out its duties
16 under this Act.

17 (e) POWERS OF PANEL.—

18 (1) HEARINGS AND SESSIONS.—The Panel may,
19 for the purpose of carrying out its duties under this
20 subsection, hold such hearings, sit and act at such
21 times and places, and take such testimony and evi-
22 dence as the Panel considers appropriate.

23 (2) POWERS OF MEMBERS AND AGENTS.—Any
24 member or agent of the Panel may, if authorized by

1 the Panel, take any action which the Panel is au-
2 thORIZED to take by this section.

3 (3) **MAILS.**—The Panel may use the United
4 States mails in the same manner and under the
5 same conditions as other departments and agencies
6 of the United States.

7 (4) **ADMINISTRATIVE SUPPORT SERVICES.**—
8 Upon the request of the Panel, the Administrator of
9 General Services shall provide to the Panel, on a re-
10 imburseable basis, the administrative support services
11 necessary for the Panel to carry out its duties under
12 this subsection.

13 (f) **REPORTS.**—

14 (1) **INTERIM REPORTS.**—The Panel shall sub-
15 mit to the President and the Congress interim re-
16 ports at least annually.

17 (2) **FINAL REPORT.**—The Panel shall transmit
18 a final report to the President and the Congress not
19 later than eight years after the date of the enact-
20 ment of this Act. The final report shall contain a de-
21 tailed statement of the findings and conclusions of
22 the Panel, together with its recommendations for
23 legislation and administrative actions which the
24 Panel considers appropriate.

1 (g) TERMINATION.—The Panel shall terminate 30
2 days after the date of the submission of its final report
3 under subsection (f)(2).

4 (h) AUTHORIZATION OF APPROPRIATIONS.—There
5 are authorized to be appropriated from the Federal Old-
6 Age and Survivors Insurance Trust Fund, the Federal
7 Disability Insurance Trust Fund, and the general fund of
8 the Treasury, as appropriate, such sums as are necessary
9 to carry out this section.

10 **SEC. 205. DEMONSTRATION PROJECTS AND STUDIES.**

11 (a) DEMONSTRATION PROJECTS PROVIDING FOR RE-
12 Ductions IN DISABILITY INSURANCE BENEFITS BASED
13 ON EARNINGS. —

14 (1) AUTHORITY.—The Commissioner shall con-
15 duct demonstration projects for the purpose of eval-
16 uating, through the collection of data, a program for
17 title II disability beneficiaries (as defined in section
18 1148(k)(2) of the Social Security Act, as amended
19 by this Act) under which each \$1 of benefits payable
20 under section 223, or under section 202 based on
21 the beneficiary's disability, is reduced for each \$2 of
22 such beneficiary's earnings that is above a level to
23 be determined by the Commissioner. Such projects
24 shall be conducted at a number of localities which
25 the Commissioner shall determine is sufficient to

1 adequately evaluate the appropriateness of national
2 implementation of such a program. Such projects
3 shall identify reductions in Federal expenditures
4 that may result from the permanent implementation
5 of such a program.

6 (2) SCOPE AND SCALE AND MATTERS TO BE
7 DETERMINED.—

8 (A) IN GENERAL.—The demonstration
9 projects developed under paragraph (1) shall be
10 of sufficient duration, shall be of sufficient
11 scope, and shall be carried out on a wide
12 enough scale to permit a thorough evaluation of
13 the project to determine—

14 (i) the effects, if any, of induced entry
15 and reduced exit;

16 (ii) the extent, if any, to which the
17 project being tested is affected by whether
18 it is in operation in a locality within an
19 area under the administration of the Tick-
20 et to Work and Self-Sufficiency Program;
21 and

22 (iii) the savings that accrue to the
23 Trust Funds and other Federal programs
24 under the project being tested.

1 The Commissioner shall take into account ad-
2 vice provided by the Ticket to Work and Self-
3 Sufficiency Advisory Panel pursuant to sub-
4 section (e)(2)(C).

5 (B) ADDITIONAL MATTERS.—The Commis-
6 sioner shall also determine with respect to each
7 project—

8 (i) the annual cost (including net
9 cost) of the project and the annual cost
10 (including net cost) that would have been
11 incurred in the absence of the project;

12 (ii) the determinants of return to
13 work, including the characteristics of the
14 beneficiaries who participate in the project;
15 and

16 (iii) the employment outcomes, includ-
17 ing wages, occupations, benefits, and hours
18 worked, of beneficiaries who return to work
19 as a result of participation in the project.

20 The Commissioner may include within the mat-
21 ters evaluated under the project the merits of
22 trial work periods and periods of extended eligi-
23 bility.

24 (3) WAIVERS.—The Commissioner may waive
25 compliance with the benefit provisions of title II of

1 the Social Security Act, and the Secretary of Health
2 and Human Services may waive compliance with the
3 benefit requirements of title XVIII of such Act, in
4 so far as is necessary for a thorough evaluation of
5 the alternative methods under consideration. No
6 such project shall be actually placed in operation un-
7 less at least 90 days prior thereto a written report,
8 prepared for purposes of notification and informa-
9 tion only and containing a full and complete descrip-
10 tion thereof, has been transmitted by the Commis-
11 sioner to the Committee on Ways and Means of the
12 House of Representatives and to the Committee on
13 Finance of the Senate. Periodic reports on the
14 progress of such projects shall be submitted by the
15 Commissioner to such committees. When appro-
16 priate, such reports shall include detailed rec-
17 ommendations for changes in administration or law,
18 or both, to carry out the objectives stated in para-
19 graph (1).

20 (4) INTERIM REPORTS.—On or before June 9
21 in 2001 and each of the succeeding years thereafter,
22 the Commissioner shall submit to the Congress an
23 interim report on the progress of the demonstration
24 projects carried out under this subsection together

1 with any related data and materials which the Com-
2 missioner may consider appropriate.

3 (5) FINAL REPORT.—The Commissioner shall
4 submit to the Congress a final report with respect
5 to all demonstration projects carried out under this
6 section no later than one year after their completion.

7 (6) EXPENDITURES.—Expenditures made for
8 demonstration projects under this subsection shall
9 be made from the Federal Disability Insurance
10 Trust Fund and the Federal Old-Age and Survivors
11 Insurance Trust Fund, as determined appropriate by
12 the Commissioner, and from the Federal Hospital
13 Insurance Trust Fund and the Federal Supple-
14 mentary Medical Insurance Trust Fund, as deter-
15 mined appropriate by the Secretary of Health and
16 Human Services, to the extent provided in advance
17 in appropriation Acts.

18 (b) STUDY BY GENERAL ACCOUNTING OFFICE OF
19 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
20 TIVES.—

21 (1) STUDY.—As soon as practicable after the
22 date of the enactment of this Act, the Comptroller
23 General of the United States shall undertake a study
24 to assess existing tax credits and other disability-re-
25 lated employment incentives under the Americans

1 with Disabilities Act of 1990 and other Federal
2 laws. In such study, the Comptroller General shall
3 specifically address the extent to which such credits
4 and other incentives would encourage employers to
5 hire and retain individuals with disabilities under the
6 Ticket to Work and Self-Sufficiency Program.

7 (2) REPORT.—Not later than 3 years after the
8 date of the enactment of this Act, the Comptroller
9 General shall transmit to the Committee on Ways
10 and Means of the House of Representatives and the
11 Committee on Finance of the Senate a written re-
12 port presenting the results of the Comptroller Gen-
13 eral's study conducted pursuant to this subsection,
14 together with such recommendations for legislative
15 or administrative changes as the Comptroller Gen-
16 eral may determine to be appropriate.

17 (c) STUDY BY GENERAL ACCOUNTING OFFICE OF
18 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
19 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
20 ING CONCURRENT ENTITLEMENT.—

21 (1) STUDY.—As soon as practicable after the
22 date of the enactment of this Act, the Comptroller
23 General of the United States shall undertake a study
24 to evaluate the coordination under current law of the
25 disability insurance program under title II of the So-

1 cial Security Act and the supplemental security in-
2 come program under title XVI of such Act, as such
3 programs relate to individuals entering or leaving
4 concurrent entitlement under such programs. In
5 such study, the Comptroller General shall specifically
6 address the effectiveness of work incentives under
7 such programs with respect to such individuals and
8 the effectiveness of coverage of such individuals
9 under titles XVIII and XIX of such Act.

10 (2) REPORT.—Not later than 18 months after
11 the date of the enactment of this Act, the Comptrol-
12 ler General shall transmit to the Committee on
13 Ways and Means of the House of Representatives
14 and the Committee on Finance of the Senate a writ-
15 ten report presenting the results of the Comptroller
16 General’s study conducted pursuant to this sub-
17 section, together with such recommendations for leg-
18 islative or administrative changes as the Comptroller
19 General may determine to be appropriate.

20 **TITLE III—TECHNICAL**
21 **AMENDMENTS**

22 **SEC. 301. TECHNICAL AMENDMENTS RELATING TO DRUG**
23 **ADDICTS AND ALCOHOLICS.**

24 (a) CLARIFICATION RELATING TO THE EFFECTIVE
25 DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY

1 BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Sec-
2 tion 105(a)(5) of the Contract with America Advancement
3 Act of 1996 (Public Law 104–121; 110 Stat. 853) is
4 amended—

5 (1) in subparagraph (A), by striking “by the
6 Commissioner of Social Security” and “by the Com-
7 missioner”; and

8 (2) by adding at the end the following:

9 “(D) For purposes of this paragraph, an
10 individual’s claim, with respect to benefits
11 under title II of the Social Security Act based
12 on disability, which has been denied in whole
13 before the date of enactment of this Act, may
14 not be considered to be finally adjudicated be-
15 fore such date if, on or after such date—

16 “(i) there is pending a request for ei-
17 ther administrative or judicial review with
18 respect to such claim, or

19 “(ii) there is pending, with respect to
20 such claim, a readjudication by the Com-
21 missioner of Social Security pursuant to
22 relief in a class action or implementation
23 by the Commissioner of a court remand
24 order.

1 “(E) Notwithstanding the provisions of
2 this paragraph, with respect to any individual
3 for whom the Commissioner of Social Security
4 does not perform the entitlement redetermina-
5 tion before the date prescribed in subparagraph
6 (C), the Commissioner shall perform such enti-
7 tlement redetermination in lieu of a continuing
8 disability review whenever the Commissioner de-
9 termines that the individual’s entitlement is
10 subject to redetermination based on the preced-
11 ing provisions of this paragraph, and the provi-
12 sions of section 223(f) of the Social Security
13 Act shall not apply to such redetermination.”.

14 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
15 SIONS CONCERNING REPRESENTATIVE PAYEES AND
16 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
17 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
18 Section 105(a)(5)(B) of the Contract with America Ad-
19 vancement Act of 1996 (42 U.S.C. 405 note) is amended
20 to read as follows:

21 “(B) The amendments made by para-
22 graphs (2) and (3) shall take effect on July 1,
23 1996, with respect to any individual—

1 “(i) whose claim for benefits is finally
2 adjudicated on or after the date of enact-
3 ment of this Act; or

4 “(ii) whose entitlement to benefits is
5 based on an entitlement redetermination
6 made pursuant to subparagraph (C).”.

7 (c) EFFECTIVE DATES.—The amendments made by
8 this section shall take effect as if included in the enact-
9 ment of section 105 of the Contract with America Ad-
10 vancement Act of 1996 (Public Law 104–121; 110 Stat.
11 852 et seq.).

12 **SEC. 302. TREATMENT OF PRISONERS.**

13 (a) IMPLEMENTATION OF PROHIBITION AGAINST
14 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

15 (1) IN GENERAL.—Section 202(x)(3) of the So-
16 cial Security Act (42 U.S.C. 402(x)(3)) is
17 amended—

18 (A) by inserting “(A)” after “(3)”; and

19 (B) by adding at the end the following:

20 “(B)(i) The Commissioner shall enter into an agree-
21 ment under this subparagraph with any interested State
22 or local institution comprising a jail, prison, penal institu-
23 tion, or correctional facility, or comprising any other insti-
24 tution a purpose of which is to confine individuals as de-
25 scribed in paragraph (1)(A)(ii). Under such agreement—

1 “(I) the institution shall provide to the Com-
2 missioner, on a monthly basis and in a manner spec-
3 ified by the Commissioner, the names, Social Secu-
4 rity account numbers, dates of birth, confinement
5 commencement dates, and, to the extent available to
6 the institution, such other identifying information
7 concerning the individuals confined in the institution
8 as the Commissioner may require for the purpose of
9 carrying out paragraph (1); and

10 “(II) the Commissioner shall pay to the institu-
11 tion, with respect to information described in sub-
12 clause (I) concerning each individual who is confined
13 therein as described in paragraph (1)(A), who re-
14 ceives a benefit under this title for the month pre-
15 ceding the first month of such confinement, and
16 whose benefit under this title is determined by the
17 Commissioner to be not payable by reason of con-
18 finement based on the information provided by the
19 institution, \$400 (subject to reduction under clause
20 (ii)) if the institution furnishes the information to
21 the Commissioner within 30 days after the date such
22 individual’s confinement in such institution begins,
23 or \$200 (subject to reduction under clause (ii)) if
24 the institution furnishes the information after 30

1 days after such date but within 90 days after such
2 date.

3 “(ii) The dollar amounts specified in clause (i)(II)
4 shall be reduced by 50 percent if the Commissioner is also
5 required to make a payment to the institution with respect
6 to the same individual under an agreement entered into
7 under section 1611(e)(1)(I).

8 “(iii) The provisions of section 552a of title 5, United
9 States Code, shall not apply to any agreement entered into
10 under clause (i) or to information exchanged pursuant to
11 such agreement.

12 “(iv) There is authorized to be transferred from the
13 Federal Old-Age and Survivors Insurance Trust Fund and
14 the Federal Disability Insurance Trust Fund, as appro-
15 priate, such sums as may be necessary to enable the Com-
16 missioner to make payments to institutions required by
17 clause (i)(II).

18 “(v) The Commissioner is authorized to provide, on
19 a reimbursable basis, information obtained pursuant to
20 agreements entered into under clause (i) to any agency
21 administering a Federal or federally assisted cash, food,
22 or medical assistance program for eligibility purposes.”.

23 (2) EFFECTIVE DATE.—The amendments made
24 by this subsection shall apply to individuals whose
25 period of confinement in an institution commences

1 on or after the first day of the fourth month begin-
2 ning after the month in which this Act is enacted.

3 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
4 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
5 PRISONMENT FOR MORE THAN 1 YEAR.—

6 (1) IN GENERAL.—Section 202(x)(1)(A) of the
7 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
8 amended—

9 (A) in the matter preceding clause (i), by
10 striking “during” and inserting “throughout”;

11 (B) in clause (i), by striking “an offense
12 punishable by imprisonment for more than 1
13 year (regardless of the actual sentence im-
14 posed)” and inserting “a criminal offense”; and

15 (C) in clause (ii)(I), by striking “an of-
16 fense punishable by imprisonment for more
17 than 1 year” and inserting “a criminal of-
18 fense”.

19 (2) EFFECTIVE DATE.—The amendments made
20 by this subsection shall apply to individuals whose
21 period of confinement in an institution commences
22 on or after the first day of the fourth month begin-
23 ning after the month in which this Act is enacted.

24 (c) CONFORMING TITLE XVI AMENDMENTS.—

1 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
2 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
3 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
4 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

5 (A) in clause (i)(II), by inserting “(subject
6 to reduction under clause (ii))” after “\$400”
7 and after “\$200”;

8 (B) by redesignating clauses (ii) and (iii)
9 as clauses (iii) and (iv), respectively; and

10 (C) by inserting after clause (i) the follow-
11 ing:

12 “(ii) The dollar amounts specified in clause (i)(II)
13 shall be reduced by 50 percent if the Commissioner is also
14 required to make a payment to the institution with respect
15 to the same individual under an agreement entered into
16 under section 202(x)(3)(B).”.

17 (2) EXPANSION OF CATEGORIES OF INSTITU-
18 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
19 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
20 the Social Security Act (42 U.S.C. 1382(e)(1)(I)(i))
21 is amended in the matter preceding subclause (I) by
22 striking “institution” and all that follows through
23 “section 202(x)(1)(A),” and inserting “institution
24 comprising a jail, prison, penal institution, or correc-
25 tional facility, or with any other interested State or

1 local institution a purpose of which is to confine in-
2 dividuals as described in section 202(x)(1)(A)(ii),”.

3 (3) EFFECTIVE DATE.—The amendments made
4 by this subsection shall take effect as if included in
5 the enactment of section 203(a) of the Personal Re-
6 sponsibility and Work Opportunity Reconciliation
7 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
8 The reference to section 202(x)(1)(A)(ii) of the So-
9 cial Security Act in section 1611(e)(1)(I)(i) of the
10 Social Security Act as amended by paragraph (2)
11 shall be deemed a reference to such section
12 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

13 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
14 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
15 TIONS UPON COMPLETION OF PRISON TERM.—

16 (1) IN GENERAL.—Section 202(x)(1)(A) of the
17 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
18 amended—

19 (A) in clause (i), by striking “or” at the
20 end;

21 (B) in clause (ii)(IV), by striking the pe-
22 riod and inserting “, or”; and

23 (C) by adding at the end the following:

24 “(iii) immediately upon completion of confine-
25 ment as described in clause (i) pursuant to convic-

1 tion of a criminal offense an element of which is sex-
2 ual activity, is confined by court order in an institu-
3 tion at public expense pursuant to a finding that the
4 individual is a sexually dangerous person or a sexual
5 predator or a similar finding.”.

6 (2) CONFORMING AMENDMENT.—Section
7 202(x)(1)(B)(ii) of the Social Security Act (42
8 U.S.C. 402(x)(1)(B)(ii)) is amended by striking
9 “clause (ii)” and inserting “clauses (ii) and (iii)”.

10 (3) EFFECTIVE DATE.—The amendments made
11 by this subsection shall apply with respect to bene-
12 fits for months ending after the date of enactment
13 of this Act.

14 **SEC 303. REVOCATION BY MEMBERS OF THE CLERGY OF**
15 **EXEMPTION FROM SOCIAL SECURITY COV-**
16 **ERAGE.**

17 (a) IN GENERAL.—Notwithstanding section
18 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
19 emption which has been received under section 1402(e)(1)
20 of such Code by a duly ordained, commissioned, or li-
21 censed minister of a church, a member of a religious order,
22 or a Christian Science practitioner, and which is effective
23 for the taxable year in which this Act is enacted, may be
24 revoked by filing an application therefore (in such form
25 and manner, and with such official, as may be prescribed

1 in regulations made under chapter 2 of such Code), if such
2 application is filed no later than the due date of the Fed-
3 eral income tax return (including any extension thereof)
4 for the applicant's second taxable year beginning after De-
5 cember 31, 1999. Any such revocation shall be effective
6 (for purposes of chapter 2 of the Internal Revenue Code
7 of 1986 and title II of the Social Security Act), as speci-
8 fied in the application, either with respect to the appli-
9 cant's first taxable year beginning after December 31,
10 1999, or with respect to the applicant's second taxable
11 year beginning after such date, and for all succeeding tax-
12 able years; and the applicant for any such revocation may
13 not thereafter again file application for an exemption
14 under such section 1402(e)(1). If the application is filed
15 after the due date of the applicant's Federal income tax
16 return for a taxable year and is effective with respect to
17 that taxable year, it shall include or be accompanied by
18 payment in full of an amount equal to the total of the
19 taxes that would have been imposed by section 1401 of
20 the Internal Revenue Code of 1986 with respect to all of
21 the applicant's income derived in that taxable year which
22 would have constituted net earnings from self-employment
23 for purposes of chapter 2 of such Code (notwithstanding
24 paragraph (4) or (5) of section 1402(c) of such Code) ex-

1 cept for the exemption under section 1402(e)(1) of such
2 Code.

3 (b) EFFECTIVE DATE.—Subsection (a) shall apply
4 with respect to service performed (to the extent specified
5 in such subsection) in taxable years beginning after De-
6 cember 31, 1999, and with respect to monthly insurance
7 benefits payable under title II of the Social Security Act
8 on the basis of the wages and self-employment income of
9 any individual for months in or after the calendar year
10 in which such individual’s application for revocation (as
11 described in such subsection) is effective (and lump-sum
12 death payments payable under such title on the basis of
13 such wages and self-employment income in the case of
14 deaths occurring in or after such calendar year).

15 **SEC. 304. ADDITIONAL TECHNICAL AMENDMENT RELATING**
16 **TO COOPERATIVE RESEARCH OR DEM-**
17 **ONSTRATION PROJECTS UNDER TITLES II**
18 **AND XVI.**

19 (a) IN GENERAL.—Section 1110(a)(3) of the Social
20 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
21 ing “title XVI” and inserting “title II or XVI”.

22 (b) EFFECTIVE DATE.—The amendment made by
23 subsection (a) shall take effect as if included in the enact-
24 ment of the Social Security Independence and Program

1 Improvements Act of 1994 (Public Law 103–296; 108
2 Stat. 1464).

3 **SEC. 305. AUTHORIZATION FOR STATE TO PERMIT ANNUAL**
4 **WAGE REPORTS.**

5 (a) IN GENERAL.—Section 1137(a)(3) of the Social
6 Security Act (42 U.S.C. 1320b–7(a)(3)) is amended by
7 inserting before the semicolon the following: “, and except
8 that in the case of wage reports with respect to domestic
9 service employment, a State may permit employers (as so
10 defined) that make returns with respect to such employ-
11 ment on a calendar year basis pursuant to section 3510
12 of the Internal Revenue Code of 1986 to make such re-
13 ports on an annual basis”.

14 (b) TECHNICAL AMENDMENTS.—Section 1137(a)(3)
15 of the Social Security Act (42 U.S.C. 1320b–7(a)(3)) is
16 amended—

17 (1) by striking “(as defined in section
18 453A(a)(2)(B)(iii))”; and

19 (2) by inserting “(as defined in section
20 453A(a)(2)(B))” after “employers” .

21 (c) EFFECTIVE DATE.—The amendments made by
22 this section shall apply to wage reports required to be sub-
23 mitted on and after the date of enactment of this Act.

○

106TH CONGRESS
1ST SESSION

S. 86

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend Medicare coverage for such beneficiaries, and to make additional miscellaneous amendments relating to Social Security.

IN THE SENATE OF THE UNITED STATES

JANUARY 19, 1999

Mr. BUNNING introduced the following bill; which was read twice and referred to the Committee on Finance

A BILL

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend Medicare coverage for such beneficiaries, and to make additional miscellaneous amendments relating to Social Security.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.**

4 (a) SHORT TITLE.—This Act may be cited as the
5 “Ticket to Work and Self-Sufficiency Act of 1999”.

1 (b) TABLE OF CONTENTS.—The table of contents is
2 as follows:

- Sec. 1. Short title and table of contents.
- Sec. 2. The Ticket to Work and Self-Sufficiency Program.
- Sec. 3. Extending Medicare coverage for OASDI disability benefit recipients who are using tickets to work and self-sufficiency.
- Sec. 4. Technical amendments relating to drug addicts and alcoholics.
- Sec. 5. Extension of disability insurance program demonstration project authority.
- Sec. 6. Treatment of prisoners.
- Sec. 7. Revocation by members of the clergy of exemption from Social Security coverage.
- Sec. 8. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI.

3 **SEC. 2. THE TICKET TO WORK AND SELF-SUFFICIENCY**
4 **PROGRAM.**

5 (a) IN GENERAL.—Part A of title XI of the Social
6 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
7 ing at the end the following new section:

8 “THE TICKET TO WORK AND SELF-SUFFICIENCY
9 PROGRAM

10 “SEC. 1147. (a) IN GENERAL.—The Commissioner
11 of Social Security shall establish a Ticket to Work and
12 Self-Sufficiency Program, under which a disabled bene-
13 ficiary may use a ticket to work and self-sufficiency issued
14 by the Commissioner in accordance with this section to
15 obtain employment services, vocational rehabilitation serv-
16 ices, or other support services from an employment net-
17 work which is of the beneficiary’s choice and which is will-
18 ing to provide such services to such beneficiary.

19 “(b) TICKET SYSTEM.—

1 “(1) DISTRIBUTION OF TICKETS.—The Com-
2 missioner of Social Security may issue a ticket to
3 work and self-sufficiency to disabled beneficiaries for
4 participation in the Program.

5 “(2) ASSIGNMENT OF TICKETS.—A disabled
6 beneficiary holding a ticket to work and self-suffi-
7 ciency may assign the ticket to any employment net-
8 work of the beneficiary’s choice which is serving
9 under the Program and is willing to accept the as-
10 signment.

11 “(3) TICKET TERMS.—A ticket issued under
12 paragraph (1) shall consist of a document which evi-
13 dences the Commissioner’s agreement to pay (as
14 provided in paragraph (4)) an employment network,
15 which is serving under the Program and to which
16 such ticket is assigned by the beneficiary, for such
17 employment services, vocational rehabilitation serv-
18 ices, and other support services as the employment
19 network may provide to the beneficiary.

20 “(4) PAYMENTS TO EMPLOYMENT NET-
21 WORKS.—The Commissioner shall pay an employ-
22 ment network under the Program in accordance with
23 the outcome payment system under subsection
24 (h)(2) or under the outcome-milestone payment sys-
25 tem under subsection (h)(3) (whichever is elected

1 pursuant to subsection (h)(1)). An employment net-
2 work may not request or receive compensation for
3 such services from the beneficiary.

4 “(c) STATE PARTICIPATION.—

5 “(1) PERIODIC ELECTIONS.—Each State agen-
6 cy administering or supervising the administration
7 of the State plan approved under title I of the Reha-
8 bilitation Act of 1973 may elect to participate in the
9 Program (or to revoke any such election) as an em-
10 ployment network. The Commissioner shall provide
11 for periodic opportunities for exercising such elec-
12 tions (and revocations).

13 “(2) TREATMENT OF STATE AGENCIES.—Any
14 such election (or revocation) by a State agency de-
15 scribed in paragraph (1) taking effect during any
16 period for which an individual residing in the State
17 is a disabled beneficiary and a client of the State
18 agency shall not be effective with respect to such in-
19 dividual to the extent that such election (or revoca-
20 tion) would result in any change in the method of
21 payment to the State agency with respect to the in-
22 dividual from the method of payment to the State
23 agency with respect to the individual in effect imme-
24 diately before such election (or revocation).

1 “(3) EFFECT OF PARTICIPATION BY STATE
2 AGENCY.—

3 “(A) STATE AGENCIES PARTICIPATING.—

4 In any case in which a State agency described
5 in paragraph (1) elects under paragraph (1) to
6 participate in the Program—

7 “(i) the employment services, voca-
8 tional rehabilitation services, and other
9 support services which, upon assignment of
10 tickets to work and self-sufficiency, are
11 provided to disabled beneficiaries by the
12 State agency acting as an employment net-
13 work shall be governed by plans for voca-
14 tional rehabilitation services approved
15 under title I of the Rehabilitation Act of
16 1973; and

17 “(ii) the provisions of section 222(d)
18 and the provisions of subsections (d) and
19 (e) of section 1615 shall not apply with re-
20 spect to such State.

21 “(B) STATE AGENCIES ADMINISTERING
22 MATERNAL AND CHILD HEALTH SERVICES PRO-
23 GRAMS.—Subparagraph (A) shall not apply
24 with respect to any State agency administering
25 a program under title V of this Act.

1 “(4) SPECIAL REQUIREMENTS APPLICABLE TO
2 CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

3 “(A) IN GENERAL.—In any case in which
4 an employment network has been assigned a
5 ticket to work and self-sufficiency by a disabled
6 beneficiary, no State agency shall be deemed re-
7 quired, under this section, title I of the Reha-
8 bilitation Act of 1973, or a State plan approved
9 under such title, to accept any referral of such
10 disabled beneficiary from such employment net-
11 work unless such employment network and such
12 State agency have entered into a written agree-
13 ment that meets the requirements of subpara-
14 graph (B).

15 “(B) TERMS OF AGREEMENT.—An agree-
16 ment required by subparagraph (A) shall speci-
17 fy, in accordance with regulations prescribed
18 pursuant to subparagraph (C)—

19 “(i) the extent (if any) to which the
20 employment network holding the ticket will
21 provide to the State agency—

22 “(I) reimbursement for costs in-
23 curred in providing services described
24 in subparagraph (A) to the disabled
25 beneficiary; and

1 “(II) other amounts from pay-
2 ments made by the Commissioner to
3 the employment network pursuant to
4 subsection (h); and

5 “(ii) any other conditions that may be
6 required by such regulations.

7 “(C) REGULATIONS.—The Commissioner
8 of Social Security and the Secretary of Edu-
9 cation shall jointly prescribe regulations specify-
10 ing the terms of agreements required by sub-
11 paragraph (A) and otherwise necessary to carry
12 out the provisions of this paragraph.

13 “(D) PENALTY.—No payment may be
14 made to an employment network pursuant to
15 subsection (h) in connection with services pro-
16 vided to any disabled beneficiary if such em-
17 ployment network makes referrals described in
18 subparagraph (A) in violation of the terms of
19 the contract required under subparagraph (A)
20 or without having entered into such a contract.

21 “(d) RESPONSIBILITIES OF THE COMMISSIONER OF
22 SOCIAL SECURITY.—

23 “(1) SELECTION AND QUALIFICATIONS OF PRO-
24 GRAM MANAGERS.—The Commissioner of Social Se-
25 curity shall enter into agreements with 1 or more or-

1 organizations in the private or public sector for service
2 as a program manager to assist the Commissioner in
3 administering the Program. Any such program man-
4 ager shall be selected by means of a competitive bid-
5 ding process, from among organizations in the pri-
6 vate or public sector with available expertise and ex-
7 perience in the field of vocational rehabilitation or
8 employment services.

9 “(2) TENURE, RENEWAL, AND EARLY TERMI-
10 NATION.—Each agreement entered into under para-
11 graph (1) shall provide for early termination upon
12 failure to meet performance standards which shall be
13 specified in the agreement and which shall be
14 weighted to take into account any performance in
15 prior terms. Such performance standards shall in-
16 clude (but are not limited to)—

17 “(A) measures for ease of access by bene-
18 ficiaries to services; and

19 “(B) measures for determining the extent
20 to which failures in obtaining services for bene-
21 ficiaries fall within acceptable parameters, as
22 determined by the Commissioner.

23 “(3) PRECLUSION FROM DIRECT PARTICIPA-
24 TION IN DELIVERY OF SERVICES IN OWN SERVICE

1 AREA.—Agreements under paragraph (1) shall
2 preclude—

3 “(A) direct participation by a program
4 manager in the delivery of employment services,
5 vocational rehabilitation services, or other sup-
6 port services to beneficiaries in the service area
7 covered by the program manager’s agreement;
8 and

9 “(B) the holding by a program manager of
10 a financial interest in an employment network
11 or service provider which provides services in a
12 geographic area covered under the program
13 manager’s agreement.

14 “(4) SELECTION OF EMPLOYMENT NET-
15 WORKS.—The Commissioner shall select and enter
16 into agreements with employment networks for serv-
17 ice under the Program. Such employment networks
18 shall be in addition to State agencies serving as em-
19 ployment networks pursuant to elections under sub-
20 section (c).

21 “(5) TERMINATION OF AGREEMENTS WITH EM-
22 PLOYMENT NETWORKS.—The Commissioner shall
23 terminate agreements with employment networks for
24 inadequate performance, as determined by the Com-
25 missioner.

1 “(6) QUALITY ASSURANCE.—The Commissioner
2 shall provide for such periodic reviews as are nec-
3 essary to provide for effective quality assurance in
4 the provision of services by employment networks.
5 The Commissioner shall take into account the views
6 of consumers and the program manager under which
7 the employment networks serve and shall consult
8 with providers of services to develop performance
9 measurements. The Commissioner shall ensure that
10 the results of the periodic reviews are made available
11 to beneficiaries who are prospective service recipients
12 as they select employment networks. The Commis-
13 sioner shall ensure the performance of periodic sur-
14 veys of beneficiaries receiving services under the
15 Program designed to measure customer service satis-
16 faction.

17 “(7) DISPUTE RESOLUTION.—The Commis-
18 sioner shall provide for a mechanism for resolving
19 disputes between beneficiaries and employment net-
20 works and between program managers and employ-
21 ment networks. The Commissioner shall afford a
22 party to such a dispute a reasonable opportunity for
23 a full and fair review of the matter in dispute.

24 “(e) PROGRAM MANAGERS.—

1 “(1) IN GENERAL.—A program manager shall
2 conduct tasks appropriate to assist the Commis-
3 sioner in carrying out the Commissioner’s duties in
4 administering the Program.

5 “(2) RECRUITMENT OF EMPLOYMENT NET-
6 WORKS.—A program manager shall recruit, and rec-
7 ommend for selection by the Commissioner, employ-
8 ment networks for service under the Program. The
9 program manager shall carry out such recruitment
10 and provide such recommendations, and shall mon-
11 itor all employment networks serving in the Program
12 in the geographic area covered under the program
13 manager’s agreement, to the extent necessary and
14 appropriate to ensure that adequate choices of serv-
15 ices are made available to beneficiaries. Employment
16 networks may serve under the Program only pursu-
17 ant to an agreement entered into with the Commis-
18 sioner under the Program incorporating the applica-
19 ble provisions of this section and regulations there-
20 under, and the program manager shall provide and
21 maintain assurances to the Commissioner that pay-
22 ment by the Commissioner to employment networks
23 pursuant to this section is warranted based on com-
24 pliance by such employment networks with the terms
25 of such agreement and this section. The program

1 manager shall not impose numerical limits on the
2 number of employment networks to be recommended
3 pursuant to this paragraph.

4 “(3) FACILITATION OF ACCESS BY BENE-
5 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
6 gram manager shall facilitate access by beneficiaries
7 to employment networks. The program manager
8 shall ensure that each beneficiary is allowed changes
9 in employment networks for good cause, as deter-
10 mined by the Commissioner, without being deemed
11 to have rejected services under the Program. The
12 program manager shall establish and maintain lists
13 of employment networks available to beneficiaries
14 and shall make such lists generally available to the
15 public. The program manager shall ensure that all
16 information provided to disabled beneficiaries pursu-
17 ant to this paragraph is provided in accessible for-
18 mat.

19 “(4) ENSURING AVAILABILITY OF ADEQUATE
20 SERVICES.—The program manager shall ensure that
21 employment services, vocational rehabilitation serv-
22 ices, and other support services are provided to
23 beneficiaries throughout the geographic area covered
24 under the program manager’s agreement, including
25 rural areas.

1 “(5) REASONABLE ACCESS TO SERVICES.—The
2 program manager shall take such measures as are
3 necessary to ensure that sufficient employment net-
4 works are available and that each beneficiary receiv-
5 ing services under the Program has reasonable ac-
6 cess to employment services, vocational rehabilitation
7 services, and other support services. Such services
8 may include case management, benefits counseling,
9 supported employment, career planning, career plan
10 development, vocational assessment, job training,
11 placement, follow-up services, and such other serv-
12 ices as may be specified by the Commissioner under
13 the Program. The program manager shall ensure
14 that such services are coordinated.

15 “(f) EMPLOYMENT NETWORKS.—

16 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
17 WORKS.—Each employment network serving under
18 the Program shall consist of an agency or instru-
19 mentality of a State (or a political subdivision there-
20 of) or a private entity, which assumes responsibility
21 for the coordination and delivery of services under
22 the Program to individuals assigning to the employ-
23 ment network tickets to work and self-sufficiency
24 issued under subsection (b). No employment network
25 may serve under the Program unless it demonstrates

1 to the Commissioner substantial expertise and expe-
2 rience in the field of employment services, vocational
3 rehabilitation services, or other support services for
4 individuals with disabilities and provides an array of
5 such services. An employment network shall consist
6 of either a single provider of such services or of an
7 association of such providers organized so as to com-
8 bine their resources into a single entity. An employ-
9 ment network may meet the requirements of sub-
10 section (e)(4) by providing services directly, or by
11 entering into agreements with other individuals or
12 entities providing appropriate employment services,
13 vocational rehabilitation services, or other support
14 services.

15 “(2) REQUIREMENTS RELATING TO PROVISION
16 OF SERVICES.—Each employment network serving
17 under the Program shall be required under the
18 terms of its agreement with the Commissioner to—

19 “(A) serve prescribed service areas;

20 “(B) meet, and maintain compliance with,
21 both general selection criteria (such as profes-
22 sional and governmental certification and edu-
23 cational credentials) and specific selection cri-
24 teria (such as the extent of work experience by
25 the provider with specific populations); and

1 “(C) take such measures as are necessary
2 to ensure that employment services, vocational
3 rehabilitation services, and other support serv-
4 ices provided under the Program by, or under
5 agreements entered into with, the employment
6 network are provided under appropriate individ-
7 ual work plans meeting the requirements of
8 subsection (g).

9 “(3) ANNUAL FINANCIAL REPORTING.—Each
10 employment network shall meet financial reporting
11 requirements as prescribed by the Commissioner.

12 “(4) PERIODIC OUTCOMES REPORTING.—Each
13 employment network shall prepare periodic reports,
14 on at least an annual basis, itemizing for the covered
15 period specific outcomes achieved with respect to
16 specific services provided by the employment net-
17 work. Such reports shall conform to a national
18 model prescribed under this section. Each employ-
19 ment network shall provide a copy of the latest re-
20 port issued by the employment network pursuant to
21 this paragraph to each beneficiary upon enrollment
22 under the Program for services to be received
23 through such employment network. Upon issuance of
24 each report to each beneficiary, a copy of the report
25 shall be maintained in the files of the employment

1 network pertaining to the beneficiary. The program
2 manager shall ensure that copies of all such reports
3 issued under this paragraph are made available to
4 the public under reasonable terms.

5 “(g) INDIVIDUAL WORK PLANS.—

6 “(1) IN GENERAL.—Each employment network
7 shall—

8 “(A) take such measures as are necessary
9 to ensure that employment services, vocational
10 rehabilitation services, and other support serv-
11 ices provided under the Program by, or under
12 agreements entered into with, the employment
13 network are provided under appropriate individ-
14 ual work plans as defined by the Commissioner;
15 and

16 “(B) develop and implement each such in-
17 dividual work plan, in the case of each bene-
18 ficiary receiving such services, in a manner that
19 affords such beneficiary the opportunity to ex-
20 ercise informed choice in selecting an employ-
21 ment goal and specific services needed to
22 achieve that employment goal.

23 A beneficiary’s individual work plan shall take effect
24 upon approval by the beneficiary.

1 “(2) VOCATIONAL EVALUATION.—In devising
2 the work plan, the employment network shall under-
3 take a vocational evaluation with respect to the ben-
4 eficiary. Each vocational evaluation shall set forth in
5 writing such elements and shall be in such format as
6 the Commissioner shall prescribe. The Commissioner
7 may provide for waiver by the beneficiary of such a
8 vocational evaluation, subject to regulations which
9 shall be prescribed by the Commissioner providing
10 for the permissible timing of, and the circumstances
11 permitting, such a waiver.

12 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

13 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
14 PLOYMENT NETWORKS.—

15 “(A) IN GENERAL.—The Program shall
16 provide for payment authorized by the Commis-
17 sioner to employment networks under either an
18 outcome payment system or an outcome-mile-
19 stone payment system. Each employment net-
20 work shall elect which payment system will be
21 utilized by the employment network, and, for
22 such period of time as such election remains in
23 effect, the payment system so elected shall be
24 utilized exclusively in connection with such em-

1 employment network (except as provided in sub-
2 paragraph (B)).

3 “(B) METHOD OF PAYMENT TO EMPLOY-
4 MENT NETWORKS.—Any such election by an
5 employment network taking effect during any
6 period for which a disabled beneficiary is receiv-
7 ing services from such employment network
8 shall not be effective with respect to such bene-
9 ficiary to the extent that such election would re-
10 sult in any change in the method of payment to
11 the employment network with respect to serv-
12 ices provided to such beneficiary from the meth-
13 od of payment to the employment network with
14 respect to services provided to such beneficiary
15 as of immediately before such election.

16 “(2) OUTCOME PAYMENT SYSTEM.—

17 “(A) IN GENERAL.—The outcome payment
18 system shall consist of a payment structure gov-
19 erning employment networks electing such sys-
20 tem under paragraph (1)(A) which meets the
21 requirements of this paragraph.

22 “(B) PAYMENTS MADE DURING OUTCOME
23 PAYMENT PERIOD.—The outcome payment sys-
24 tem shall provide for a schedule of payments to
25 an employment network, in connection with

1 each individual who is a beneficiary, for each
 2 month, during the individual's outcome pay-
 3 ment period, for which benefits (described in
 4 paragraphs (2) and (3) of subsection (k)) are
 5 not payable to such individual.

6 “(C) COMPUTATION OF PAYMENTS TO EM-
 7 PLOYMENT NETWORK.—The payment schedule
 8 of the outcome payment system shall be de-
 9 signed so that—

10 “(i) the payment for each of the 60
 11 months during the outcome payment pe-
 12 riod for which benefits (described in para-
 13 graphs (2) and (3) of subsection (k)) are
 14 not payable is equal to a fixed percentage
 15 of the payment calculation base for the cal-
 16 endar year in which such month occurs;
 17 and

18 “(ii) such fixed percentage is set at a
 19 percentage which does not exceed 40 per-
 20 cent.

21 “(3) OUTCOME-MILESTONE PAYMENT SYS-
 22 TEM.—

23 “(A) IN GENERAL.—The outcome-mile-
 24 stone payment system shall consist of a pay-
 25 ment structure governing employment networks

1 electing such system under paragraph (1)(A)
2 which meets the requirements of this para-
3 graph.

4 “(B) EARLY PAYMENTS UPON ATTAIN-
5 MENT OF MILESTONES IN ADVANCE OF OUT-
6 COME PAYMENT PERIODS.—The outcome-mile-
7 stone payment system shall provide for 1 or
8 more milestones, with respect to beneficiaries
9 receiving services from an employment network
10 under the Program, which are directed toward
11 the goal of permanent employment. Such mile-
12 stones shall form a part of a payment structure
13 which provides, in addition to payments made
14 during outcome payment periods, payments
15 made prior to outcome payment periods in
16 amounts based on the attainment of such mile-
17 stones.

18 “(C) LIMITATION ON TOTAL PAYMENTS TO
19 EMPLOYMENT NETWORK.—The payment sched-
20 ule of the outcome milestone payment system
21 shall be designed so that the total of the pay-
22 ments to the employment network with respect
23 to each beneficiary is less than, on a net
24 present value basis (using an interest rate de-
25 termined by the Commissioner that appro-

1 priately reflects the cost of funds faced by pro-
2 viders), the total amount to which payments to
3 the employment network with respect to the
4 beneficiary would be limited if the employment
5 network were paid under the outcome payment
6 system.

7 “(4) DEFINITIONS.—For purposes of this
8 subsection—

9 “(A) PAYMENT CALCULATION BASE.—The
10 term ‘payment calculation base’ means, for any
11 calendar year—

12 “(i) in connection with a title II dis-
13 ability beneficiary, the average disability
14 insurance benefit payable under section
15 223 for all beneficiaries for months during
16 the preceding calendar year; and

17 “(ii) in connection with a title XVI
18 disability beneficiary (who is not concu-
19 rently a title II disability beneficiary), the
20 average payment of supplemental security
21 income benefits based on disability payable
22 under title XVI (excluding State sup-
23 plementation) for months during the pre-
24 ceding calendar year to all beneficiaries
25 who have attained at least 18 years of age.

1 “(B) OUTCOME PAYMENT PERIOD.—The
 2 term ‘outcome payment period’ means, in con-
 3 nection with any individual who had assigned a
 4 ticket to work and self-sufficiency to an employ-
 5 ment network under the Program, a period—

6 “(i) beginning with the first month,
 7 ending after the date on which such ticket
 8 was assigned to the employment network,
 9 for which benefits (described in paragraphs
 10 (2) and (3) of subsection (k)) are not pay-
 11 able to such individual by reason of en-
 12 gagement in work activity; and

13 “(ii) ending with the 60th month
 14 (consecutive or otherwise), ending after
 15 such date, for which such benefits are not
 16 payable to such individual by reason of en-
 17 gagement in work activity.

18 “(5) PERIODIC REVIEW AND ALTERATIONS OF
 19 PRESCRIBED SCHEDULES.—

20 “(A) PERCENTAGES AND PERIODS.—The
 21 Commissioner of Social Security shall periodi-
 22 cally review the percentage specified in para-
 23 graph (2)(C), the total payments permissible
 24 under paragraph (3)(C), and the period of time
 25 specified in paragraph (4)(B) to determine

1 whether such percentages, such permissible pay-
2 ments, and such period provide an adequate in-
3 centive for employment networks to assist bene-
4 ficiaries to enter the workforce, while providing
5 for appropriate economies. The Commissioner
6 may alter such percentage, such total permis-
7 sible payments, or such period of time to the
8 extent that the Commissioner determines, on
9 the basis of the Commissioner’s review under
10 this paragraph, that such an alteration would
11 better provide the incentive and economies de-
12 scribed in the preceding sentence.

13 “(B) NUMBER AND AMOUNT OF MILE-
14 STONE PAYMENTS.—The Commissioner shall
15 periodically review the number and amounts of
16 milestone payments established by the Commis-
17 sioner pursuant to this section to determine
18 whether they provide an adequate incentive for
19 employment networks to assist beneficiaries to
20 enter the workforce, taking into account infor-
21 mation provided to the Commissioner by pro-
22 gram managers, the Ticket to Work and Self-
23 Sufficiency Advisory Panel, and other reliable
24 sources. The Commissioner may from time to
25 time alter the number and amounts of mile-

1 stone payments initially established by the
2 Commissioner pursuant to this section to the
3 extent that the Commissioner determines that
4 such an alteration would allow an adequate in-
5 centive for employment networks to assist bene-
6 ficiaries to enter the workforce. Such alteration
7 shall be based on information provided to the
8 Commissioner by program managers, the Ticket
9 to Work and Self-Sufficiency Advisory Panel, or
10 other reliable sources.

11 “(i) SUSPENSION OF DISABILITY REVIEWS.—During
12 any period for which an individual is using a ticket to work
13 and self-sufficiency issued under this section, the Commis-
14 sioner (and any applicable State agency) may not initiate
15 a continuing disability review or other review under section
16 221 of whether the individual is or is not under a disability
17 or a review under title XVI similar to any such review
18 under section 221.

19 “(j) AUTHORIZATIONS.—

20 “(1) TITLE II DISABILITY BENEFICIARIES.—

21 There are authorized to be transferred from the
22 Federal Old-Age and Survivors Insurance Trust
23 Fund and the Federal Disability Insurance Trust
24 Fund each fiscal year such sums as may be nec-
25 essary to carry out the provisions of this section

1 with respect to title II disability beneficiaries. Money
2 paid from the Trust Funds under this section with
3 respect to title II disability beneficiaries who are en-
4 titled to benefits under section 223 or who are enti-
5 tled to benefits under section 202(d) on the basis of
6 the wages and self-employment income of such bene-
7 ficiaries, shall be charged to the Federal Disability
8 Insurance Trust Fund, and all other money paid
9 from the Trust Funds under this section shall be
10 charged to the Federal Old-Age and Survivors Insur-
11 ance Trust Fund. The Commissioner of Social Secu-
12 rity shall determine according to such methods and
13 procedures as shall be prescribed under this
14 section—

15 “(A) the total amount to be paid to pro-
16 gram managers and employment networks
17 under this section; and

18 “(B) subject to the provisions of the pre-
19 ceding sentence, the amount which should be
20 charged to each of the Trust Funds.

21 “(2) TITLE XVI DISABILITY BENEFICIARIES.—
22 Amounts authorized to be appropriated to the Social
23 Security Administration under section 1601 (as in
24 effect pursuant to the amendments made by section
25 301 of the Social Security Amendments of 1972)

1 shall include amounts necessary to carry out the
2 provisions of this section with respect to title XVI
3 disability beneficiaries.

4 “(k) DEFINITIONS.—For purposes of this section—

5 “(1) DISABLED BENEFICIARY.—The term ‘dis-
6 abled beneficiary’ means a title II disability bene-
7 ficiary or a title XVI disability beneficiary.

8 “(2) TITLE II DISABILITY BENEFICIARY.—The
9 term ‘title II disability beneficiary’ means an individ-
10 ual entitled to disability insurance benefits under
11 section 223 or to monthly insurance benefits under
12 section 202 based on such individual’s disability (as
13 defined in section 223(d)). An individual is a title II
14 disability beneficiary for each month for which such
15 individual is entitled to such benefits.

16 “(3) TITLE XVI DISABILITY BENEFICIARY.—
17 The term ‘title XVI disability beneficiary’ means an
18 individual eligible for supplemental security income
19 benefits under title XVI on the basis of blindness
20 (within the meaning of section 1614(a)(2)) or dis-
21 ability (within the meaning of section 1614(a)(3)).
22 An individual is a title XVI disability beneficiary for
23 each month for which such individual is eligible for
24 such benefits.

1 “(4) SUPPLEMENTAL SECURITY INCOME BENE-
2 FIT.—The term ‘supplemental security income bene-
3 fit under title XVI’ means a cash benefit under sec-
4 tion 1611 or 1619(a), and does not include a State
5 supplementary payment, administered federally or
6 otherwise.

7 “(1) REGULATIONS.—The Commissioner of Social Se-
8 curity shall prescribe such regulations as are necessary to
9 carry out the provisions of this section.”.

10 (b) CONFORMING AMENDMENTS.—

11 (1) AMENDMENTS TO TITLE II.—

12 (A) Section 221(c) of such Act (42 U.S.C.
13 421(c)) is amended by adding at the end the
14 following new paragraph:

15 “(4) For suspension of reviews under this subsection
16 in the case of an individual using a ticket to work and
17 self-sufficiency, see section 1147(i).”.

18 (B) Section 222(a) of such Act (42 U.S.C.
19 422(a)) is repealed.

20 (C) Section 222(b) of such Act (42 U.S.C.
21 422(b)) is repealed.

22 (D) Section 225(b)(1) of such Act (42
23 U.S.C. 425(b)(1)) is amended by striking “a
24 program of vocational rehabilitation services”
25 and inserting “a program consisting of the

1 Ticket to Work and Self-Sufficiency Program
2 under section 1147 or another program of voca-
3 tional rehabilitation services, employment serv-
4 ices, or other support services”.

5 (2) AMENDMENTS TO TITLE XVI.—

6 (A) Section 1615(a) of such Act (42
7 U.S.C. 1382d(a)) is amended to read as follows:

8 “SEC. 1615. (a) In the case of any blind or disabled
9 individual who—

10 “(1) has not attained age 16; and

11 “(2) with respect to whom benefits are paid
12 under this title,

13 the Commissioner of Social Security shall make provision
14 for referral of such individual to the appropriate State
15 agency administering the State program under title V.”.

16 (B) Section 1615(c) of such Act (42
17 U.S.C. 1382d(c)) is repealed.

18 (C) Section 1631(a)(6)(A) of such Act (42
19 U.S.C. 1383(a)(6)(A)) is amended by striking
20 “a program of vocational rehabilitation serv-
21 ices” and inserting “a program consisting of
22 the Ticket to Work and Self-Sufficiency Pro-
23 gram under section 1147 or another program of
24 vocational rehabilitation services, employment
25 services, or other support services”.

1 (D) Section 1633(c) of such Act (42
2 U.S.C. 1383b(c)) is amended—

3 (i) by inserting “(1)” after “(c)”; and

4 (ii) by adding at the end the following
5 new paragraph:

6 “(2) For suspension of continuing disability reviews
7 and other reviews under this title similar to reviews under
8 section 221 in the case of an individual using a ticket to
9 work and self-sufficiency, see section 1147(i).”.

10 (c) EFFECTIVE DATE.—Subject to subsection (d),
11 the amendments made by subsections (a) and (b) shall
12 take effect with the first month following 1 year after the
13 date of the enactment of this Act.

14 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

15 (1) IN GENERAL.—Not later than 1 year after
16 the date of the enactment of this Act, the Commis-
17 sioner of Social Security shall commence implemen-
18 tation of the amendments made by this section
19 (other than paragraphs (1)(C) and (2)(B) of sub-
20 section (b)) in graduated phases at phase-in sites se-
21 lected by the Commissioner. Such phase-in sites
22 shall be selected so as to ensure, prior to full imple-
23 mentation of the Ticket to Work and Self-Suffi-
24 ciency Program, the development and refinement of
25 referral processes, payment systems, computer link-

1 ages, management information systems, and admin-
2 istrative processes necessary to provide for full im-
3 plementation of such amendments. Subsection (c)
4 shall apply with respect to paragraphs (1)(C) and
5 (2)(B) of subsection (b) without regard to this sub-
6 section.

7 (2) REQUIREMENTS.—Implementation of the
8 Program at each phase-in site shall be carried out
9 on a wide enough scale to permit a thorough evalua-
10 tion of the alternative methods under consideration,
11 so as to ensure that the most efficacious methods
12 are determined and in place for full implementation
13 of the Program on a timely basis.

14 (3) FULL IMPLEMENTATION.—The Commis-
15 sioner shall ensure that the Program is fully imple-
16 mented as soon as practicable on or after the effec-
17 tive date specified in subsection (c) but not later
18 than 6 years after such date.

19 (4) ONGOING EVALUATION OF PROGRAM.—

20 (A) IN GENERAL.—The Commissioner
21 shall design and conduct a series of evaluations
22 to assess the cost-effectiveness of activities car-
23 ried out under this section and the amendments
24 made thereby, as well as the effects of this sec-
25 tion and the amendments made thereby on

1 work outcomes for beneficiaries receiving tickets
2 to work and self-sufficiency under the Program.

3 (B) METHODOLOGY.—

4 (i) DESIGN AND IMPLEMENTATION.—

5 The Commissioner shall design the series
6 of evaluations after receiving relevant ad-
7 vice from experts in the fields of disability,
8 vocational rehabilitation, and program
9 evaluation and individuals using tickets to
10 work and self-sufficiency under the Pro-
11 gram. In designing and carrying out such
12 evaluations, the Commissioner shall consult
13 with the Comptroller General of the United
14 States and other agencies of the Federal
15 Government and with private organizations
16 with appropriate expertise. Before provi-
17 sion of services begins under any phase of
18 Program implementation, the Commis-
19 sioner shall ensure that plans for such
20 evaluations and data collection methods
21 are in place and ready for implementation.

22 (ii) SPECIFIC MATTERS TO BE AD-
23 DRESSED.—Each such evaluation shall ad-
24 dress (but is not limited to):

1 (I) the annual cost (including net
2 cost) of the Program and the annual
3 cost (including net cost) that would
4 have been incurred in the absence of
5 the Program;

6 (II) the determinants of return to
7 work, including the characteristics of
8 beneficiaries in receipt of tickets
9 under the Program;

10 (III) the types of employment
11 services, vocational rehabilitation serv-
12 ices, and other support services fur-
13 nished to beneficiaries in receipt of
14 tickets under the Program who return
15 to work and to those who do not re-
16 turn to work;

17 (IV) the duration of employment
18 services, vocational rehabilitation serv-
19 ices, and other support services fur-
20 nished to beneficiaries in receipt of
21 tickets under the Program who return
22 to work and the duration of such serv-
23 ices furnished to those who do not re-
24 turn to work and the cost to employ-

1 ment networks of furnishing such
2 services;

3 (V) the employment outcomes,
4 including wages, occupations, benefits,
5 and hours worked, of beneficiaries
6 who return to work after receiving
7 tickets under the Program and those
8 who return to work without receiving
9 such tickets;

10 (VI) the characteristics of provid-
11 ers whose services are provided within
12 an employment network under the
13 Program;

14 (VII) the extent (if any) to which
15 employment networks display a great-
16 er willingness to provide services to
17 disabled beneficiaries;

18 (VIII) the characteristics (includ-
19 ing employment outcomes) of those
20 beneficiaries who receive services
21 under the outcome payment system
22 and of those beneficiaries who receive
23 services under the outcome-milestone
24 payment system;

1 (IX) measures of satisfaction
2 among beneficiaries in receipt of tick-
3 ets under the Program; and

4 (X) reasons for (including com-
5 ments solicited from beneficiaries re-
6 garding) their choice not to use their
7 tickets or their inability to return to
8 work despite the use of their tickets.

9 (C) PERIODIC EVALUATION REPORTS.—

10 Following the close of the third and fifth fiscal
11 years ending after the effective date under sub-
12 section (c), and prior to the close of the seventh
13 fiscal year ending after such date, the Commis-
14 sioner shall transmit to the Committee on Ways
15 and Means of the House of Representatives and
16 the Committee on Finance of the Senate a re-
17 port containing the Commissioner's evaluation
18 of the progress of activities conducted under the
19 provisions of this section and the amendments
20 made thereby. Each such report shall set forth
21 the Commissioner's evaluation of the extent to
22 which the Program has been successful and the
23 Commissioner's conclusions on whether or how
24 the Program should be modified. Each such re-
25 port shall include such data, findings, materials,

1 and recommendations as the Commissioner may
2 consider appropriate.

3 (5) EXTENT OF STATE'S RIGHT OF FIRST RE-
4 FUSAL IN ADVANCE OF FULL IMPLEMENTATION OF
5 AMENDMENTS IN SUCH STATE.—

6 (A) IN GENERAL.—In the case of any
7 State in which the amendments made by sub-
8 section (a) have not been fully implemented
9 pursuant to this subsection, the Commissioner
10 shall determine by regulation the extent to
11 which—

12 (i) the requirement under section
13 222(a) of the Social Security Act for
14 prompt referrals to a State agency; and

15 (ii) the authority of the Commissioner
16 under section 222(d)(2) of such Act to
17 provide vocational rehabilitation services in
18 such State by agreement or contract with
19 other public or private agencies, organiza-
20 tions, institutions, or individuals,
21 shall apply in such State.

22 (B) EXISTING AGREEMENTS.—Nothing in
23 subparagraph (A) or the amendments made by
24 subsection (a) shall be construed to limit, im-
25 pede, or otherwise affect any agreement entered

1 into pursuant to section 222(d)(2) of the Social
2 Security Act before the date of the enactment
3 of this Act with respect to services provided
4 pursuant to such agreement to beneficiaries re-
5 ceiving services under such agreement as of
6 such date, except with respect to services (if
7 any) to be provided after 6 years after the ef-
8 fective date provided in subsection (e).

9 (e) THE TICKET TO WORK AND SELF-SUFFICIENCY
10 ADVISORY PANEL.—

11 (1) ESTABLISHMENT.—There is established in
12 the executive branch a panel to be known as the
13 “Ticket to Work and Self-Sufficiency Advisory
14 Panel” (in this subsection referred to as the
15 “Panel”).

16 (2) DUTIES OF PANEL.—It shall be the duty of
17 the Panel to—

18 (A) advise the Commissioner of Social Se-
19 curity on establishing phase-in sites for the
20 Ticket to Work and Self-Sufficiency Program
21 and on fully implementing the Program there-
22 after;

23 (B) advise the Commissioner with respect
24 to the refinement of access of disabled bene-
25 ficiaries to employment networks, payment sys-

1 tems, and management information systems
2 and advise the Commissioner whether such
3 measures are being taken to the extent nec-
4 essary to ensure the success of the Program;

5 (C) advise the Commissioner regarding the
6 most effective designs for research and dem-
7 onstration projects associated with the Program
8 or conducted pursuant to subsection (h);

9 (D) advise the Commissioner on the devel-
10 opment of performance measurements relating
11 to quality assurance under section 1147(d)(6)
12 of the Social Security Act; and

13 (E) furnish progress reports on the Pro-
14 gram to the President and each House of the
15 Congress.

16 (3) MEMBERSHIP.—

17 (A) NUMBER AND APPOINTMENT.—The
18 Panel shall be composed of 6 members as fol-
19 lows:

20 (i) one member appointed by the
21 Chairman of the Committee on Ways and
22 Means of the House of Representatives;

23 (ii) one member appointed by the
24 ranking minority member of the Commit-

1 tee on Ways and Means of the House of
2 Representatives;

3 (iii) one member appointed by the
4 Chairman of the Committee on Finance of
5 the Senate;

6 (iv) one member appointed by the
7 ranking minority member of the Commit-
8 tee on Finance of the Senate; and

9 (v) two members appointed by the
10 President, who may not be of the same po-
11 litical party.

12 (B) REPRESENTATION.—Of the members
13 appointed under subparagraph (A), at least 4
14 shall have experience or expert knowledge as a
15 recipient, provider, employer, or employee in the
16 fields of, or related to, employment services, vo-
17 cational rehabilitation services, and other sup-
18 port services, of whom—

19 (i) at least 1 shall represent the inter-
20 ests of recipients of employment services,
21 vocational rehabilitation services, and other
22 support services;

23 (ii) at least 1 shall represent the in-
24 terests of providers of employment serv-

1 ices, vocational rehabilitation services, and
2 other support services;

3 (iii) at least 1 shall represent the in-
4 terests of private employers;

5 (iv) at least 1 shall represent the in-
6 terests of employees; and

7 (v) at least 1 shall be an individual
8 who is or has been a recipient of benefits
9 under title II or title XVI based on disabil-
10 ity.

11 (C) TERMS.—

12 (i) IN GENERAL.—Each member shall
13 be appointed for a term of 4 years (or, if
14 less, for the remaining life of the Panel),
15 except as provided in clauses (ii) and (iii).
16 The initial members shall be appointed not
17 later than 90 days after the date of the en-
18 actment of this Act.

19 (ii) TERMS OF INITIAL AP-
20 POINTEES.—As designated by the Presi-
21 dent at the time of appointment, of the
22 members first appointed—

23 (I) three of the members ap-
24 pointed under subparagraph (A) shall

1 be appointed for a term of 2 years;
2 and

3 (II) three of the members ap-
4 pointed under subparagraph (A) shall
5 be appointed for a term of 4 years.

6 (iii) VACANCIES.—Any member ap-
7 pointed to fill a vacancy occurring before
8 the expiration of the term for which the
9 member's predecessor was appointed shall
10 be appointed only for the remainder of that
11 term. A member may serve after the expi-
12 ration of that member's term until a suc-
13 cessor has taken office. A vacancy in the
14 Panel shall be filled in the manner in
15 which the original appointment was made.

16 (D) BASIC PAY.—Members shall each be
17 paid at a rate equal to the daily equivalent of
18 the rate of basic pay for level 4 of the Senior
19 Executive Service, as in effect from time to
20 time under section 5382 of title 5, United
21 States Code, for each day (including travel
22 time) during which they are engaged in the ac-
23 tual performance of duties vested in the Panel.

24 (E) TRAVEL EXPENSES.—Each member
25 shall receive travel expenses, including per diem

1 in lieu of subsistence, in accordance with sec-
2 tions 5702 and 5703 of title 5, United States
3 Code.

4 (F) QUORUM.—Four members of the
5 Panel shall constitute a quorum but a lesser
6 number may hold hearings.

7 (G) CHAIRPERSON.—The Chairperson of
8 the Panel shall be designated by the President.
9 The term of office of the Chairperson shall be
10 4 years.

11 (H) MEETINGS.—The Panel shall meet at
12 least quarterly and at other times at the call of
13 the Chairperson or a majority of its members.

14 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
15 AND CONSULTANTS.—

16 (A) DIRECTOR.—The Panel shall have a
17 Director who shall be appointed by the Panel.
18 The Director shall be paid at a rate not to ex-
19 ceed the maximum rate of pay payable for GS-
20 15 of the General Schedule.

21 (B) STAFF.—Subject to rules prescribed
22 by the Panel, the Director may appoint and fix
23 the pay of additional personnel as the Director
24 considers appropriate.

1 (C) EXPERTS AND CONSULTANTS.—Sub-
2 ject to rules prescribed by the Panel, the Direc-
3 tor may procure temporary and intermittent
4 services under section 3109(b) of title 5, United
5 States Code.

6 (D) STAFF OF FEDERAL AGENCIES.—
7 Upon request of the Panel, the head of any
8 Federal department or agency may detail, on a
9 reimbursable basis, any of the personnel of that
10 department or agency to the Panel to assist it
11 in carrying out its duties under this Act.

12 (5) POWERS OF PANEL.—

13 (A) HEARINGS AND SESSIONS.—The Panel
14 may, for the purpose of carrying out its duties
15 under this subsection, hold such hearings, sit
16 and act at such times and places, and take such
17 testimony and evidence as the Panel considers
18 appropriate.

19 (B) POWERS OF MEMBERS AND AGENTS.—
20 Any member or agent of the Panel may, if au-
21 thorized by the Panel, take any action which
22 the Panel is authorized to take by this section.

23 (C) MAILS.—The Panel may use the
24 United States mails in the same manner and

1 under the same conditions as other departments
2 and agencies of the United States.

3 (D) ADMINISTRATIVE SUPPORT SERV-
4 ICES.—Upon the request of the Panel, the Ad-
5 ministrator of General Services shall provide to
6 the Panel, on a reimbursable basis, the admin-
7 istrative support services necessary for the
8 Panel to carry out its duties under this sub-
9 section.

10 (6) REPORTS.—

11 (A) INTERIM REPORTS.—The Panel shall
12 submit to the President and the Congress in-
13 terim reports at least annually.

14 (B) FINAL REPORT.—The Panel shall
15 transmit a final report to the President and the
16 Congress not later than 8 years after the date
17 of the enactment of this Act. The final report
18 shall contain a detailed statement of the find-
19 ings and conclusions of the Panel, together with
20 its recommendations for legislation and admin-
21 istrative actions which the Panel considers ap-
22 propriate.

23 (7) TERMINATION.—The Panel shall terminate
24 30 days after the date of the submission of its final
25 report under paragraph (6)(B).

1 (8) AUTHORIZATION OF APPROPRIATIONS.—

2 There are authorized to be appropriated from the
3 Federal Old-Age and Survivors Insurance Trust
4 Fund, the Federal Disability Insurance Trust Fund,
5 and the general fund of the Treasury, as appro-
6 priate, such sums as are necessary to carry out this
7 subsection.

8 (f) SPECIFIC REGULATIONS REQUIRED.—

9 (1) IN GENERAL.—The Commissioner of Social
10 Security shall prescribe such regulations as are nec-
11 essary to implement the amendments made by this
12 section.

13 (2) SPECIFIC MATTERS TO BE INCLUDED IN
14 REGULATIONS.—The matters which shall be ad-
15 dressed in such regulations shall include (but are not
16 limited to)—

17 (A) the form and manner in which tickets
18 to work and self-sufficiency may be distributed
19 to beneficiaries pursuant to section 1147(b)(1)
20 of the Social Security Act;

21 (B) the format and wording of such tick-
22 ets, which shall incorporate by reference any
23 contractual terms governing service by employ-
24 ment networks under the Program;

1 (C) the form and manner in which State
2 agencies may elect participation in the Ticket to
3 Work and Self-Sufficiency Program (and revoke
4 such an election) pursuant to section
5 1147(c)(1) of such Act and provision for peri-
6 odic opportunities for exercising such elections
7 (and revocations);

8 (D) the status of State agencies under sec-
9 tion 1147(c)(2) of such Act at the time that
10 State agencies exercise elections (and revoca-
11 tions) under section 1147(c)(1) of such Act;

12 (E) the terms of agreements to be entered
13 into with program managers pursuant to sec-
14 tion 1147(d) of such Act, including (but not
15 limited to)—

16 (i) the terms by which program man-
17 agers are precluded from direct participa-
18 tion in the delivery of services pursuant to
19 section 1147(d)(3) of such Act;

20 (ii) standards which must be met by
21 quality assurance measures referred to in
22 paragraph (6) of section 1147(d) of such
23 Act and methods of recruitment of employ-
24 ment networks utilized pursuant to para-

1 graph (2) of section 1147(e) of such Act;

2 and

3 (iii) the format under which dispute
4 resolution will operate under section
5 1147(d)(7) of such Act;

6 (F) the terms of agreements to be entered
7 into with employment networks pursuant to sec-
8 tion 1147(d)(4) of such Act, including (but not
9 limited to)—

10 (i) the manner in which service areas
11 are specified pursuant to section
12 1147(f)(2)(A) of such Act;

13 (ii) the general selection criteria and
14 the specific selection criteria which are ap-
15 plicable to employment networks under
16 section 1147(f)(2)(B) of such Act in select-
17 ing service providers;

18 (iii) specific requirements relating to
19 annual financial reporting by employment
20 networks pursuant to section 1147(f)(3) of
21 such Act; and

22 (iv) the national model to which peri-
23 odic outcomes reporting by employment
24 networks must conform under section
25 1147(f)(4) of such Act;

1 (G) standards which must be met by indi-
2 vidual work plans pursuant to section 1147(g)
3 of such Act;

4 (H) standards which must be met by pay-
5 ment systems required under section 1147(h) of
6 such Act, including (but not limited to)—

7 (i) the form and manner in which
8 elections by employment networks of pay-
9 ment systems are to be exercised pursuant
10 to section 1147(h)(1)(A) of such Act;

11 (ii) the terms which must be met by
12 an outcome payment system under section
13 1147(h)(2) of such Act;

14 (iii) the terms which must be met by
15 an outcome-milestone payment system
16 under section 1147(h)(3) of such Act;

17 (iv) any revision of the percentage
18 specified in paragraph (2)(C) of section
19 1147(h) of such Act or the period of time
20 specified in paragraph (4)(B) of section
21 1147(h) of such Act; and

22 (v) annual oversight procedures for
23 such systems; and

24 (I) procedures for effective oversight of the
25 Program by the Commissioner of Social Secu-

1 rity, including periodic reviews and reporting
2 requirements.

3 (g) WORK INCENTIVE SPECIALISTS.—The Commis-
4 sioner shall establish a corps of trained, accessible, and
5 responsive work incentive specialists to specialize in title
6 II and title XVI disability work incentives for the purpose
7 of disseminating accurate information to disabled bene-
8 ficiaries (as defined in section 1147(k)(1) of the Social
9 Security Act, as amended by this Act) with respect to in-
10 quires and issues relating to work incentives.

11 (h) DEMONSTRATION PROJECTS PROVIDING FOR RE-
12 Ductions IN DISABILITY INSURANCE BENEFITS BASED
13 ON EARNINGS. —

14 (1) AUTHORITY.—The Commissioner shall con-
15 duct demonstration projects for the purpose of eval-
16 uating, through the collection of data, a program for
17 title II disability beneficiaries (as defined in section
18 1147(k)(2) of the Social Security Act, as amended
19 by this Act) under which each \$1 of benefits payable
20 under section 223 of the Social Security Act, or
21 under section 202 of such Act based on the bene-
22 ficiary's disability, is reduced for each \$2 of such
23 beneficiary's earnings that is above a level to be de-
24 termined by the Commissioner. Such projects shall
25 be conducted at a number of localities which the

1 Commissioner shall determine is sufficient to ade-
2 quately evaluate the appropriateness of national im-
3 plementation of such a program. Such projects shall
4 identify reductions in Federal expenditures that may
5 result from the permanent implementation of such
6 a program.

7 (2) SCOPE AND SCALE AND MATTERS TO BE
8 DETERMINED.—

9 (A) IN GENERAL.—The demonstration
10 projects developed under paragraph (1) shall be
11 of sufficient duration, shall be of sufficient
12 scope, and shall be carried out on a wide
13 enough scale to permit a thorough evaluation of
14 the project to determine—

15 (i) the effects, if any, of induced entry
16 and reduced exit;

17 (ii) the extent, if any, to which the
18 project being tested is affected by whether
19 it is in operation in a locality within an
20 area under the administration of the Tick-
21 et to Work and Self-Sufficiency Program;
22 and

23 (iii) the savings that accrue to the
24 Trust Funds and other Federal programs
25 under the project being tested.

1 The Commissioner shall take into account ad-
2 vice provided by the Ticket to Work and Self-
3 Sufficiency Advisory Panel pursuant to sub-
4 section (e)(2)(C).

5 (B) ADDITIONAL MATTERS.—The Commis-
6 sioner shall also determine with respect to each
7 project—

8 (i) the annual cost (including net
9 cost) of the project and the annual cost
10 (including net cost) that would have been
11 incurred in the absence of the project;

12 (ii) the determinants of return to
13 work, including the characteristics of the
14 beneficiaries who participate in the project;
15 and

16 (iii) the employment outcomes, includ-
17 ing wages, occupations, benefits, and hours
18 worked, of beneficiaries who return to work
19 as a result of participation in the project.

20 The Commissioner may include within the mat-
21 ters evaluated under the project the merits of
22 trial work periods and periods of extended eligi-
23 bility.

24 (3) WAIVERS.—The Commissioner may waive
25 compliance with the benefit provisions of title II of

1 the Social Security Act, and the Secretary of Health
2 and Human Services may waive compliance with the
3 benefit requirements of title XVIII of such Act, in
4 so far as is necessary for a thorough evaluation of
5 the alternative methods under consideration. No
6 such project shall be actually placed in operation un-
7 less at least 90 days prior thereto a written report,
8 prepared for purposes of notification and informa-
9 tion only and containing a full and complete descrip-
10 tion thereof, has been transmitted by the Commis-
11 sioner to the Committee on Ways and Means of the
12 House of Representatives and to the Committee on
13 Finance of the Senate. Periodic reports on the
14 progress of such projects shall be submitted by the
15 Commissioner to such committees. When appro-
16 priate, such reports shall include detailed rec-
17 ommendations for changes in administration or law,
18 or both, to carry out the objectives stated in para-
19 graph (1).

20 (4) INTERIM REPORTS.—On or before June 9
21 in 2000 and each of the succeeding years thereafter,
22 the Commissioner shall submit to the Congress an
23 interim report on the progress of the demonstration
24 projects carried out under this subsection together

1 with any related data and materials which the Com-
2 missioner may consider appropriate.

3 (5) FINAL REPORT.—The Commissioner shall
4 submit to the Congress a final report with respect
5 to all demonstration projects carried out under this
6 section no later than 1 year after their completion.

7 (6) EXPENDITURES.—Expenditures made for
8 demonstration projects under this subsection shall
9 be made from the Federal Disability Insurance
10 Trust Fund and the Federal Old-Age and Survivors
11 Insurance Trust Fund, as determined appropriate by
12 the Commissioner, and from the Federal Hospital
13 Insurance Trust Fund and the Federal Supple-
14 mentary Medical Insurance Trust Fund, as deter-
15 mined appropriate by the Secretary of Health and
16 Human Services, to the extent provided in advance
17 in appropriation Acts.

18 (i) STUDY BY GENERAL ACCOUNTING OFFICE OF
19 EXISTING DISABILITY-RELATED EMPLOYMENT INCEN-
20 TIVES.—

21 (1) STUDY.—As soon as practicable after the
22 date of the enactment of this Act, the Comptroller
23 General of the United States shall undertake a study
24 to assess existing tax credits and other disability-re-
25 lated employment incentives under the Americans

1 with Disabilities Act of 1990 and other Federal
2 laws. In such study, the Comptroller General shall
3 specifically address the extent to which such credits
4 and other incentives would encourage employers to
5 hire and retain individuals with disabilities under the
6 Ticket to Work and Self-Sufficiency Program.

7 (2) REPORT.—Not later than 3 years after the
8 date of the enactment of this Act, the Comptroller
9 General shall transmit to the Committee on Ways
10 and Means of the House of Representatives and the
11 Committee on Finance of the Senate a written re-
12 port presenting the results of the Comptroller Gen-
13 eral's study conducted pursuant to this subsection,
14 together with such recommendations for legislative
15 or administrative changes as the Comptroller Gen-
16 eral may determine to be appropriate.

17 (j) STUDY BY GENERAL ACCOUNTING OFFICE OF
18 EXISTING COORDINATION OF THE DI AND SSI PROGRAMS
19 AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAV-
20 ING CONCURRENT ENTITLEMENT.—

21 (1) STUDY.—As soon as practicable after the
22 date of the enactment of this Act, the Comptroller
23 General of the United States shall undertake a study
24 to evaluate the coordination under current law of the
25 disability insurance program under title II of the So-

1 cial Security Act and the supplemental security in-
2 come program under title XVI of such Act, as such
3 programs relate to individuals entering or leaving
4 concurrent entitlement under such programs. In
5 such study, the Comptroller General shall specifically
6 address the effectiveness of work incentives under
7 such programs with respect to such individuals and
8 the effectiveness of coverage of such individuals
9 under titles XVIII and XIX of such Act.

10 (2) REPORT.—Not later than 18 months after
11 the date of the enactment of this Act, the Comptrol-
12 ler General shall transmit to the Committee on
13 Ways and Means of the House of Representatives
14 and the Committee on Finance of the Senate a writ-
15 ten report presenting the results of the Comptroller
16 General’s study conducted pursuant to this sub-
17 section, together with such recommendations for leg-
18 islative or administrative changes as the Comptroller
19 General may determine to be appropriate.

1 **SEC. 3. EXTENDING MEDICARE COVERAGE FOR OASDI DIS-**
2 **ABILITY BENEFIT RECIPIENTS WHO ARE**
3 **USING TICKETS TO WORK AND SELF-SUFFI-**
4 **CIENCY.**

5 (a) IN GENERAL.—The next to last sentence of sec-
6 tion 226(b) of the Social Security Act (42 U.S.C. 426)
7 is amended—

8 (1) by striking “throughout all of which” and
9 inserting “throughout the first 24 months of which”;
10 and

11 (2) by inserting after “but not in excess of 24
12 such months” the following: “(plus 24 additional
13 such months in the case of an individual who the
14 Commissioner determines is using a ticket to work
15 and self-sufficiency issued under section 1147, but
16 only for additional months that occur in the 7-year
17 period beginning on the date of the enactment of the
18 Ticket to Work and Self-Sufficiency Act of 1999)”.

19 (b) REPORT.—Not later than 6 months prior to the
20 end of the 7-year period beginning on the date of the en-
21 actment of this Act, the Secretary of Health and Human
22 Services and the Commissioner of Social Security shall
23 submit in writing to each House of the Congress their rec-
24 ommendations for further legislative action with respect
25 to the amendments made by subsection (a), taking into
26 account experience derived from efforts to achieve full im-

1 “(ii) there is pending, with respect to
2 such claim, a readjudication by the Com-
3 missioner of Social Security pursuant to
4 relief in a class action or implementation
5 by the Commissioner of a court remand
6 order.

7 “(E) Notwithstanding the provisions of
8 this paragraph, with respect to any individual
9 for whom the Commissioner of Social Security
10 does not perform the entitlement redetermina-
11 tion before the date prescribed in subparagraph
12 (C), the Commissioner shall perform such enti-
13 tlement redetermination in lieu of a continuing
14 disability review whenever the Commissioner de-
15 termines that the individual’s entitlement is
16 subject to redetermination based on the preced-
17 ing provisions of this paragraph, and the provi-
18 sions of section 223(f) of the Social Security
19 Act shall not apply to such redetermination.”.

20 (b) CORRECTION TO EFFECTIVE DATE OF PROVI-
21 SIONS CONCERNING REPRESENTATIVE PAYEES AND
22 TREATMENT REFERRALS OF SOCIAL SECURITY BENE-
23 FICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—
24 Section 105(a)(5)(B) of such Act (Public Law 104–121;
25 110 Stat. 853) is amended to read as follows:

1 rity Independence and Program Improvements Act of
2 1994 (Public Law 103–296; 108 Stat. 1531), is further
3 amended—

4 (1) in paragraph (1) of subsection (a), by add-
5 ing at the end the following new sentence: “The
6 Commissioner may expand the scope of any such
7 demonstration project to include any group of appli-
8 cants for benefits under such program with impair-
9 ments which may reasonably be presumed to be dis-
10 abling for purposes of such demonstration project,
11 and may limit any such demonstration project to
12 any such group of applicants, subject to the terms
13 of such demonstration project which shall define the
14 extent of any such presumption.”;

15 (2) in paragraph (3) of subsection (a), by strik-
16 ing “June 10, 1996” and inserting “June 10,
17 2001”;

18 (3) in paragraph (4) of subsection (a), by in-
19 serting “and on or before October 1, 2000,” after
20 “1995,”; and

21 (4) in subsection (c), by striking “October 1,
22 1996” and inserting “October 1, 2001”.

23 (b) EFFECTIVE DATE.—The amendments made by
24 subsection (a) shall take effect on the date of the enact-
25 ment of this Act.

1 **SEC. 6. TREATMENT OF PRISONERS.**

2 (a) IMPLEMENTATION OF PROHIBITION AGAINST
3 PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

4 (1) IN GENERAL.—Section 202(x)(3) of the So-
5 cial Security Act (42 U.S.C. 402(x)(3)) is
6 amended—

7 (A) by inserting “(A)” after “(3)”; and

8 (B) by adding at the end the following new
9 subparagraph:

10 “(B)(i) The Commissioner shall enter into an agree-
11 ment under this subparagraph with any interested State
12 or local institution comprising a jail, prison, penal institu-
13 tion, or correctional facility, or comprising any other insti-
14 tution a purpose of which is to confine individuals as de-
15 scribed in paragraph (1)(A)(ii). Under such agreement—

16 “(I) the institution shall provide to the Com-
17 missioner, on a monthly basis and in a manner spec-
18 ified by the Commissioner, the names, Social Secu-
19 rity account numbers, dates of birth, confinement
20 commencement dates, and, to the extent available to
21 the institution, such other identifying information
22 concerning the individuals confined in the institution
23 as the Commissioner may require for the purpose of
24 carrying out paragraph (1); and

25 “(II) the Commissioner shall pay to the institu-
26 tion, with respect to information described in sub-

1 clause (I) concerning each individual who is confined
2 therein as described in paragraph (1)(A), who re-
3 ceives a benefit under this title for the month pre-
4 ceding the first month of such confinement, and
5 whose benefit under this title is determined by the
6 Commissioner to be not payable by reason of con-
7 finement based on the information provided by the
8 institution, \$400 (subject to reduction under clause
9 (ii)) if the institution furnishes the information to
10 the Commissioner within 30 days after the date such
11 individual's confinement in such institution begins,
12 or \$200 (subject to reduction under clause (ii)) if
13 the institution furnishes the information after 30
14 days after such date but within 90 days after such
15 date.

16 “(ii) The dollar amounts specified in clause (i)(II)
17 shall be reduced by 50 percent if the Commissioner is also
18 required to make a payment to the institution with respect
19 to the same individual under an agreement entered into
20 under section 1611(e)(1)(I).

21 “(iii) The provisions of section 552a of title 5, United
22 States Code, shall not apply to any agreement entered into
23 under clause (i) or to information exchanged pursuant to
24 such agreement.

1 “(iv) There is authorized to be transferred from the
2 Federal Old-Age and Survivors Insurance Trust Fund and
3 the Federal Disability Insurance Trust Fund, as appro-
4 priate, such sums as may be necessary to enable the Com-
5 missioner to make payments to institutions required by
6 clause (i)(II).

7 “(v) The Commissioner is authorized to provide, on
8 a reimbursable basis, information obtained pursuant to
9 agreements entered into under clause (i) to any agency
10 administering a Federal or federally-assisted cash, food,
11 or medical assistance program for eligibility purposes.”.

12 (2) EFFECTIVE DATE.—The amendments made
13 by this subsection shall apply to individuals whose
14 period of confinement in an institution commences
15 on or after the first day of the fourth month begin-
16 ning after the month in which this Act is enacted.

17 (b) ELIMINATION OF TITLE II REQUIREMENT THAT
18 CONFINEMENT STEM FROM CRIME PUNISHABLE BY IM-
19 PRISONMENT FOR MORE THAN 1 YEAR.—

20 (1) IN GENERAL.—Section 202(x)(1)(A) of such
21 Act (42 U.S.C. 402(x)(1)(A)) is amended—

22 (A) in the matter preceding clause (i), by
23 striking “during” and inserting “throughout”;

24 (B) in clause (i), by striking “an offense
25 punishable by imprisonment for more than 1

1 year (regardless of the actual sentence im-
 2 posed)” and inserting “a criminal offense”; and

3 (C) in clause (ii)(I), by striking “an of-
 4 fense punishable by imprisonment for more
 5 than 1 year” and inserting “a criminal of-
 6 fense”.

7 (2) EFFECTIVE DATE.—The amendments made
 8 by this subsection shall apply to individuals whose
 9 period of confinement in an institution commences
 10 on or after the first day of the fourth month begin-
 11 ning after the month in which this Act is enacted.

12 (c) CONFORMING TITLE XVI AMENDMENTS.—

13 (1) FIFTY PERCENT REDUCTION IN TITLE XVI
 14 PAYMENT IN CASE INVOLVING COMPARABLE TITLE II
 15 PAYMENT.—Section 1611(e)(1)(I) of the Social Se-
 16 curity Act (42 U.S.C. 1382(e)(1)(I)) is amended—

17 (A) in clause (i)(II), by inserting “(subject
 18 to reduction under clause (ii))” after “\$400”
 19 and after “\$200”;

20 (B) by redesignating clauses (ii) and (iii)
 21 as clauses (iii) and (iv) respectively; and

22 (C) by inserting after clause (i) the follow-
 23 ing new clause:

24 “(ii) The dollar amounts specified in clause (i)(II)
 25 shall be reduced by 50 percent if the Commissioner is also

1 required to make a payment to the institution with respect
2 to the same individual under an agreement entered into
3 under section 202(x)(3)(B).”.

4 (2) EXPANSION OF CATEGORIES OF INSTITU-
5 TIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH
6 THE COMMISSIONER.—Section 1611(e)(1)(I)(i) of
7 such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in
8 the matter preceding subclause (I) by striking “in-
9 stitution” and all that follows through “section
10 202(x)(1)(A),” and inserting “institution comprising
11 a jail, prison, penal institution, or correctional facil-
12 ity, or with any other interested State or local insti-
13 tution a purpose of which is to confine individuals
14 as described in section 202(x)(1)(A)(ii).”.

15 (3) EFFECTIVE DATE.—The amendments made
16 by this subsection shall take effect as if included in
17 the enactment of section 203(a) of the Personal Re-
18 sponsibility and Work Opportunity Reconciliation
19 Act of 1996 (Public Law 104–193; 110 Stat. 2186).
20 The reference to section 202(x)(1)(A)(ii) of the So-
21 cial Security Act in section 1611(e)(1)(I)(i) of such
22 Act as amended by paragraph (2) shall be deemed
23 a reference to such section 202(x)(1)(A)(ii) as
24 amended by subsection (b)(1)(C).

1 (d) CONTINUED DENIAL OF BENEFITS TO SEX OF-
2 FENDERS REMAINING CONFINED TO PUBLIC INSTITU-
3 TIONS UPON COMPLETION OF PRISON TERM.—

4 (1) IN GENERAL.—Section 202(x)(1)(A) of the
5 Social Security Act (42 U.S.C. 402(x)(1)(A)) is
6 amended—

7 (A) in clause (i), by striking “or” at the
8 end;

9 (B) in clause (ii)(IV), by striking the pe-
10 riod and inserting “, or”; and

11 (C) by adding at the end the following new
12 clause:

13 “(iii) immediately upon completion of confine-
14 ment as described in clause (i) pursuant to convic-
15 tion of a criminal offense an element of which is sex-
16 ual activity, is confined by court order in an institu-
17 tion at public expense pursuant to a finding that the
18 individual is a sexually dangerous person or a sexual
19 predator or a similar finding.”.

20 (2) CONFORMING AMENDMENT.—Section
21 202(x)(1)(B)(ii) of such Act (42 U.S.C.
22 402(x)(1)(B)(ii)) is amended by striking “clause
23 (ii)” and inserting “clauses (ii) and (iii)”.

24 (3) EFFECTIVE DATE.—The amendments made
25 by this subsection shall apply with respect to bene-

1 fits for months ending after the date of the enact-
2 ment of this Act.

3 **SEC. 7. REVOCATION BY MEMBERS OF THE CLERGY OF EX-**
4 **EMPTION FROM SOCIAL SECURITY COV-**
5 **ERAGE.**

6 (a) IN GENERAL.—Notwithstanding section
7 1402(e)(4) of the Internal Revenue Code of 1986, any ex-
8 emption which has been received under section 1402(e)(1)
9 of such Code by a duly ordained, commissioned, or li-
10 censed minister of a church, a member of a religious order,
11 or a Christian Science practitioner, and which is effective
12 for the taxable year in which this Act is enacted, may be
13 revoked by filing an application therefor (in such form and
14 manner, and with such official, as may be prescribed in
15 regulations made under chapter 2 of such Code), if such
16 application is filed no later than the due date of the Fed-
17 eral income tax return (including any extension thereof)
18 for the applicant's second taxable year beginning after De-
19 cember 31, 1998. Any such revocation shall be effective
20 (for purposes of chapter 2 of the Internal Revenue Code
21 of 1986 and title II of the Social Security Act), as speci-
22 fied in the application, either with respect to the appli-
23 cant's first taxable year beginning after December 31,
24 1998, or with respect to the applicant's second taxable
25 year beginning after such date, and for all succeeding tax-

1 able years; and the applicant for any such revocation may
2 not thereafter again file application for an exemption
3 under such section 1402(e)(1). If the application is filed
4 after the due date of the applicant's Federal income tax
5 return for a taxable year and is effective with respect to
6 that taxable year, it shall include or be accompanied by
7 payment in full of an amount equal to the total of the
8 taxes that would have been imposed by section 1401 of
9 the Internal Revenue Code of 1986 with respect to all of
10 the applicant's income derived in that taxable year which
11 would have constituted net earnings from self-employment
12 for purposes of chapter 2 of such Code (notwithstanding
13 section 1402 (c)(4) or (c)(5) of such Code) except for the
14 exemption under section 1402(e)(1) of such Code.

15 (b) EFFECTIVE DATE.—Subsection (a) shall apply
16 with respect to service performed (to the extent specified
17 in such subsection) in taxable years beginning after De-
18 cember 31, 1998, and with respect to monthly insurance
19 benefits payable under title II of the Social Security Act
20 on the basis of the wages and self-employment income of
21 any individual for months in or after the calendar year
22 in which such individual's application for revocation (as
23 described in such subsection) is effective (and lump-sum
24 death payments payable under such title on the basis of

1 such wages and self-employment income in the case of
2 deaths occurring in or after such calendar year).

3 **SEC. 8. ADDITIONAL TECHNICAL AMENDMENT RELATING**
4 **TO COOPERATIVE RESEARCH OR DEM-**
5 **ONSTRATION PROJECTS UNDER TITLES II**
6 **AND XVI.**

7 (a) **IN GENERAL.**—Section 1110(a)(3) of the Social
8 Security Act (42 U.S.C. 1310(a)(3)) is amended by strik-
9 ing “title XVI” and inserting “title II or XVI”.

10 (b) **EFFECTIVE DATE.**—The amendment made by
11 subsection (a) shall take effect as if included in the enact-
12 ment of the Social Security Independence and Program
13 Improvements Act of 1994 (Public Law 103–296; 108
14 Stat. 1464).

○

105TH CONGRESS
2D SESSION

H. R. 3433

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses.

IN THE HOUSE OF REPRESENTATIVES

MARCH 11, 1998

Mr. BUNNING (for himself and Mrs. KENNELLY of Connecticut) introduced the following bill; which was referred to the Committee on Ways and Means

A BILL

To amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Ticket to Work and
3 Self-Sufficiency Act of 1998”.

4 **SEC. 2. THE TICKET TO WORK AND SELF-SUFFICIENCY**
5 **PROGRAM.**

6 (a) IN GENERAL.—Part A of title XI of the Social
7 Security Act (42 U.S.C. 1301 et seq.) is amended by add-
8 ing at the end the following new section:

9 “THE TICKET TO WORK AND SELF-SUFFICIENCY
10 PROGRAM

11 “SEC. 1147. (a) IN GENERAL.—The Commissioner
12 of Social Security shall establish a Ticket to Work and
13 Self-Sufficiency Program, under which a disabled bene-
14 ficiary may use a ticket to work and self-sufficiency issued
15 by the Commissioner in accordance with this section to
16 obtain employment services, vocational rehabilitation serv-
17 ices, or other support services from an employment net-
18 work which is of the beneficiary’s choice and which is will-
19 ing to provide such services to such beneficiary.

20 “(b) TICKET SYSTEM.—

21 “(1) DISTRIBUTION OF TICKETS.—The Com-
22 missioner of Social Security may issue a ticket to
23 work and self-sufficiency to disabled beneficiaries for
24 participation in the Program.

25 “(2) ASSIGNMENT OF TICKETS.—A disabled
26 beneficiary holding a ticket to work and self-suffi-

1 ciency may assign the ticket to any employment net-
2 work of the beneficiary's choice which is serving
3 under the Program and is willing to accept the as-
4 signment.

5 “(3) TICKET TERMS.—A ticket issued under
6 paragraph (1) shall consist of a document which evi-
7 dences the Commissioner's agreement to pay (as
8 provided in paragraph (4)) an employment network,
9 which is serving under the Program and to which
10 such ticket is assigned by the beneficiary, for such
11 employment services, vocational rehabilitation serv-
12 ices, and other support services as the employment
13 network may agree to provide to the beneficiary.

14 “(4) PAYMENTS TO EMPLOYMENT NET-
15 WORKS.—The Commissioner shall pay an employ-
16 ment network under the Program in accordance with
17 the outcome payment system under subsection
18 (h)(2) or under the outcome-milestone payment sys-
19 tem under subsection (h)(3) (whichever is elected
20 pursuant to subsection (h)(1)). An employment net-
21 work may not request or receive compensation for
22 such services from the beneficiary.

23 “(c) STATE PARTICIPATION.—

24 “(1) PERIODIC ELECTIONS.—Each State agen-
25 cy described in section 222 or 1615 may elect to

1 participate in the Program (or to revoke any such
2 election) as an employment network. The Commis-
3 sioner shall provide for periodic opportunities for ex-
4 ercising such elections (and revocations).

5 “(2) TREATMENT OF STATE AGENCIES.—Any
6 such election (or revocation) by a State agency de-
7 scribed in section 222 or 1615 taking effect during
8 any period for which an individual residing in the
9 State is a disabled beneficiary and a client of the
10 State agency shall not be effective with respect to
11 such individual to the extent that such election (or
12 revocation) would result in any change in the meth-
13 od of payment to the State agency with respect to
14 the individual from the method of payment to the
15 State agency with respect to the individual in effect
16 immediately before such election (or revocation).

17 “(3) EFFECT OF PARTICIPATION BY STATE
18 AGENCY.—

19 “(A) STATE AGENCIES PARTICIPATING.—

20 In any case in which a State agency described
21 in section 222 or 1615 elects under paragraph
22 (1) to participate in the Program—

23 “(i) the employment services, voca-
24 tional rehabilitation services, and other
25 support services which, upon assignment of

1 tickets to work and self-sufficiency, are
2 provided to disabled beneficiaries by the
3 State agency acting as an employment net-
4 work shall be governed by plans for voca-
5 tional rehabilitation services approved
6 under title I of the Rehabilitation Act of
7 1973, and

8 “(ii) the provisions of section 222(d)
9 and the provisions of section 1615 shall
10 not apply with respect to such State.

11 “(B) STATE AGENCIES ADMINISTERING
12 MATERNAL AND CHILD HEALTH SERVICES PRO-
13 GRAMS.—Subparagraph (A) shall not apply
14 with respect to any State agency administering
15 a program under title V of this Act.

16 “(d) RESPONSIBILITIES OF THE COMMISSIONER OF
17 SOCIAL SECURITY.—

18 “(1) SELECTION AND QUALIFICATIONS OF PRO-
19 GRAM MANAGERS.—The Commissioner of Social Se-
20 curity shall enter into agreements with one or more
21 organizations in the private or public sector for serv-
22 ice as a program manager to assist the Commis-
23 sioner in administering the Program. Any such pro-
24 gram manager shall be selected by means of a com-
25 petitive bidding process, from among organizations

1 in the private or public sector with available exper-
2 tise and experience in the field of vocational rehabili-
3 tation or employment services.

4 “(2) TENURE, RENEWAL, AND EARLY TERMI-
5 NATION.—Each agreement entered into under para-
6 graph (1) shall provide for early termination upon
7 failure to meet performance standards which shall be
8 specified in the agreement and which shall be
9 weighted to take into account any performance in
10 prior terms. Such performance standards shall in-
11 clude (but are not limited to)—

12 “(A) measures for ease of access by bene-
13 ficiaries to services, and

14 “(B) measures for determining the extent
15 to which failures in obtaining services for bene-
16 ficiaries fall within acceptable parameters, as
17 determined by the Commissioner.

18 “(3) PRECLUSION FROM DIRECT PARTICIPA-
19 TION IN DELIVERY OF SERVICES IN OWN SERVICE
20 AREA.—Agreements under paragraph (1) shall pre-
21 clude—

22 “(A) direct participation by a program
23 manager in the delivery of employment services,
24 vocational rehabilitation services, or other sup-
25 port services to beneficiaries in the service area

1 covered by the program manager's agreement,
2 and

3 "(B) the holding by a program manager of
4 a financial interest in an employment network
5 or service provider which provides services in a
6 geographic area covered under the program
7 manager's agreement.

8 "(4) SELECTION OF EMPLOYMENT NET-
9 WORKS.—The Commissioner shall select and enter
10 into agreements with employment networks for serv-
11 ice under the Program. Such employment networks
12 shall be in addition to State agencies serving as em-
13 ployment networks pursuant to elections under sub-
14 section (c).

15 "(5) TERMINATION OF AGREEMENTS WITH EM-
16 PLOYMENT NETWORKS.—The Commissioner shall
17 terminate agreements with employment networks for
18 inadequate performance, as determined by the Com-
19 missioner.

20 "(6) QUALITY ASSURANCE.—The Commissioner
21 shall provide for such periodic reviews as are nec-
22 essary to provide for effective quality assurance in
23 the provision of services by employment networks.
24 The Commissioner shall take into account the views
25 of consumers and the program manager under which

1 the employment networks serve and shall consult
2 with providers of services to develop performance
3 measurements. The Commissioner shall ensure that
4 the results of the periodic reviews are made available
5 to beneficiaries who are prospective service recipients
6 as they select employment networks. The Commis-
7 sioner shall ensure the performance of periodic sur-
8 veys of beneficiaries receiving services under the
9 Program designed to measure customer service satis-
10 faction.

11 “(7) DISPUTE RESOLUTION.—The Commis-
12 sioner shall provide for a mechanism for resolving
13 disputes between beneficiaries and employment net-
14 works and between program managers and employ-
15 ment networks. The Commissioner shall afford a
16 party to such a dispute a reasonable opportunity for
17 a full and fair review of the matter in dispute.

18 “(e) PROGRAM MANAGERS.—

19 “(1) IN GENERAL.—A program manager shall
20 conduct tasks appropriate to assist the Commis-
21 sioner in carrying out the Commissioner’s duties in
22 administering the Program.

23 “(2) RECRUITMENT OF EMPLOYMENT NET-
24 WORKS.—A program manager shall recruit, and rec-
25 ommend for selection by the Commissioner, employ-

1 ment networks for service under the Program. The
2 program manager shall carry out such recruitment
3 and provide such recommendations, and shall mon-
4 itor all employment networks serving in the Program
5 in the geographic area covered under the program
6 manager’s agreement, to the extent necessary and
7 appropriate to ensure that adequate choices of serv-
8 ices are made available to beneficiaries. Employment
9 networks may serve under the Program only pursu-
10 ant to an agreement entered into with the Commis-
11 sioner under the Program incorporating the applica-
12 ble provisions of this section and regulations there-
13 under, and the program manager shall provide and
14 maintain assurances to the Commissioner that pay-
15 ment by the Commissioner to employment networks
16 pursuant to this section is warranted based on com-
17 pliance by such employment networks with the terms
18 of such agreement and this section. The program
19 manager shall not impose numerical limits on the
20 number of employment networks to be recommended
21 pursuant to this paragraph.

22 “(3) FACILITATION OF ACCESS BY BENE-
23 FICIARIES TO EMPLOYMENT NETWORKS.—A pro-
24 gram manager shall facilitate access by beneficiaries
25 to employment networks. The program manager

1 shall ensure that each beneficiary is allowed changes
2 in employment networks for good cause, as deter-
3 mined by the Commissioner, without being deemed
4 to have rejected services under the Program. The
5 program manager shall establish and maintain lists
6 of employment networks available to beneficiaries
7 and shall make such lists generally available to the
8 public.

9 “(4) ENSURING AVAILABILITY OF ADEQUATE
10 SERVICES.—The program manager shall ensure that
11 employment networks provide employment services,
12 vocational rehabilitation services, or other support
13 services to beneficiaries throughout specified service
14 areas, including rural areas.

15 “(5) REASONABLE ACCESS TO SERVICES.—The
16 program manager shall take such measures as are
17 necessary to ensure that sufficient employment net-
18 works are available and that each beneficiary receiv-
19 ing their services under the Program has reasonable
20 access to employment services, vocational rehabilita-
21 tion services, or other support services. Such services
22 may include case management, career planning, ca-
23 reer plan development, vocational assessment, job
24 training, placement, follow-up services, and such

1 other services as may be specified by the Commis-
2 sioner under the Program.

3 “(f) EMPLOYMENT NETWORKS.—

4 “(1) QUALIFICATIONS FOR EMPLOYMENT NET-
5 WORKS.—Each employment network serving under
6 the Program shall consist of an agency or instru-
7 mentality of a State (or a political subdivision there-
8 of) or a private entity, which assumes responsibility
9 for the coordination and delivery of services under
10 the Program to individuals assigning to the employ-
11 ment network tickets to work and self-sufficiency
12 issued under subsection (b). No employment network
13 may serve under the Program unless it demonstrates
14 to the Commissioner substantial expertise and expe-
15 rience in the field of employment services, vocational
16 rehabilitation services, or other support services for
17 individuals with disabilities and provides an array of
18 such services. An employment network shall consist
19 of either a single provider of such services or of an
20 association of such providers organized so as to com-
21 bine their resources into a single entity. An employ-
22 ment network may meet the requirements of sub-
23 section (e)(4) by providing services directly, or by
24 entering into agreements with other individuals or
25 entities providing appropriate employment services,

1 vocational rehabilitation services, or other support
2 services.

3 “(2) REQUIREMENTS RELATING TO PROVISION
4 OF SERVICES.—Each employment network serving
5 under the Program shall be required under the
6 terms of its agreement with the Commissioner to—

7 “(A) serve prescribed service areas,

8 “(B) meet, and maintain compliance with,
9 both general selection criteria (such as profes-
10 sional and governmental certification and edu-
11 cational credentials) and specific selection cri-
12 teria (such as the extent of work experience by
13 the provider with specific populations), and

14 “(C) take such measures as are necessary
15 to ensure that employment services, vocational
16 rehabilitation services, and other support serv-
17 ices provided under the Program by, or under
18 agreements entered into with, the employment
19 network are provided under appropriate individ-
20 ual employment plans meeting the requirements
21 of subsection (g).

22 “(3) ANNUAL FINANCIAL REPORTING.—Each
23 employment network shall meet financial reporting
24 requirements as prescribed by the Commissioner.

1 “(4) PERIODIC OUTCOMES REPORTING.—Each
2 employment network shall prepare periodic reports,
3 on at least an annual basis, itemizing for the covered
4 period specific outcomes achieved with respect to
5 specific services provided by the employment net-
6 work. Such reports shall conform to a national
7 model prescribed under this section. Each employ-
8 ment network shall provide a copy of the latest re-
9 port issued by the employment network pursuant to
10 this paragraph to each beneficiary upon enrollment
11 under the Program for services to be received
12 through such employment network. Upon issuance of
13 each report to each beneficiary, a copy of the report
14 shall be maintained in the files of the employment
15 network pertaining to the beneficiary. The program
16 manager shall ensure that copies of all such reports
17 issued under this paragraph are made available to
18 the public under reasonable terms.

19 “(g) INDIVIDUAL EMPLOYMENT PLANS.—

20 “(1) IN GENERAL.—Each employment network
21 shall—

22 “(A) take such measures as are necessary
23 to ensure that employment services, vocational
24 rehabilitation services, and other support serv-
25 ices provided under the Program by, or under

1 agreements entered into with, the employment
2 network are provided under appropriate individ-
3 ual employment plans as defined by the Com-
4 missioner, and

5 “(B) develop and implement each such in-
6 dividual employment plan, in the case of each
7 beneficiary receiving such services, in a manner
8 that affords such beneficiary the opportunity to
9 exercise informed choice in selecting an employ-
10 ment goal and specific services needed to
11 achieve that employment goal.

12 A beneficiary’s individual employment plan shall
13 take effect upon approval by the beneficiary.

14 “(2) EMPLOYMENT EVALUATION.—In devising
15 the employment plan, the employment network shall
16 undertake an employment evaluation with respect to
17 the beneficiary. Each employment evaluation shall
18 set forth in writing such elements and shall be in
19 such format as the Commissioner shall prescribe.

20 “(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

21 “(1) ELECTION OF PAYMENT SYSTEM BY EM-
22 PLOYMENT NETWORKS.—

23 “(A) IN GENERAL.—The Program shall
24 provide for payment authorized by the Commis-
25 sioner to employment networks under either an

1 outcome payment system or an outcome-mile-
2 stone payment system. Each employment net-
3 work shall elect which payment system will be
4 utilized by the employment network, and, for
5 such period of time as such election remains in
6 effect, the payment system so elected shall be
7 utilized exclusively in connection with such em-
8 ployment network (except as provided in sub-
9 paragraph (B)).

10 “(B) METHOD OF PAYMENT TO EMPLOY-
11 MENT NETWORKS.—Any such election by an
12 employment network taking effect during any
13 period for which a disabled beneficiary is receiv-
14 ing services from such employment network
15 shall not be effective with respect to such bene-
16 ficiary to the extent that such election would re-
17 sult in any change in the method of payment to
18 the employment network with respect to serv-
19 ices provided to such beneficiary from the meth-
20 od of payment to the employment network with
21 respect to services provided to such beneficiary
22 as of immediately before such election.

23 “(2) OUTCOME PAYMENT SYSTEM.—

24 “(A) IN GENERAL.—The outcome payment
25 system shall consist of a payment structure gov-

1 erning employment networks electing such sys-
2 tem under paragraph (1)(A) which meets the
3 requirements of this paragraph.

4 “(B) PAYMENTS MADE DURING OUTCOME
5 PAYMENT PERIOD.—The outcome payment sys-
6 tem shall provide for a schedule of payments to
7 an employment network, in connection with
8 each individual who is a beneficiary, for each
9 month described in paragraph (4)(B) in connec-
10 tion with such individual which occurs during
11 the individual’s outcome payment period.

12 “(C) COMPUTATION OF PAYMENTS TO EM-
13 PLOYMENT NETWORK.—The payment schedule
14 of the outcome payment system shall be de-
15 signed so that—

16 “(i) the payment for each of the 60
17 months during the outcome payment pe-
18 riod which are described in paragraph
19 (4)(B) is equal to a fixed percentage of the
20 payment calculation base for the calendar
21 year in which such month occurs, and

22 “(ii) such fixed percentage is set at a
23 percentage which does not exceed 40 per-
24 cent.

1 “(3) OUTCOME-MILESTONE PAYMENT SYS-
2 TEM.—

3 “(A) IN GENERAL.—The outcome-mile-
4 stone payment system shall consist of a pay-
5 ment structure governing employment networks
6 electing such system under paragraph (1)(A)
7 which meets the requirements of this para-
8 graph.

9 “(B) EARLY PAYMENTS UPON ATTAIN-
10 MENT OF MILESTONES IN ADVANCE OF OUT-
11 COME PAYMENT PERIODS.—The outcome-mile-
12 stone payment system shall provide for one or
13 more milestones, with respect to beneficiaries
14 receiving services from an employment network
15 under the Program, which are directed toward
16 the goal of permanent employment. Such mile-
17 stones shall form a part of a payment structure
18 which provides, in addition to payments made
19 during outcome payment periods, payments
20 made prior to outcome payment periods in
21 amounts based on the attainment of such mile-
22 stones.

23 “(C) LIMITATION ON TOTAL PAYMENTS TO
24 EMPLOYMENT NETWORK.—The payment sched-
25 ule of the outcome milestone payment system

1 shall be designed so that the total of the pay-
2 ments to the employment network with respect
3 to each beneficiary is less than, on a net
4 present value basis (using an interest rate de-
5 termined by the Commissioner that appro-
6 priately reflects the cost of funds faced by pro-
7 viders), the total amount to which payments to
8 the employment network with respect to the
9 beneficiary would be limited if the employment
10 network were paid under the outcome payment
11 system.

12 “(4) DEFINITIONS.—For purposes of this sub-
13 section—

14 “(A) PAYMENT CALCULATION BASE.—The
15 term ‘payment calculation base’ means, for any
16 calendar year—

17 “(i) in connection with a title II dis-
18 ability beneficiary, the average disability
19 insurance benefit payable under section
20 223 for all beneficiaries for months during
21 the preceding calendar year, and

22 “(ii) in connection with a title XVI
23 disability beneficiary (who is not concur-
24 rently a title II disability beneficiary), the
25 average payment of supplemental security

1 income benefits based on disability payable
2 under title XVI (excluding State sup-
3 plementation) to all beneficiaries having
4 attained 18 years of age for months during
5 the preceding calendar year.

6 “(B) OUTCOME PAYMENT PERIOD.—The
7 term ‘outcome payment period’ means, in con-
8 nection with an individual who is a disabled
9 beneficiary, a period—

10 “(i) beginning with the first month—

11 “(I) for which benefits are not
12 payable to such individual by reason
13 of engagement in substantial gainful
14 activity, and

15 “(II) which ends after such bene-
16 ficiary has assigned a ticket to work
17 and self-sufficiency to an employment
18 network, and

19 “(ii) ending with the 60th month
20 (consecutive or otherwise) following the
21 first month for which benefits are not pay-
22 able to such individual by reason of en-
23 gagement in work activity.

24 “(5) PERIODIC REVIEW AND ALTERATIONS OF
25 PRESCRIBED SCHEDULES.—

1 “(A) PERCENTAGES AND PERIODS.—The
2 Commissioner of Social Security shall periodi-
3 cally review the percentages specified in para-
4 graphs (2)(C) and (3)(C) and the period of
5 time specified in paragraph (4)(B) to determine
6 whether such percentages and such period pro-
7 vide an adequate incentive for employment net-
8 works to assist beneficiaries to enter the work-
9 force, while providing for appropriate econo-
10 mies. The Commissioner may alter any of such
11 percentages or such period of time to the extent
12 that the Commissioner determines, on the basis
13 of the Commissioner’s review under this para-
14 graph, that such an alteration would better pro-
15 vide the incentive and economies described in
16 the preceding sentence.

17 “(B) NUMBER AND AMOUNT OF MILE-
18 STONE PAYMENTS.—The Commissioner shall
19 periodically review the number and amounts of
20 milestone payments initially established by the
21 Commissioner pursuant to this section to deter-
22 mine whether to allow an adequate incentive for
23 employment networks to assist beneficiaries to
24 enter the workforce, taking into account infor-
25 mation provided to the Commissioner by pro-

1 gram managers, the Ticket to Work and Self-
2 Sufficiency Advisory Panel, and other reliable
3 sources. The Commissioner may from time to
4 time alter the number and amounts of mile-
5 stone payments initially established by the
6 Commissioner pursuant to this section to the
7 extent that the Commissioner determines that
8 such an alteration would allow an adequate in-
9 centive for employment networks to assist bene-
10 ficiaries to enter the workforce. Such alteration
11 shall be based on information provided to the
12 Commissioner by program managers, the Ticket
13 to Work and Self-Sufficiency Advisory Panel, or
14 other reliable sources.

15 “(i) AUTHORIZATIONS.—

16 “(1) TITLE II DISABILITY BENEFICIARIES.—

17 There are authorized to be transferred from the
18 Federal Old-Age and Survivors Insurance Trust
19 Fund and the Federal Disability Insurance Trust
20 Fund each fiscal year such sums as may be nec-
21 essary to carry out the provisions of this section
22 with respect to title II disability beneficiaries. Money
23 paid from the Trust Funds under this section with
24 respect to title II disability beneficiaries who are en-
25 titled to benefits under section 223 or who are enti-

1 tled to benefits under section 202(d) on the basis of
2 the wages and self-employment income of such bene-
3 ficiaries, shall be charged to the Federal Disability
4 Insurance Trust Fund, and all other money paid
5 from the Trust Funds under this section shall be
6 charged to the Federal Old-Age and Survivors Insur-
7 ance Trust Fund. The Commissioner of Social Secu-
8 rity shall determine according to such methods and
9 procedures as shall be prescribed under this sec-
10 tion—

11 “(A) the total amount to be paid to pro-
12 gram managers and employment networks
13 under this section, and

14 “(B) subject to the provisions of the pre-
15 ceding sentence, the amount which should be
16 charged to each of the Trust Funds.

17 “(2) TITLE XVI DISABILITY BENEFICIARIES.—
18 Amounts authorized to be appropriated to the Social
19 Security Administration under section 1601 (as in
20 effect pursuant to the amendments made by section
21 301 of the Social Security Amendments of 1972)
22 shall include amounts necessary to carry out the
23 provisions of this section with respect to title XVI
24 disability beneficiaries.

25 “(j) DEFINITIONS.—For purposes of this section—

1 “(1) DISABLED BENEFICIARY.—The term ‘dis-
2 abled beneficiary’ means a title II disability bene-
3 ficiary or a title XVI disability beneficiary.

4 “(2) TITLE II DISABILITY BENEFICIARY.—The
5 term ‘title II disability beneficiary’ means an individ-
6 ual entitled to disability insurance benefits under
7 section 223 or to monthly insurance benefits under
8 section 202 based on such individual’s disability (as
9 defined in section 223(d)). An individual is a title II
10 disability beneficiary for each month for which such
11 individual is entitled to such benefits.

12 “(3) TITLE XVI DISABILITY BENEFICIARY.—
13 The term ‘title XVI disability beneficiary’ means an
14 individual eligible for supplemental security income
15 benefits under title XVI on the basis of blindness
16 (within the meaning of section 1614(a)(2)) or dis-
17 ability (within the meaning of section 1614(a)(3)).
18 An individual is a title XVI disability beneficiary for
19 each month for which such individual is eligible for
20 such benefits.

21 “(k) REGULATIONS.—The Commissioner of Social
22 Security shall prescribe such regulations as are necessary
23 to carry out the provisions of this section.”.

24 (b) CONFORMING AMENDMENTS.—

25 (1) AMENDMENTS TO TITLE II.—

1 (A) Section 222(a) of such Act (42 U.S.C.
2 422(a)) is repealed.

3 (B) Section 222(b) of such Act is repealed.

4 (C) Section 225(b)(1) of such Act (42
5 U.S.C. 425(b)(1)) is amended by striking “a
6 program of vocational rehabilitation services”
7 and inserting “a program consisting of the
8 Ticket to Work and Self-Sufficiency Program
9 under section 1147 or another program of voca-
10 tional rehabilitation services, employment serv-
11 ices, or other support services”.

12 (2) AMENDMENTS TO TITLE XVI.—

13 (A) Section 1615(a) of such Act (42
14 U.S.C. 1382d(a)) is amended to read as follows:

15 “SEC. 1615. (a) In the case of any blind or disabled
16 individual who—

17 “(1) has not attained age 16, and

18 “(2) with respect to whom benefits are paid
19 under this title,

20 the Commissioner of Social Security shall make provision
21 for referral of such individual to the appropriate State
22 agency administering the State program under title V.”.

23 (B) Section 1615(c) of such Act is re-
24 pealed.

1 (c) EFFECTIVE DATE.—Subject to subsection (d),
2 the amendments made by subsections (a) and (b) shall
3 take effect with the first month following one year after
4 the date of the enactment of this Act.

5 (d) GRADUATED IMPLEMENTATION OF PROGRAM.—

6 (1) IN GENERAL.—Not later than 360 days
7 after the date of the enactment of this Act, the
8 Commissioner of Social Security shall commence im-
9 plementation of the amendments made by this sec-
10 tion (other than paragraphs (1)(B) and (2)(B) of
11 subsection (b)) in graduated phases at phase-in sites
12 selected by the Commissioner. Such phase-in sites
13 shall be selected so as to ensure, prior to full imple-
14 mentation of the Ticket to Work and Self-Suffi-
15 ciency Program, the development and refinement of
16 referral processes, payment systems, computer link-
17 ages, management information systems, and admin-
18 istrative processes necessary to provide for full im-
19 plementation of such amendments.

20 (2) REQUIREMENTS.—Implementation of the
21 Program at each phase-in site shall be carried out
22 on a wide enough scale to permit a thorough evalua-
23 tion of the alternative methods under consideration,
24 so as to ensure that the most efficacious methods

1 are determined and in place for full implementation
2 of the Program on a timely basis.

3 (3) FULL IMPLEMENTATION.—The Commis-
4 sioner shall ensure that the Program is fully imple-
5 mented as soon as practicable on or after the effec-
6 tive date specified in subsection (c) but not later
7 than six years after such date.

8 (4) ONGOING EVALUATION OF PROGRAM.—

9 (A) IN GENERAL.—The Commissioner
10 shall design and conduct a series of evaluations
11 to assess the cost-effectiveness of activities car-
12 ried out under this section and the amendments
13 made thereby, as well as the effects of this sec-
14 tion and the amendments made thereby on
15 work outcomes for beneficiaries receiving tickets
16 to work and self-sufficiency under the Program.

17 (B) METHODOLOGY.—

18 (i) DESIGN AND IMPLEMENTATION.—
19 The Commissioner shall design the series
20 of evaluations after receiving relevant ad-
21 vice from experts in the fields of disability,
22 vocational rehabilitation, and program
23 evaluation. In designing and carrying out
24 such evaluations, the Commissioner shall
25 consult with the Comptroller General of

1 the United States and other agencies of
2 the Federal Government and with private
3 organizations with appropriate expertise.
4 Before provision of services begins under
5 any phase of Program implementation, the
6 Commissioner shall ensure that plans for
7 such evaluations and data collection meth-
8 ods are in place and ready for implementa-
9 tion.

10 (ii) SPECIFIC MATTERS TO BE AD-
11 DRESSED.—Each such evaluation shall ad-
12 dress (but is not limited to):

13 (I) the annual cost (including net
14 cost) of the Program and the annual
15 cost (including net cost) that would
16 have been incurred in the absence of
17 the Program;

18 (II) the determinants of return to
19 work, including the characteristics of
20 beneficiaries in receipt of tickets
21 under the Program;

22 (III) the types of employment
23 services, vocational rehabilitation serv-
24 ices, and other support services fur-
25 nished to beneficiaries in receipt of

1 tickets under the Program who return
2 to work and to those who do not re-
3 turn to work;

4 (IV) the duration of employment
5 services, vocational rehabilitation serv-
6 ices, and other support services fur-
7 nished to beneficiaries in receipt of
8 tickets under the Program who return
9 to work and the duration of such serv-
10 ices furnished to those who do not re-
11 turn to work and the cost to employ-
12 ment networks of furnishing such
13 services;

14 (V) the employment outcomes,
15 including wages, occupations, benefits,
16 and hours worked, of beneficiaries
17 who return to work after receiving
18 tickets under the Program and those
19 who return to work without receiving
20 such tickets;

21 (VI) the characteristics of provid-
22 ers whose services are provided within
23 an employment network under the
24 Program;

1 (VII) the extent (if any) to which
2 employment networks display a great-
3 er willingness to provide services to
4 disabled beneficiaries;

5 (VIII) the characteristics (includ-
6 ing employment outcomes) of those
7 beneficiaries who receive services
8 under the outcome payment system
9 and of those beneficiaries who receive
10 services under the outcome-milestone
11 payment system; and

12 (IX) measures of satisfaction
13 among beneficiaries in receipt of tick-
14 ets under the Program.

15 (C) PERIODIC EVALUATION REPORTS.—

16 Following the close of the third and fifth fiscal
17 years ending after the effective date under sub-
18 section (c), and prior to the close of the seventh
19 fiscal year ending after such date, the Commis-
20 sioner shall transmit to the Committee on Ways
21 and Means of the House of Representatives and
22 the Committee on Finance of the Senate a re-
23 port containing the Commissioner's evaluation
24 of the progress of activities conducted under the
25 provisions of this section and the amendments

1 made thereby. Each such report shall set forth
2 the Commissioner’s evaluation of the extent to
3 which the Program has been successful and the
4 Commissioner’s conclusions on whether or how
5 the Program should be modified. Each such re-
6 port shall include such data, findings, materials,
7 and recommendations as the Commissioner may
8 consider appropriate.

9 (e) THE TICKET TO WORK AND SELF-SUFFICIENCY
10 ADVISORY PANEL.—

11 (1) ESTABLISHMENT.—There is established in
12 the Social Security Administration a panel to be
13 known as the “Ticket to Work and Self-Sufficiency
14 Advisory Panel” (in this subsection referred to as
15 the “Panel”).

16 (2) DUTIES OF PANEL.—It shall be the duty of
17 the Panel to—

18 (A) advise the Commissioner of Social Se-
19 curity on establishing phase-in sites for the
20 Ticket to Work and Self-Sufficiency Program
21 and on fully implementing the Program there-
22 after,

23 (B) advise the Commissioner with respect
24 to the refinement of access of disabled bene-
25 ficiaries to employment networks, payment sys-

1 tems, and management information systems
2 and advise the Commissioner whether such
3 measures are being taken to the extent nec-
4 essary to ensure the success of the Program,

5 (C) advise the Commissioner regarding the
6 most effective designs for research and dem-
7 onstration projects associated with the Program
8 or conducted pursuant to subsection (h), and

9 (D) furnish progress reports on the Pro-
10 gram to the President and each House of the
11 Congress.

12 (3) MEMBERSHIP.—

13 (A) NUMBER AND APPOINTMENT.—The
14 Panel shall be composed of 6 members as fol-
15 lows:

16 (i) 1 member appointed by the Chair-
17 man of the Committee on Ways and Means
18 of the House of Representatives;

19 (ii) 1 member appointed by the rank-
20 ing minority member of the Committee on
21 Ways and Means of the House of Rep-
22 resentatives;

23 (iii) 1 member appointed by the
24 Chairman of the Committee on Finance of
25 the Senate;

1 (iv) 1 member appointed by the rank-
2 ing minority member of the Committee on
3 Finance of the Senate; and

4 (v) 2 members appointed by the Presi-
5 dent, not more than 1 of whom may be of
6 the same political party.

7 (B) REPRESENTATION.—Of the members
8 appointed under subparagraph (A)—

9 (i) at least one shall represent the in-
10 terests of recipients of employment serv-
11 ices, vocational rehabilitation services, and
12 other support services,

13 (ii) at least one shall represent the in-
14 terests of providers of employment serv-
15 ices, vocational rehabilitation services, and
16 other support services, and

17 (iii) at least one shall represent the
18 interests of private employers.

19 (C) TERMS.—

20 (i) IN GENERAL.—Each member shall
21 be appointed for a term of 4 years (or, if
22 less, for the remaining life of the Panel),
23 except as provided in clauses (ii) and (iii).

24 (ii) TERMS OF INITIAL AP-
25 PPOINTEES.—As designated by the Presi-

1 dent at the time of appointment, of the
2 members first appointed—

3 (I) 3 of the members appointed
4 under subparagraph (A) shall be ap-
5 pointed for a term of 2 years, and

6 (II) 3 of the members appointed
7 under subparagraph (A) shall be ap-
8 pointed for a term of 4 years.

9 (iii) VACANCIES.—Any member ap-
10 pointed to fill a vacancy occurring before
11 the expiration of the term for which the
12 member's predecessor was appointed shall
13 be appointed only for the remainder of that
14 term. A member may serve after the expi-
15 ration of that member's term until a suc-
16 cessor has taken office. A vacancy in the
17 Panel shall be filled in the manner in
18 which the original appointment was made.

19 (D) BASIC PAY.—Members shall each be
20 paid at a rate equal to the daily equivalent of
21 the rate of basic pay for level 4 of the Senior
22 Executive Service, as in effect from time to
23 time under section 5382 of title 5, United
24 States Code, for each day (including travel

1 time) during which they are engaged in the ac-
2 tual performance of duties vested in the Panel.

3 (E) TRAVEL EXPENSES.—Each member
4 shall receive travel expenses, including per diem
5 in lieu of subsistence, in accordance with sec-
6 tions 5702 and 5703 of title 5, United States
7 Code.

8 (F) QUORUM.—4 members of the Panel
9 shall constitute a quorum but a lesser number
10 may hold hearings.

11 (G) CHAIRPERSON.—The Chairperson of
12 the Panel shall be designated by the President.
13 The term of office of the Chairperson shall be
14 4 years.

15 (H) MEETINGS.—The Panel shall meet at
16 least quarterly and at other times at the call of
17 the Chairperson or a majority of its members.

18 (4) DIRECTOR AND STAFF OF PANEL; EXPERTS
19 AND CONSULTANTS.—

20 (A) DIRECTOR.—The Panel shall have a
21 Director who shall be appointed by the Panel.
22 The Director shall be paid at a rate not to ex-
23 ceed the maximum rate of pay payable for GS-
24 15 of the General Schedule.

1 (B) STAFF.—Subject to rules prescribed
2 by the Panel, the Director may appoint and fix
3 the pay of additional personnel as the Director
4 considers appropriate.

5 (C) EXPERTS AND CONSULTANTS.—Sub-
6 ject to rules prescribed by the Panel, the Direc-
7 tor may procure temporary and intermittent
8 services under section 3109(b) of title 5, United
9 States Code.

10 (D) STAFF OF FEDERAL AGENCIES.—
11 Upon request of the Panel, the head of any
12 Federal department or agency may detail, on a
13 reimbursable basis, any of the personnel of that
14 department or agency to the Panel to assist it
15 in carrying out its duties under this Act.

16 (5) POWERS OF PANEL.—

17 (A) HEARINGS AND SESSIONS.—The Panel
18 may, for the purpose of carrying out its duties
19 under this subsection, hold such hearings, sit
20 and act at such times and places, and take such
21 testimony and evidence as the Panel considers
22 appropriate.

23 (B) POWERS OF MEMBERS AND AGENTS.—
24 Any member or agent of the Panel may, if au-

1 thorized by the Panel, take any action which
2 the Panel is authorized to take by this section.

3 (C) **MAILS.**—The Panel may use the
4 United States mails in the same manner and
5 under the same conditions as other departments
6 and agencies of the United States.

7 (D) **ADMINISTRATIVE SUPPORT SERV-**
8 **ICES.**—Upon the request of the Panel, the Ad-
9 ministrators of General Services shall provide to
10 the Panel, on a reimbursable basis, the admin-
11 istrative support services necessary for the
12 Panel to carry out its duties under this sub-
13 section.

14 (6) **REPORTS.**—

15 (A) **INTERIM REPORTS.**—The Panel shall
16 submit to the President and the Congress in-
17 terim reports at least annually.

18 (B) **FINAL REPORT.**—The Panel shall
19 transmit a final report to the President and the
20 Congress not later than eight years after the
21 date of the enactment of this Act. The final re-
22 port shall contain a detailed statement of the
23 findings and conclusions of the Panel, together
24 with its recommendations for legislation and ad-

1 ministrative actions which the Panel considers
2 appropriate.

3 (7) TERMINATION.—The Panel shall terminate
4 30 days after the date of the submission of its final
5 report under paragraph (6)(B).

6 (8) AUTHORIZATION OF APPROPRIATIONS.—
7 There are authorized to be appropriated from the
8 Federal Old-Age and Survivors Insurance Trust
9 Fund, the Federal Disability Insurance Trust Fund,
10 and the general fund of the Treasury, as appro-
11 priate, such sums as are necessary to carry out this
12 subsection.

13 (f) SPECIFIC REGULATIONS REQUIRED.—

14 (1) IN GENERAL.—The Commissioner of Social
15 Security shall prescribe such regulations as are nec-
16 essary to implement the amendments made by this
17 section.

18 (2) SPECIFIC MATTERS TO BE INCLUDED IN
19 REGULATIONS.—The matters which shall be ad-
20 dressed in such regulations shall include (but are not
21 limited to)—

22 (A) the form and manner in which tickets
23 to work and self-sufficiency may be distributed
24 to existing beneficiaries pursuant to section
25 1147(b)(1) of such Act;

1 (B) the format and wording of such tick-
2 ets, which shall incorporate by reference any
3 contractual terms governing service by employ-
4 ment networks under the Program;

5 (C) the form and manner in which State
6 agencies may elect participation in the Ticket to
7 Work and Self-Sufficiency Program (and revoke
8 such an election) pursuant to section
9 1147(c)(1) of such Act and provision for peri-
10 odic opportunities for exercising such elections
11 (and revocations);

12 (D) the status of State agencies under sec-
13 tion 1147(c)(2) at the time that State agencies
14 exercise elections (and revocations) under such
15 section 1147(c)(1);

16 (E) the terms of agreements to be entered
17 into with program managers pursuant to sec-
18 tion 1147(d) of such Act, including (but not
19 limited to)—

20 (i) the terms by which program man-
21 agers are precluded from direct participa-
22 tion in the delivery of services pursuant to
23 section 1147(d)(3) of such Act,

24 (ii) standards which must be met by
25 quality assurance measures referred to in

1 paragraph (6) of section 1147(d) and
2 methods of recruitment of employment net-
3 works utilized pursuant to paragraph (2)
4 of section 1147(e), and

5 (iii) the format under which dispute
6 resolution will operate under section
7 1147(d)(7).

8 (F) the terms of agreements to be entered
9 into with employment networks pursuant to sec-
10 tion 1147(d)(4) of such Act, including (but not
11 limited to)—

12 (i) the manner in which service areas
13 are specified pursuant to section
14 1147(f)(2)(A) of such Act,

15 (ii) the general selection criteria and
16 the specific selection criteria which are ap-
17 plicable to employment networks under
18 section 1147(f)(2)(B) of such Act in select-
19 ing service providers,

20 (iii) specific requirements relating to
21 annual financial reporting by employment
22 networks pursuant to section 1147(f)(3) of
23 such Act, and

24 (iv) the national model to which peri-
25 odic outcomes reporting by employment

1 networks must conform under section
2 1147(f)(4) of such Act;

3 (G) standards which must be met by indi-
4 vidual employment plans pursuant to section
5 1147(g) of such Act;

6 (H) standards which must be met by pay-
7 ment systems required under section 1147(h) of
8 such Act, including (but not limited to)—

9 (i) the form and manner in which
10 elections by employment networks of pay-
11 ment systems are to be exercised pursuant
12 to section 1147(h)(1)(A),

13 (ii) the terms which must be met by
14 an outcome payment system under section
15 1147(h)(2);

16 (iii) the terms which must be met by
17 an outcome-milestone payment system
18 under section 1147(h)(3);

19 (iv) any revision of the percentage
20 specified in paragraph (2)(C) of section
21 1147(h) of such Act or the period of time
22 specified in paragraph (4)(B) of such sec-
23 tion 1147(h); and

24 (v) annual oversight procedures for
25 such systems; and

1 (I) procedures for effective oversight of the
2 Program by the Commissioner of Social Secu-
3 rity, including periodic reviews and reporting
4 requirements.

5 (g) WORK INCENTIVE SPECIALISTS.—The Commis-
6 sioner shall establish a corps of trained, accessible, and
7 responsive work incentive specialists to specialize in title
8 II and title XVI disability work incentives for the purpose
9 of disseminating accurate information to disabled bene-
10 ficiaries (as defined in section 1147(j)(1) of the Social Se-
11 curity Act as amended by this Act) with respect to inquir-
12 ies and issues relating to work incentives.

13 (h) DEMONSTRATION PROJECTS PROVIDING FOR RE-
14 Ductions IN DISABILITY INSURANCE BENEFITS BASED
15 ON EARNINGS. —

16 (1) AUTHORITY.—The Commissioner shall con-
17 duct demonstration projects for the purpose of eval-
18 uating, through the collection of data, a program for
19 title II disability beneficiaries (as defined in section
20 1147(j)(2) of the Social Security Act, as amended by
21 this Act) under which each \$1 of benefits payable
22 under section 223, or under section 202 based on
23 the beneficiary's disability, is reduced for each \$2 of
24 such beneficiary's earnings that is above a level to
25 be determined by the Commissioner. Such projects

1 shall be conducted at a number of localities which
2 the Commissioner shall determine is sufficient to
3 adequately evaluate the appropriateness of national
4 implementation of such a program. Such projects
5 shall identify reductions in Federal expenditures
6 that may result from the permanent implementation
7 of such a program.

8 (2) SCOPE AND SCALE AND MATTERS TO BE
9 DETERMINED.—

10 (A) IN GENERAL.—The demonstration
11 projects developed under paragraph (1) shall be
12 of sufficient duration, shall be of sufficient
13 scope, and shall be carried out on a wide
14 enough scale to permit a thorough evaluation of
15 the project to determine—

16 (i) the effects, if any, of induced entry
17 and reduced exit,

18 (ii) the extent, if any, to which the
19 project being tested is affected by whether
20 it is in operation in a locality within an
21 area under the administration of the Tick-
22 et to Work and Self-Sufficiency Program,
23 and

1 (iii) the savings that accrue to the
2 Trust Funds under the project being test-
3 ed.

4 The Commissioner shall take into account ad-
5 vice provided by the Ticket to Work and Self-
6 Sufficiency Advisory Panel pursuant to sub-
7 section (e)(2)(C).

8 (B) ADDITIONAL MATTERS.—The Commis-
9 sioner shall also determine with respect to each
10 project—

11 (i) the annual cost (including net
12 cost) of the project and the annual cost
13 (including net cost) that would have been
14 incurred in the absence of the project,

15 (ii) the determinants of return to
16 work, including the characteristics of the
17 beneficiaries who participate in the project,
18 and

19 (iii) the employment outcomes, includ-
20 ing wages, occupations, benefits, and hours
21 worked, of beneficiaries who return to work
22 as a result of participation in the project.

23 (3) WAIVERS.—The Commissioner may waive
24 compliance with the benefit requirements of title II
25 of the Social Security Act, and the Secretary of

1 Health and Human Services may waive compliance
2 with the benefit requirements of title XVIII of such
3 Act, in so far as is necessary for a thorough evalua-
4 tion of the alternative methods under consideration.
5 No such experiment or project shall be actually
6 placed in operation unless at least 90 days prior
7 thereto a written report, prepared for purposes of
8 notification and information only and containing a
9 full and complete description thereof, has been
10 transmitted by the Commissioner to the Committee
11 on Ways and Means of the House of Representatives
12 and to the Committee on Finance of the Senate.
13 Periodic reports on the progress of such experiments
14 and projects shall be submitted by the Commissioner
15 to such committees. When appropriate, such reports
16 shall include detailed recommendations for changes
17 in administration or law, or both, to carry out the
18 objectives stated in paragraph (1).

19 (4) INTERIM REPORTS.—On or before June 9
20 in 2000 and each of the succeeding years thereafter,
21 the Commissioner shall submit to the Congress an
22 interim report on the progress of the experiments
23 and demonstration projects carried out under this
24 subsection together with any related data and mate-

1 rials which the Commissioner may consider appro-
2 priate.

3 (5) FINAL REPORT.—The Commissioner shall
4 submit to the Congress a final report with respect
5 to all experiments and demonstration projects car-
6 ried out under this section no later than one year
7 after their completion.

8 (6) EXPENDITURES.—Expenditures made for
9 demonstration projects under this subsection shall
10 be made from the Federal Disability Insurance
11 Trust Fund and the Federal Old-Age and Survivors
12 Insurance Trust Fund, as determined appropriate by
13 the Commissioner, and from the Federal Hospital
14 Insurance Trust Fund and the Federal Supple-
15 mentary Medical Insurance Trust Fund, as deter-
16 mined appropriate by the Secretary of Health and
17 Human Services, to the extent provided in advance
18 in appropriation Acts.

19 **SEC. 3. EXTENDING MEDICARE COVERAGE FOR OASDI DIS-**
20 **ABILITY BENEFIT RECIPIENTS WHO ARE**
21 **USING TICKETS TO WORK AND SELF-SUFFI-**
22 **CIENCY.**

23 (a) IN GENERAL.—The next to last sentence of sec-
24 tion 226(b) of the Social Security Act (42 U.S.C. 426)
25 is amended—

1 1986 (relating to nonrefundable personal credits) is
2 amended by inserting after section 25A the following new
3 section:

4 **“SEC. 25B. IMPAIRMENT-RELATED WORK EXPENSES OF**
5 **HANDICAPPED INDIVIDUALS.**

6 “(a) ALLOWANCE OF CREDIT.—In the case of a
7 handicapped individual, there shall be allowed as a credit
8 against the tax imposed by this chapter for the taxable
9 year an amount equal to 50 percent of the impairment-
10 related work expenses which are paid or incurred by the
11 taxpayer during the taxable year.

12 “(b) MAXIMUM CREDIT.—The credit allowed by sub-
13 section (a) with respect to the expenses of each handi-
14 capped individual shall not exceed \$5,000 for the taxable
15 year.

16 “(c) DEFINITIONS.—For purposes of this section—

17 “(1) HANDICAPPED INDIVIDUAL.—The term
18 ‘handicapped individual’ has the meaning given such
19 term by section 190(b)(3).

20 “(2) IMPAIRMENT-RELATED WORK EX-
21 PENSES.—The term ‘impairment-related work ex-
22 penses’ means expenses—

23 “(A) of a handicapped individual for at-
24 tendant care services at the individual’s place of
25 employment and other expenses in connection

1 with such place of employment which are nec-
2 essary for such individual to be able to work,
3 and

4 “(B) with respect to which a deduction is
5 allowable under section 162 (determined with-
6 out regard to this section).

7 “(d) SPECIAL RULES.—

8 “(1) DENIAL OF DOUBLE BENEFIT.—The
9 amount of impairment-related work expenses which
10 is allowable as a deduction under section 162 (deter-
11 mined without regard to this paragraph) for the tax-
12 able year shall be reduced by the amount of credit
13 allowed under this section for such year.

14 “(2) ELECTION TO HAVE SECTION NOT
15 APPLY.—No credit shall be allowed under subsection
16 (a) for the taxable year if the taxpayer elects to not
17 have this section apply for such year.”

18 (b) CLERICAL AMENDMENT.—The table of sections
19 for such subpart A is amended by inserting after the item
20 relating to section 25A the following new item:

“Sec. 25B. Impairment-related work expenses of handicapped in-
dividuals.”

21 (c) EFFECTIVE DATE.—The amendments made by
22 this section shall apply to taxable years beginning after
23 December 31, 1997.

○

TICKET TO WORK AND SELF-SUFFICIENCY ACT OF 1998

MAY 18, 1998.—Committed to the Committee of the Whole House on the State of the Union and ordered to be printed

Mr. ARCHER, from the Committee on Ways and Means,
submitted the following

REPORT

[To accompany H.R. 3433]

[Including cost estimate of the Congressional Budget Office]

The Committee on Ways and Means, to whom was referred the bill (H.R. 3433) to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses, having considered the same, report favorably thereon with amendments and recommend that the bill as amended do pass.

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The amendments are as follows:

Strike out all after the enacting clause and insert in lieu thereof the following:

SECTION 1. SHORT TITLE AND TABLE OF CONTENTS.

(a) **SHORT TITLE.**—This Act may be cited as the “Ticket to Work and Self-Sufficiency Act of 1998”.

(b) **TABLE OF CONTENTS.**—The table of contents is as follows:

| |
|---|
| Sec. 1. Short title and table of contents. |
| Sec. 2. The Ticket to Work and Self-Sufficiency Program. |
| Sec. 3. Extending medicare coverage for OASDI disability benefit recipients who are using tickets to work and self-sufficiency. |
| Sec. 4. Technical amendments relating to drug addicts and alcoholics. |
| Sec. 5. Extension of disability insurance program demonstration project authority. |
| Sec. 6. Perfecting amendments related to withholding from social security benefits. |
| Sec. 7. Treatment of prisoners. |
| Sec. 8. Revocation by members of the clergy of exemption from social security coverage. |
| Sec. 9. Additional technical amendment relating to cooperative research or demonstration projects under titles II and XVI. |

SEC. 2. THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM.

(a) **IN GENERAL.**—Part A of title XI of the Social Security Act (42 U.S.C. 1301 et seq.) is amended by adding at the end the following new section:

“THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

“SEC. 1147. (a) **IN GENERAL.**—The Commissioner of Social Security shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary’s choice and which is willing to provide such services to such beneficiary.

“(b) **TICKET SYSTEM.**—

“(1) **DISTRIBUTION OF TICKETS.**—The Commissioner of Social Security may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

“(2) **ASSIGNMENT OF TICKETS.**—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary’s choice which is serving under the Program and is willing to accept the assignment.

“(3) **TICKET TERMS.**—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner’s agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the employment network may provide to the beneficiary.

“(4) PAYMENTS TO EMPLOYMENT NETWORKS.—The Commissioner shall pay an employment network under the Program in accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

“(c) STATE PARTICIPATION.—

“(1) PERIODIC ELECTIONS.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation act of 1973 may elect to participate in the Program (or to revoke any such election) as an employment network. The Commissioner shall provide for periodic opportunities for exercising such elections (and revocations).

“(2) TREATMENT OF STATE AGENCIES.—Any such election (or revocation) by a State agency described in paragraph (1) taking effect during any period for which an individual residing in the State is a disabled beneficiary and a client of the State agency shall not be effective with respect to such individual to the extent that such election (or revocation) would result in any change in the method of payment to the State agency with respect to the individual from the method of payment to the State agency with respect to the individual in effect immediately before such election (or revocation).

“(3) EFFECT OF PARTICIPATION BY STATE AGENCY.—

“(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under paragraph (1) to participate in the Program—

“(i) the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973, and

“(ii) the provisions of section 222(d) and the provisions of subsections (d) and (e) of section 1615 shall not apply with respect to such State.

“(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

“(4) SPECIAL REQUIREMENTS APPLICABLE TO CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

“(A) IN GENERAL.—In any case in which an employment network has been assigned a ticket to work and self-sufficiency by a disabled beneficiary, no State agency shall be deemed required, under this section, title I of the Rehabilitation Act of 1973, or a State plan approved under such title, to accept any referral of such disabled beneficiary from such employment network unless such employment network and such State agency have entered into a written agreement that meets the requirements of subparagraph (B).

“(B) TERMS OF AGREEMENT.—An agreement required by subparagraph (A) shall specify, in accordance with regulations prescribed pursuant to subparagraph (C)—

“(i) the extent (if any) to which the employment network holding the ticket will provide to the State agency—

“(I) reimbursement for costs incurred in providing services described in subparagraph (A) to the disabled beneficiary, and

“(II) other amounts from payments made by the Commissioner to the employment network pursuant to subsection (h), and

“(ii) any other conditions that may be required by such regulations.

“(C) REGULATIONS.—The Commissioner of Social Security and the Secretary of Education shall jointly prescribe regulations specifying the terms of agreements required by subparagraph (A) and otherwise necessary to carry out the provisions of this paragraph.

“(D) PENALTY.—No payment may be made to an employment network pursuant to subsection (h) in connection with services provided to any disabled beneficiary if such employment network makes referrals described in subparagraph (A) in violation of the terms of the contract required under subparagraph (A) or without having entered into such a contract.

“(d) RESPONSIBILITIES OF THE COMMISSIONER OF SOCIAL SECURITY.—

“(1) SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.—The Commissioner of Social Security shall enter into agreements with one or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager

shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

“(2) TENURE, RENEWAL, AND EARLY TERMINATION.—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include (but are not limited to)—

“(A) measures for ease of access by beneficiaries to services, and

“(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

“(3) PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.—Agreements under paragraph (1) shall preclude—

“(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation services, or other support services to beneficiaries in the service area covered by the program manager’s agreement, and

“(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager’s agreement.

“(4) SELECTION OF EMPLOYMENT NETWORKS.—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

“(5) TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

“(6) QUALITY ASSURANCE.—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall take into account the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure the performance of periodic surveys of beneficiaries receiving services under the Program designed to measure customer service satisfaction.

“(7) DISPUTE RESOLUTION.—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks and between program managers and employment networks. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

“(e) PROGRAM MANAGERS.—

“(1) IN GENERAL.—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner’s duties in administering the Program.

“(2) RECRUITMENT OF EMPLOYMENT NETWORKS.—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager’s agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this section is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

“(3) FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks for good cause, as determined by the Commissioner, without being deemed to have rejected services under the Program. The

program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible format.

“(4) ENSURING AVAILABILITY OF ADEQUATE SERVICES.—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager’s agreement, including rural areas.

“(5) REASONABLE ACCESS TO SERVICES.—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Such services may include case management, benefits counseling, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are coordinated.

“(f) EMPLOYMENT NETWORKS.—

“(1) QUALIFICATIONS FOR EMPLOYMENT NETWORKS.—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, which assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b). No employment network may serve under the Program unless it demonstrates to the Commissioner substantial expertise and experience in the field of employment services, vocational rehabilitation services, or other support services for individuals with disabilities and provides an array of such services. An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other individuals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

“(2) REQUIREMENTS RELATING TO PROVISION OF SERVICES.—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

“(A) serve prescribed service areas,

“(B) meet, and maintain compliance with, both general selection criteria (such as professional and governmental certification and educational credentials) and specific selection criteria (such as the extent of work experience by the provider with specific populations), and

“(C) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans meeting the requirements of subsection (g).

“(3) ANNUAL FINANCIAL REPORTING.—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

“(4) PERIODIC OUTCOMES REPORTING.—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network pertaining to the beneficiary. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

“(g) INDIVIDUAL WORK PLANS.—

“(1) IN GENERAL.—Each employment network shall—

“(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans as defined by the Commissioner, and

“(B) develop and implement each such individual work plan, in the case of each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal.

A beneficiary’s individual work plan shall take effect upon approval by the beneficiary.

“(2) VOCATIONAL EVALUATION.—In devising the work plan, the employment network shall undertake a vocational evaluation with respect to the beneficiary. Each vocational evaluation shall set forth in writing such elements and shall be in such format as the Commissioner shall prescribe. The Commissioner may provide for waiver by the beneficiary of such a vocational evaluation, subject to regulations which shall be prescribed by the Commissioner providing for the permissible timing of, and the circumstances permitting, such a waiver.

“(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

“(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

“(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

“(B) METHOD OF PAYMENT TO EMPLOYMENT NETWORKS.—Any such election by an employment network taking effect during any period for which a disabled beneficiary is receiving services from such employment network shall not be effective with respect to such beneficiary to the extent that such election would result in any change in the method of payment to the employment network with respect to services provided to such beneficiary from the method of payment to the employment network with respect to services provided to such beneficiary as of immediately before such election.

“(2) OUTCOME PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual’s outcome payment period, for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable to such individual.

“(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

“(i) the payment for each of the 60 months during the outcome payment period for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs, and

“(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

“(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—

“(A) IN GENERAL.—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

“(B) EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.—The outcome-milestone payment system shall provide for one or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, which are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure which provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

“(C) LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using

an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

“(4) DEFINITIONS.—For purposes of this subsection—

“(A) PAYMENT CALCULATION BASE.—The term ‘payment calculation base’ means, for any calendar year—

“(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year, and

“(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained at least 18 years of age.

“(B) OUTCOME PAYMENT PERIOD.—The term ‘outcome payment period’ means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

“(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable to such individual by reason of engagement in work activity, and

“(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in work activity.

“(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

“(A) PERCENTAGES AND PERIODS.—The Commissioner of Social Security shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner’s review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.

“(B) NUMBER AND AMOUNT OF MILESTONE PAYMENTS.—The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Self-Sufficiency Advisory Panel, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Self-Sufficiency Advisory Panel, or other reliable sources.

“(i) SUSPENSION OF DISABILITY REVIEWS.—During any period for which an individual is using a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.

“(j) AUTHORIZATIONS.—

“(1) TITLE II DISABILITY BENEFICIARIES.—There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums as may be necessary to carry out the provisions of this section with respect to title II disability beneficiaries. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the

Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged to the Federal Old-Age and Survivors Insurance Trust Fund. The Commissioner of Social Security shall determine according to such methods and procedures as shall be prescribed under this section—

“(A) the total amount to be paid to program managers and employment networks under this section, and

“(B) subject to the provisions of the preceding sentence, the amount which should be charged to each of the Trust Funds.

“(2) TITLE XVI DISABILITY BENEFICIARIES.—Amounts authorized to be appropriated to the Social Security Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

“(k) DEFINITIONS.—For purposes of this section—

“(1) DISABLED BENEFICIARY.—The term ‘disabled beneficiary’ means a title II disability beneficiary or a title XVI disability beneficiary.

“(2) TITLE II DISABILITY BENEFICIARY.—The term ‘title II disability beneficiary’ means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

“(3) TITLE XVI DISABILITY BENEFICIARY.—The term ‘title XVI disability beneficiary’ means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

“(4) SUPPLEMENTAL SECURITY INCOME BENEFIT.—The term ‘supplemental security income benefit under title XVI’ means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

“(l) REGULATIONS.—The Commissioner of Social Security shall prescribe such regulations as are necessary to carry out the provisions of this section.”.

(b) CONFORMING AMENDMENTS.—

(1) AMENDMENTS TO TITLE II.—

(A) Section 221(c) of such Act (42 U.S.C. 421(c)) is amended by adding at the end the following new paragraph:

“(4) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1147(i).”.

(B) Section 222(a) of such Act (42 U.S.C. 422(a)) is repealed.

(C) Section 222(b) of such Act (42 U.S.C. 422(b)) is repealed.

(D) Section 225(b)(1) of such Act (42 U.S.C. 425(b)(1)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1147 or another program of vocational rehabilitation services, employment services, or other support services”.

(2) AMENDMENTS TO TITLE XVI.—

(A) Section 1615(a) of such Act (42 U.S.C. 1382d(a)) is amended to read as follows:

“SEC. 1615. (a) In the case of any blind or disabled individual who—

“(1) has not attained age 16, and

“(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.”.

(B) Section 1615(c) of such Act (42 U.S.C. 1382d(c)) is repealed.

(C) Section 1631(a)(6)(A) of such Act (42 U.S.C. 1383(a)(6)(A)) is amended by striking “a program of vocational rehabilitation services” and inserting “a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1147 or another program of vocational rehabilitation services, employment services, or other support services”.

(D) Section 1633(c) of such Act (42 U.S.C. 1383b(c)) is amended—

(i) by inserting “(1)” after “(c)”; and

(ii) by adding at the end the following new paragraph:

“(2) For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1147(i).”.

(c) EFFECTIVE DATE.—Subject to subsection (d), the amendments made by subsections (a) and (b) shall take effect with the first month following one year after the date of the enactment of this Act.

(d) GRADUATED IMPLEMENTATION OF PROGRAM.—

(1) IN GENERAL.—Not later than one year after the date of the enactment of this Act, the Commissioner of Social Security shall commence implementation of the amendments made by this section (other than paragraphs (1)(C) and (2)(B) of subsection (b)) in graduated phases at phase-in sites selected by the Commissioner. Such phase-in sites shall be selected so as to ensure, prior to full implementation of the Ticket to Work and Self-Sufficiency Program, the development and refinement of referral processes, payment systems, computer linkages, management information systems, and administrative processes necessary to provide for full implementation of such amendments. Subsection (c) shall apply with respect to paragraphs (1)(C) and (2)(B) of subsection (b) without regard to this subsection.

(2) REQUIREMENTS.—Implementation of the Program at each phase-in site shall be carried out on a wide enough scale to permit a thorough evaluation of the alternative methods under consideration, so as to ensure that the most efficacious methods are determined and in place for full implementation of the Program on a timely basis.

(3) FULL IMPLEMENTATION.—The Commissioner shall ensure that the Program is fully implemented as soon as practicable on or after the effective date specified in subsection (c) but not later than six years after such date.

(4) ONGOING EVALUATION OF PROGRAM.—

(A) IN GENERAL.—The Commissioner shall design and conduct a series of evaluations to assess the cost-effectiveness of activities carried out under this section and the amendments made thereby, as well as the effects of this section and the amendments made thereby on work outcomes for beneficiaries receiving tickets to work and self-sufficiency under the Program.

(B) METHODOLOGY.—

(i) DESIGN AND IMPLEMENTATION.—The Commissioner shall design the series of evaluations after receiving relevant advice from experts in the fields of disability, vocational rehabilitation, and program evaluation and individuals using tickets to work and self-sufficiency under the Program. In designing and carrying out such evaluations, the Commissioner shall consult with the Comptroller General of the United States and other agencies of the Federal Government and with private organizations with appropriate expertise. Before provision of services begins under any phase of Program implementation, the Commissioner shall ensure that plans for such evaluations and data collection methods are in place and ready for implementation.

(ii) SPECIFIC MATTERS TO BE ADDRESSED.—Each such evaluation shall address (but is not limited to):

(I) the annual cost (including net cost) of the Program and the annual cost (including net cost) that would have been incurred in the absence of the Program;

(II) the determinants of return to work, including the characteristics of beneficiaries in receipt of tickets under the Program;

(III) the types of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and to those who do not return to work;

(IV) the duration of employment services, vocational rehabilitation services, and other support services furnished to beneficiaries in receipt of tickets under the Program who return to work and the duration of such services furnished to those who do not return to work and the cost to employment networks of furnishing such services;

(V) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work after receiving tickets under the Program and those who return to work without receiving such tickets;

(VI) the characteristics of providers whose services are provided within an employment network under the Program;

(VII) the extent (if any) to which employment networks display a greater willingness to provide services to disabled beneficiaries;

(VIII) the characteristics (including employment outcomes) of those beneficiaries who receive services under the outcome pay-

ment system and of those beneficiaries who receive services under the outcome-milestone payment system;

(IX) measures of satisfaction among beneficiaries in receipt of tickets under the Program; and

(X) reasons for (including comments solicited from beneficiaries regarding) their choice not to use their tickets or their inability to return to work despite the use of their tickets.

(C) PERIODIC EVALUATION REPORTS.—Following the close of the third and fifth fiscal years ending after the effective date under subsection (c), and prior to the close of the seventh fiscal year ending after such date, the Commissioner shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a report containing the Commissioner's evaluation of the progress of activities conducted under the provisions of this section and the amendments made thereby. Each such report shall set forth the Commissioner's evaluation of the extent to which the Program has been successful and the Commissioner's conclusions on whether or how the Program should be modified. Each such report shall include such data, findings, materials, and recommendations as the Commissioner may consider appropriate.

(5) EXTENT OF STATE'S RIGHT OF FIRST REFUSAL IN ADVANCE OF FULL IMPLEMENTATION OF AMENDMENTS IN SUCH STATE.—

(A) IN GENERAL.—In the case of any State in which the amendments made by subsection (a) have not been fully implemented pursuant to this subsection, the Commissioner shall determine by regulation the extent to which—

(i) the requirement under section 222(a) of the Social Security Act for prompt referrals to a State agency, and

(ii) the authority of the Commissioner under section 222(d)(2) of such Act to provide vocational rehabilitation services in such State by agreement or contract with other public or private agencies, organizations, institutions, or individuals,

shall apply in such State.

(B) EXISTING AGREEMENTS.—Nothing in subparagraph (A) or the amendments made by subsection (a) shall be construed to limit, impede, or otherwise affect any agreement entered into pursuant to section 222(d)(2) of the Social Security Act before the date of the enactment of this Act with respect to services provided pursuant to such agreement to beneficiaries receiving services under such agreement as of such date, except with respect to services (if any) to be provided after six years after the effective date provided in subsection (c).

(e) THE TICKET TO WORK AND SELF-SUFFICIENCY ADVISORY PANEL.—

(1) ESTABLISHMENT.—There is established in the executive branch a panel to be known as the "Ticket to Work and Self-Sufficiency Advisory Panel" (in this subsection referred to as the "Panel").

(2) DUTIES OF PANEL.—It shall be the duty of the Panel to—

(A) advise the Commissioner of Social Security on establishing phase-in sites for the Ticket to Work and Self-Sufficiency Program and on fully implementing the Program thereafter,

(B) advise the Commissioner with respect to the refinement of access of disabled beneficiaries to employment networks, payment systems, and management information systems and advise the Commissioner whether such measures are being taken to the extent necessary to ensure the success of the Program,

(C) advise the Commissioner regarding the most effective designs for research and demonstration projects associated with the Program or conducted pursuant to subsection (h),

(D) advise the Commissioner on the development of performance measurements relating to quality assurance under section 1147(d)(6) of the Social Security Act, and

(E) furnish progress reports on the Program to the President and each House of the Congress.

(3) MEMBERSHIP.—

(A) NUMBER AND APPOINTMENT.—The Panel shall be composed of 6 members as follows:

(i) 1 member appointed by the Chairman of the Committee on Ways and Means of the House of Representatives;

(ii) 1 member appointed by the ranking minority member of the Committee on Ways and Means of the House of Representatives;

(iii) 1 member appointed by the Chairman of the Committee on Finance of the Senate;

(iv) 1 member appointed by the ranking minority member of the Committee on Finance of the Senate; and

(v) 2 members appointed by the President, who may not be of the same political party.

(B) REPRESENTATION.—Of the members appointed under subparagraph (A), at least 4 shall have experience or expert knowledge as a recipient, provider, employer, or employee in the fields of, or related to, employment services, vocational rehabilitation services, and other support services, of whom—

(i) at least one shall represent the interests of recipients of employment services, vocational rehabilitation services, and other support services,

(ii) at least one shall represent the interests of providers of employment services, vocational rehabilitation services, and other support services,

(iii) at least one shall represent the interests of private employers,

(iv) at least one shall represent the interests of employees, and

(v) at least one shall be an individual who is or has been a recipient of benefits under title II or title XVI based on disability.

(C) TERMS.—

(i) IN GENERAL.—Each member shall be appointed for a term of 4 years (or, if less, for the remaining life of the Panel), except as provided in clauses (ii) and (iii). The initial members shall be appointed not later than 90 days after the date of the enactment of this Act.

(ii) TERMS OF INITIAL APPOINTEES.—As designated by the President at the time of appointment, of the members first appointed—

(I) 3 of the members appointed under subparagraph (A) shall be appointed for a term of 2 years, and

(II) 3 of the members appointed under subparagraph (A) shall be appointed for a term of 4 years.

(iii) VACANCIES.—Any member appointed to fill a vacancy occurring before the expiration of the term for which the member's predecessor was appointed shall be appointed only for the remainder of that term. A member may serve after the expiration of that member's term until a successor has taken office. A vacancy in the Panel shall be filled in the manner in which the original appointment was made.

(D) BASIC PAY.—Members shall each be paid at a rate equal to the daily equivalent of the rate of basic pay for level 4 of the Senior Executive Service, as in effect from time to time under section 5382 of title 5, United States Code, for each day (including travel time) during which they are engaged in the actual performance of duties vested in the Panel.

(E) TRAVEL EXPENSES.—Each member shall receive travel expenses, including per diem in lieu of subsistence, in accordance with sections 5702 and 5703 of title 5, United States Code.

(F) QUORUM.—4 members of the Panel shall constitute a quorum but a lesser number may hold hearings.

(G) CHAIRPERSON.—The Chairperson of the Panel shall be designated by the President. The term of office of the Chairperson shall be 4 years.

(H) MEETINGS.—The Panel shall meet at least quarterly and at other times at the call of the Chairperson or a majority of its members.

(4) DIRECTOR AND STAFF OF PANEL; EXPERTS AND CONSULTANTS.—

(A) DIRECTOR.—The Panel shall have a Director who shall be appointed by the Panel. The Director shall be paid at a rate not to exceed the maximum rate of pay payable for GS-15 of the General Schedule.

(B) STAFF.—Subject to rules prescribed by the Panel, the Director may appoint and fix the pay of additional personnel as the Director considers appropriate.

(C) EXPERTS AND CONSULTANTS.—Subject to rules prescribed by the Panel, the Director may procure temporary and intermittent services under section 3109(b) of title 5, United States Code.

(D) STAFF OF FEDERAL AGENCIES.—Upon request of the Panel, the head of any Federal department or agency may detail, on a reimbursable basis, any of the personnel of that department or agency to the Panel to assist it in carrying out its duties under this Act.

(5) POWERS OF PANEL.—

(A) HEARINGS AND SESSIONS.—The Panel may, for the purpose of carrying out its duties under this subsection, hold such hearings, sit and act at such times and places, and take such testimony and evidence as the Panel considers appropriate.

(B) POWERS OF MEMBERS AND AGENTS.—Any member or agent of the Panel may, if authorized by the Panel, take any action which the Panel is authorized to take by this section.

(C) MAILS.—The Panel may use the United States mails in the same manner and under the same conditions as other departments and agencies of the United States.

(D) ADMINISTRATIVE SUPPORT SERVICES.—Upon the request of the Panel, the Administrator of General Services shall provide to the Panel, on a reimbursable basis, the administrative support services necessary for the Panel to carry out its duties under this subsection.

(6) REPORTS.—

(A) INTERIM REPORTS.—The Panel shall submit to the President and the Congress interim reports at least annually.

(B) FINAL REPORT.—The Panel shall transmit a final report to the President and the Congress not later than eight years after the date of the enactment of this Act. The final report shall contain a detailed statement of the findings and conclusions of the Panel, together with its recommendations for legislation and administrative actions which the Panel considers appropriate.

(7) TERMINATION.—The Panel shall terminate 30 days after the date of the submission of its final report under paragraph (6)(B).

(8) AUTHORIZATION OF APPROPRIATIONS.—There are authorized to be appropriated from the Federal Old-Age and Survivors Insurance Trust Fund, the Federal Disability Insurance Trust Fund, and the general fund of the Treasury, as appropriate, such sums as are necessary to carry out this subsection.

(f) SPECIFIC REGULATIONS REQUIRED.—

(1) IN GENERAL.—The Commissioner of Social Security shall prescribe such regulations as are necessary to implement the amendments made by this section.

(2) SPECIFIC MATTERS TO BE INCLUDED IN REGULATIONS.—The matters which shall be addressed in such regulations shall include (but are not limited to)—

(A) the form and manner in which tickets to work and self-sufficiency may be distributed to beneficiaries pursuant to section 1147(b)(1) of such Act;

(B) the format and wording of such tickets, which shall incorporate by reference any contractual terms governing service by employment networks under the Program;

(C) the form and manner in which State agencies may elect participation in the Ticket to Work and Self-Sufficiency Program (and revoke such an election) pursuant to section 1147(c)(1) of such Act and provision for periodic opportunities for exercising such elections (and revocations);

(D) the status of State agencies under section 1147(c)(2) at the time that State agencies exercise elections (and revocations) under such section 1147(c)(1);

(E) the terms of agreements to be entered into with program managers pursuant to section 1147(d) of such Act, including (but not limited to)—

(i) the terms by which program managers are precluded from direct participation in the delivery of services pursuant to section 1147(d)(3) of such Act,

(ii) standards which must be met by quality assurance measures referred to in paragraph (6) of section 1147(d) and methods of recruitment of employment networks utilized pursuant to paragraph (2) of section 1147(e), and

(iii) the format under which dispute resolution will operate under section 1147(d)(7).

(F) the terms of agreements to be entered into with employment networks pursuant to section 1147(d)(4) of such Act, including (but not limited to)—

(i) the manner in which service areas are specified pursuant to section 1147(f)(2)(A) of such Act,

(ii) the general selection criteria and the specific selection criteria which are applicable to employment networks under section 1147(f)(2)(B) of such Act in selecting service providers,

(iii) specific requirements relating to annual financial reporting by employment networks pursuant to section 1147(f)(3) of such Act, and

(iv) the national model to which periodic outcomes reporting by employment networks must conform under section 1147(f)(4) of such Act;

(G) standards which must be met by individual work plans pursuant to section 1147(g) of such Act;

(H) standards which must be met by payment systems required under section 1147(h) of such Act, including (but not limited to)—

(i) the form and manner in which elections by employment networks of payment systems are to be exercised pursuant to section 1147(h)(1)(A),

(ii) the terms which must be met by an outcome payment system under section 1147(h)(2);

(iii) the terms which must be met by an outcome-milestone payment system under section 1147(h)(3);

(iv) any revision of the percentage specified in paragraph (2)(C) of section 1147(h) of such Act or the period of time specified in paragraph (4)(B) of such section 1147(h); and

(v) annual oversight procedures for such systems; and

(I) procedures for effective oversight of the Program by the Commissioner of Social Security, including periodic reviews and reporting requirements.

(g) **WORK INCENTIVE SPECIALISTS.**—The Commissioner shall establish a corps of trained, accessible, and responsive work incentive specialists to specialize in title II and title XVI disability work incentives for the purpose of disseminating accurate information to disabled beneficiaries (as defined in section 1147(k)(1) of the Social Security Act as amended by this Act) with respect to inquiries and issues relating to work incentives.

(h) **DEMONSTRATION PROJECTS PROVIDING FOR REDUCTIONS IN DISABILITY INSURANCE BENEFITS BASED ON EARNINGS.**—

(1) **AUTHORITY.**—The Commissioner shall conduct demonstration projects for the purpose of evaluating, through the collection of data, a program for title II disability beneficiaries (as defined in section 1147(k)(2) of the Social Security Act, as amended by this Act) under which each \$1 of benefits payable under section 223, or under section 202 based on the beneficiary's disability, is reduced for each \$2 of such beneficiary's earnings that is above a level to be determined by the Commissioner. Such projects shall be conducted at a number of localities which the Commissioner shall determine is sufficient to adequately evaluate the appropriateness of national implementation of such a program. Such projects shall identify reductions in Federal expenditures that may result from the permanent implementation of such a program.

(2) **SCOPE AND SCALE AND MATTERS TO BE DETERMINED.**—

(A) **IN GENERAL.**—The demonstration projects developed under paragraph (1) shall be of sufficient duration, shall be of sufficient scope, and shall be carried out on a wide enough scale to permit a thorough evaluation of the project to determine—

(i) the effects, if any, of induced entry and reduced exit,

(ii) the extent, if any, to which the project being tested is affected by whether it is in operation in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program, and

(iii) the savings that accrue to the Trust Funds and other Federal programs under the project being tested.

The Commissioner shall take into account advice provided by the Ticket to Work and Self-Sufficiency Advisory Panel pursuant to subsection (e)(2)(C).

(B) **ADDITIONAL MATTERS.**—The Commissioner shall also determine with respect to each project—

(i) the annual cost (including net cost) of the project and the annual cost (including net cost) that would have been incurred in the absence of the project,

(ii) the determinants of return to work, including the characteristics of the beneficiaries who participate in the project, and

(iii) the employment outcomes, including wages, occupations, benefits, and hours worked, of beneficiaries who return to work as a result of participation in the project.

The Commissioner may include within the matters evaluated under the project the merits of trial work periods and periods of extended eligibility.

(3) **WAIVERS.**—The Commissioner may waive compliance with the benefit provisions of title II of the Social Security Act, and the Secretary of Health and Human Services may waive compliance with the benefit requirements of title XVIII of such Act, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such project shall be actually placed in

operation unless at least 90 days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in paragraph (1).

(4) INTERIM REPORTS.—On or before June 9 in 2000 and each of the succeeding years thereafter, the Commissioner shall submit to the Congress an interim report on the progress of the demonstration projects carried out under this subsection together with any related data and materials which the Commissioner may consider appropriate.

(5) FINAL REPORT.—The Commissioner shall submit to the Congress a final report with respect to all demonstration projects carried out under this section no later than one year after their completion.

(6) EXPENDITURES.—Expenditures made for demonstration projects under this subsection shall be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivors Insurance Trust Fund, as determined appropriate by the Commissioner, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund, as determined appropriate by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.

(i) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING DISABILITY-RELATED EMPLOYMENT INCENTIVES.—

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act of 1990 and other Federal laws. In such study, the Comptroller General shall specifically address the extent to which such credits and other incentives would encourage employers to hire and retain individuals with disabilities under the Ticket to Work and Self-Sufficiency Program.

(2) REPORT.—Not later than 3 years after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General may determine to be appropriate.

(j) STUDY BY GENERAL ACCOUNTING OFFICE OF EXISTING COORDINATION OF THE DI AND SSI PROGRAMS AS THEY RELATE TO INDIVIDUALS ENTERING OR LEAVING CONCURRENT ENTITLEMENT.—

(1) STUDY.—As soon as practicable after the date of the enactment of this Act, the Comptroller General of the United States shall undertake a study to evaluate the coordination under current law of the disability insurance program under title II of the Social Security Act and the supplemental security income program under title XVI of such Act, as such programs relate to individuals entering or leaving concurrent entitlement under such programs. In such study, the Comptroller General shall specifically address the effectiveness of work incentives under such programs with respect to such individuals and the effectiveness of coverage of such individuals under titles XVIII and XIX of such Act.

(2) REPORT.—Not later than 18 months after the date of the enactment of this Act, the Comptroller General shall transmit to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate a written report presenting the results of the Comptroller General's study conducted pursuant to this subsection, together with such recommendations for legislative or administrative changes as the Comptroller General may determine to be appropriate.

SEC. 3. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS WHO ARE USING TICKETS TO WORK AND SELF-SUFFICIENCY.

(a) IN GENERAL.—The next to last sentence of section 226(b) of the Social Security Act (42 U.S.C. 426) is amended—

(1) by striking “throughout all of which” and inserting “throughout the first 24 months of which”, and

(2) by inserting after “but not in excess of 24 such months” the following: “(plus 24 additional such months in the case of an individual who the Commis-

sioner determines is using a ticket to work and self-sufficiency issued under section 1147, but only for additional months that occur in the 7-year period beginning on the date of the enactment of the Ticket to Work and Self-Sufficiency Act of 1998”.

(b) REPORT.—Not later than 6 months prior to the end of the 7-year period beginning on the date of the enactment of this Act, the Secretary of Health and Human Services and the Commissioner of Social Security shall submit in writing to each House of the Congress their recommendations for further legislative action with respect to the amendments made by subsection (a), taking into account experience derived from efforts to achieve full implementation of the Ticket to Work and Self-Sufficiency Program under section 1147 of the Social Security Act.

SEC. 4. TECHNICAL AMENDMENTS RELATING TO DRUG ADDICTS AND ALCOHOLICS.

(a) CLARIFICATION RELATING TO THE EFFECTIVE DATE OF THE DENIAL OF SOCIAL SECURITY DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5) of the Contract with America Advancement Act of 1996 (Public Law 104–121; 110 Stat. 853) is amended—

(1) in subparagraph (A), by striking “by the Commissioner of Social Security” and “by the Commissioner”; and

(2) by adding at the end the following new subparagraphs:

“(D) For purposes of this paragraph, an individual’s claim, with respect to benefits under title II of the Social Security Act based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

“(i) there is pending a request for either administrative or judicial review with respect to such claim, or

“(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

“(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual’s entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) of the Social Security Act shall not apply to such redetermination.”.

(b) CORRECTION TO EFFECTIVE DATE OF PROVISIONS CONCERNING REPRESENTATIVE PAYEES AND TREATMENT REFERRALS OF SOCIAL SECURITY BENEFICIARIES WHO ARE DRUG ADDICTS AND ALCOHOLICS.—Section 105(a)(5)(B) of such Act (Public Law 104–121; 110 Stat. 853) is amended to read as follows:

“(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

“(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act, or

“(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).”.

(c) EFFECTIVE DATES.—The amendments made by this section shall take effect as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (Public Law 104–121; 110 Stat. 852 et seq.).

SEC. 5. EXTENSION OF DISABILITY INSURANCE PROGRAM DEMONSTRATION PROJECT AUTHORITY.

(a) IN GENERAL.—Section 505 of the Social Security Disability Amendments of 1980 (Public Law 96–265; 94 Stat. 473), as amended by section 12101 of the Consolidated Omnibus Budget Reconciliation Act of 1985 (Public Law 99–272; 100 Stat. 282), section 10103 of the Omnibus Budget Reconciliation Act of 1989 (Public Law 101–239; 103 Stat. 2472), section 5120(f) of the Omnibus Budget Reconciliation Act of 1990 (Public Law 101–508; 104 Stat. 1388–282), and section 315 of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103–296; 108 Stat. 1531), is further amended—

(1) in paragraph (1) of subsection (a), by adding at the end the following new sentence: “The Commissioner may expand the scope of any such demonstration project to include any group of applicants for benefits under such program with impairments which may reasonably be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to

any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.”;

(2) in paragraph (3) of subsection (a), by striking “June 10, 1996” and inserting “June 10, 2001”;

(3) in paragraph (4) of subsection (a), by inserting “and on or before October 1, 2000,” after “1995.”; and

(4) in subsection (c), by striking “October 1, 1996” and inserting “October 1, 2001”.

(b) EFFECTIVE DATE.—The amendments made by subsection (a) shall take effect on the date of the enactment of this Act.

SEC. 6. PERFECTING AMENDMENTS RELATED TO WITHHOLDING FROM SOCIAL SECURITY BENEFITS.

(a) INAPPLICABILITY OF ASSIGNMENT PROHIBITION.—Section 207 of the Social Security Act (42 U.S.C. 407) is amended by adding at the end the following new subsection:

“(c) Nothing in this section shall be construed to prohibit withholding taxes from any benefit under this title, if such withholding is done pursuant to a request made in accordance with section 3402(p)(1) of the Internal Revenue Code of 1986 by the person entitled to such benefit or such person’s representative payee.”.

(b) PROPER ALLOCATION OF COSTS OF WITHHOLDING BETWEEN THE TRUST FUNDS AND THE GENERAL FUND.—Section 201(g) of such Act (42 U.S.C. 401(g)) is amended—

(1) by inserting before the period in paragraph (1)(A)(ii) the following: “and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee”;

(2) by inserting before the period at the end of paragraph (1)(A) the following: “and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee”;

(3) in paragraph (1)(B)(i)(I), by striking “subparagraph (A),” and inserting “subparagraph (A) and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee.”;

(4) in paragraph (1)(C)(iii), by inserting before the period the following: “and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee”;

(5) in paragraph (1)(D), by inserting after “section 232” the following: “and the functions of the Social Security Administration in connection with the withholding of taxes from benefits as described in section 207(c)”;

(6) in paragraph (4), by inserting after the first sentence the following: “The Board of Trustees of such Trust Funds shall prescribe the method of determining the costs which should be borne by the general fund in the Treasury of carrying out the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee.”.

(c) EFFECTIVE DATE.—The amendments made by subsection (b) shall apply to benefits paid on or after the first day of the second month beginning after the month in which this Act is enacted.

SEC. 7. TREATMENT OF PRISONERS.

(a) IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS.—

(1) IN GENERAL.—Section 202(x)(3) of the Social Security Act (42 U.S.C. 402(x)(3)) is amended—

(A) by inserting “(A)” after “(3)”;

(B) by adding at the end the following new subparagraph:

“(B)(i) The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—

“(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, social security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1); and

“(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual’s confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

“(iii) The provisions of section 552a of title 5, United States Code, shall not apply to any agreement entered into under clause (i) or to information exchanged pursuant to such agreement.

“(iv) There is authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II). Sums so transferred shall be treated as direct spending for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 and excluded from budget totals in accordance with section 13301 of the Budget Enforcement Act of 1990.

“(v) The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to agreements entered into under clause (i) to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility purposes.”

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(b) ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR.—

(1) IN GENERAL.—Section 202(x)(1)(A) of such Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in the matter preceding clause (i), by striking “during” and inserting “throughout”;

(B) in clause (i), by striking “an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed)” and inserting “a criminal offense”; and

(C) in clause (ii)(I), by striking “an offense punishable by imprisonment for more than 1 year” and inserting “a criminal offense”.

(2) EFFECTIVE DATE.—The amendments made by this subsection shall apply to individuals whose period of confinement in an institution commences on or after the first day of the fourth month beginning after the month in which this Act is enacted.

(c) CONFORMING TITLE XVI AMENDMENTS.—

(1) FIFTY PERCENT REDUCTION IN TITLE XVI PAYMENT IN CASE INVOLVING COMPARABLE TITLE II PAYMENT.—Section 1611(e)(1)(I) of the Social Security Act (42 U.S.C. 1382(e)(1)(I)) is amended—

(A) in clause (i)(II), by inserting “(subject to reduction under clause (ii))” after “\$400” and after “\$200”;

(B) by redesignating clauses (ii) and (iii) as clauses (iii) and (iv) respectively; and

(C) by inserting after clause (i) the following new clause:

“(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).”

(2) **EXPANSION OF CATEGORIES OF INSTITUTIONS ELIGIBLE TO ENTER INTO AGREEMENTS WITH THE COMMISSIONER.**—Section 1611(e)(1)(I)(i) of such Act (42 U.S.C. 1382(e)(1)(I)(i)) is amended in the matter preceding subclause (I) by striking “institution” and all that follows through “section 202(x)(1)(A),” and inserting “institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii),”.

(3) **EFFECTIVE DATE.**—The amendments made by this subsection shall take effect as if included in the enactment of section 203(a) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (Public Law 104–193; 110 Stat. 2186). The reference to section 202(x)(1)(A)(ii) of the Social Security Act in section 1611(e)(1)(I)(i) of such Act as amended by paragraph (2) shall be deemed a reference to such section 202(x)(1)(A)(ii) as amended by subsection (b)(1)(C).

(d) **CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM.**—

(1) **IN GENERAL.**—Section 202(x)(1)(A) of the Social Security Act (42 U.S.C. 402(x)(1)(A)) is amended—

(A) in clause (i), by striking “or” at the end;

(B) in clause (ii)(IV), by striking the period and inserting “, or”; and

(C) by adding at the end the following new clause:

“(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.”

(2) **CONFORMING AMENDMENT.**—Section 202(x)(1)(B)(ii) of such Act (42 U.S.C. 402(x)(1)(B)(ii)) is amended by striking “clause (ii)” and inserting “clauses (ii) and (iii)”.

(3) **EFFECTIVE DATE.**—The amendments made by this subsection shall apply with respect to benefits for months ending after the date of the enactment of this Act.

SEC 8. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE.

(a) **IN GENERAL.**—Notwithstanding section 1402(e)(4) of the Internal Revenue Code of 1986, any exemption which has been received under section 1402(e)(1) of such Code by a duly ordained, commissioned, or licensed minister of a church, a member of a religious order, or a Christian Science practitioner, and which is effective for the taxable year in which this Act is enacted, may be revoked by filing an application therefor (in such form and manner, and with such official, as may be prescribed in regulations made under chapter 2 of such Code), if such application is filed no later than the due date of the Federal income tax return (including any extension thereof) for the applicant’s second taxable year beginning after December 31, 1998. Any such revocation shall be effective (for purposes of chapter 2 of the Internal Revenue Code of 1986 and title II of the Social Security Act), as specified in the application, either with respect to the applicant’s first taxable year beginning after December 31, 1998, or with respect to the applicant’s second taxable year beginning after such date, and for all succeeding taxable years; and the applicant for any such revocation may not thereafter again file application for an exemption under such section 1402(e)(1). If the application is filed after the due date of the applicant’s Federal income tax return for a taxable year and is effective with respect to that taxable year, it shall include or be accompanied by payment in full of an amount equal to the total of the taxes that would have been imposed by section 1401 of the Internal Revenue Code of 1986 with respect to all of the applicant’s income derived in that taxable year which would have constituted net earnings from self-employment for purposes of chapter 2 of such Code (notwithstanding section 1402 (c)(4) or (c)(5) of such Code) except for the exemption under section 1402(e)(1) of such Code.

(b) **EFFECTIVE DATE.**—Subsection (a) shall apply with respect to service performed (to the extent specified in such subsection) in taxable years beginning after December 31, 1998, and with respect to monthly insurance benefits payable under title II of the Social Security Act on the basis of the wages and self-employment income of any individual for months in or after the calendar year in which such individual’s application for revocation (as described in such subsection) is effective (and lump-sum death payments payable under such title on the basis of such wages and self-employment income in the case of deaths occurring in or after such calendar year).

SEC. 9. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND XVI.

(a) **IN GENERAL.**—Section 1110(a)(3) of the Social Security Act (42 U.S.C. 1310(a)(3)) is amended by striking “title XVI” and inserting “title II or XVI”.

(b) **EFFECTIVE DATE.**—The amendment made by subsection (a) shall take effect as if included in the enactment of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103–296; 108 Stat. 1464).

Amend the title so as to read:

A bill to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to work, to extend Medicare coverage for such beneficiaries, and to make additional miscellaneous amendments relating to social security.

I. INTRODUCTION

A. PURPOSE AND SUMMARY

The Ticket to Work and Self-Sufficiency Act of 1998 would provide real opportunities for those Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disabled beneficiaries who want to work.

B. BACKGROUND AND NEED FOR LEGISLATION

Historically, less than 1 percent of disabled beneficiaries leave the rolls because of successful rehabilitation. State Vocational Rehabilitation (VR) agencies have a limited capacity to serve all those who need services and therefore have had a negligible impact on the number of disabled beneficiaries who enter the workforce. According to the General Accounting Office, on average, State Disability Determination Services (DDSs) refer for VR services only about 8 percent of SSDI and SSI applicants awarded benefits and less than 10 percent of beneficiaries referred by DDSs are accepted as clients.

In hearings held by the Subcommittee on Social Security over the past 3 years, witnesses, including individuals with disabilities, their advocates, rehabilitation experts, and various providers of services, have repeatedly noted that, due to advances in medicine, technology, and the field of rehabilitation, many individuals with severe disabilities could work and want to work. Witnesses indicated that providing beneficiary choice in needed rehabilitation and support services and removing Social Security program barriers would facilitate beneficiaries’ self-sufficiency through employment.

In addition, beneficiaries with disabilities are staying on the rolls longer than in the past because of: (1) increased life expectancy; (2) a lower average age of disability beneficiaries due to the baby boom cohort; and (3) an increase in the number of awardees with disabling mental impairments who tend to be younger and physically healthier. SSA’s disability programs have experienced tremendous growth in recent years. Between 1986 and 1996, the number of working-age beneficiaries on the SSDI and SSI disability rolls increased 64 percent. During this period, cash benefits to adults and children with disabilities increased from about \$25 billion to \$61 billion annually. These facts underscore the need for initiatives designed to encourage disabled beneficiaries to obtain employment and rehabilitation services and to enter the workforce.

The Social Security disability insurance program insures workers and their families against the loss of income due to disability. Nearly 4.5 million people with disabilities who have paid into the Social Security system receive Social Security disability benefits. Another 4 million adults with disabilities receive Supplemental Security Income (SSI) payments. Americans rely on the safety net these programs provide in the event of severe illness or injury.

Given the choice, however, many disability beneficiaries would rather be working. In hearings and through personal contacts, Members of the Subcommittee on Social Security have learned about the obstacles Social Security disability beneficiaries face in attempting to work including: fear of losing health and cash benefits, little known and complex work incentives, and the “all or nothing” nature of SSDI cash benefits that can make work at low wages financially unattractive. Thus, after consultation with individuals with disabilities, advocates, rehabilitation experts, providers of services, and the Administration, the Committee has developed a proposal that is supported on a widespread bipartisan basis.

The Ticket to Work and Self-Sufficiency Act of 1998 would create a program to ease the transition of Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disabled beneficiaries into the workforce. In addition, the Subcommittee proposal contains several technical amendments to title II of the Social Security Act that have previously passed in the House and for which similar title XVI provisions were passed in last year’s Balanced Budget Act. The proposal also provides a two-year period allowing members of the clergy to revoke their exemption from Social Security coverage.

C. LEGISLATIVE HISTORY

Since 1995, the Subcommittee on Social Security has held 5 hearings, including testimony from 28 witnesses, addressing needed Social Security program changes to encourage individuals with disabilities to work. The Subcommittee held a two-part hearing on July 23 and July 24, 1997, to specifically address barriers preventing Social Security disability recipients from returning to work. The hearing included testimony from the Administration, the U.S. General Accounting Office, beneficiaries, rehabilitation experts, and providers of services.

On March 11, 1998, Mr. Bunning, on behalf of himself and Mrs. Kennelly, introduced H.R. 3433, the Ticket to Work and Self-Sufficiency Act of 1998. The Subcommittee held a hearing on March 17, 1998, and received testimony in support of H.R. 3433 from individuals with disabilities, advocates for the disabled, and providers of services. The Subcommittee on Social Security ordered favorably reported to the Full Committee H.R. 3433, as amended, by a voice vote, with a quorum present on March 25, 1998.

On May 6, 1998, the Full Committee ordered favorably reported, H.R. 3433, the “Ticket to Work and Self-Sufficiency Act of 1998,” as amended, by a voice vote, with a quorum present.

II. EXPLANATION OF PROVISIONS

A. SECTION 1. SHORT TITLE

The short title of the bill is the Ticket to Work and Self-Sufficiency Act of 1998.

B. SECTION 2. THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

Present law

Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) disabled individuals applying for or awarded benefits shall be promptly referred to the State vocational rehabilitation (VR) agency for necessary VR services. The Commissioner of Social Security is authorized to use trust fund and general revenue monies to reimburse State VR agencies for reasonable and necessary costs of VR services when such services result in an individual performing work at the substantial gainful level (\$500 a month) for 9 months.

Explanation of provision

The proposal would create a Ticket to Work and Self-Sufficiency Program. The proposal would authorize the Commissioner of Social Security to provide SSDI and SSI disabled beneficiaries with a ticket which they may use to obtain services of their choice from an employment network (provider of services) of their choice to enable them to enter the workforce.

The bill would provide State VR agencies with the option of participating in the Program as an employment network or remaining in the current law reimbursement system. State VR agencies which elect to participate in the Program would be reimbursed under current law provisions for those beneficiaries who began receiving services prior to Program election. Services provided by State VR agencies participating in the Program would be governed by plans for VR services approved under title I of the Rehabilitation Act. State VR agencies would not be required to accept referrals from employment networks unless the agency has entered into an agreement with the employment network.

The Commissioner would contract with program managers—one or more organizations in the private or public sector with expertise and experience in the field of vocational rehabilitation or employment services—through a competitive bidding process, to help the Social Security Administration (SSA) administer the Program. Agreements with program managers would include performance standards (including measures for ease of access and measures of success). Program managers would be precluded from delivering services in their own service area. The Commissioner would select and enter into agreements with employment networks, provide periodic quality assurance reviews of employment networks, and establish a method for resolving disputes between beneficiaries and employment networks.

Program managers would recruit and recommend employment networks to the Commissioner, ensure adequate choices of services are available to beneficiaries, ensure beneficiary access to services,

and provide assurances to SSA that employment networks are complying with agreement terms. In addition, program managers will make certain that beneficiaries are allowed changes in employment networks for good cause.

Employment networks would consist of a single provider (public or private) or an association of providers combined into a single entity which assumes responsibility for the coordination and delivery of services. The employment networks would be required to demonstrate substantial expertise and experience in the field of employment services, vocational rehabilitation services, or other support services for individuals with disabilities and would provide an array of such services under the Program. Employment networks would meet financial reporting requirements as prescribed by the Commissioner and would prepare periodic performance reports which would be provided to beneficiaries holding a ticket and would be made available to the public.

Employment networks and beneficiaries would together develop an individual work plan in such a way that the beneficiary could exercise informed choice in selecting an employment goal and specific services needed to achieve that goal. Employment networks would undertake a vocational evaluation (as determined by the Commissioner) in order to devise the work plan, however, the Commissioner could provide for beneficiary waiver of the vocational evaluation. The bill would authorize payment to employment networks for outcomes and long-term results by providing one of two payment systems, both of which are designed to ensure that as many providers as possible would be available to serve beneficiaries with disabilities.

The outcome payment system would provide payment to employment networks up to 40 percent of the average monthly benefit for all disabled beneficiaries in the preceding year, for each month benefits were not payable to the beneficiary due to work, but not for more than 60 months.

The outcome-milestone payment system is similar to the outcome payment system, except it would provide for early payment(s) based on the achievement of one or more milestones directed towards the goal of permanent employment. To ensure cost-effectiveness of the Program, the total amount payable under the outcome-milestone payment system would be required to be less than the total amount payable to a provider than would have been payable for an individual under the outcome payment system.

The Commissioner would periodically review both payment systems, and if necessary, alter the percentages, milestones, or payment periods to ensure that employment networks have adequate incentives to assist beneficiaries into the workforce.

The Commissioner would not initiate a continuing disability review for beneficiaries who are using a ticket under the Program.

The bill would authorize transfers from the Social Security Trust Funds to carry out these provisions for Social Security beneficiaries, and authorize amounts to be appropriated to the Social Security Administration to carry out these provisions for SSI recipients.

For purposes of Program participation, the bill would define disabled beneficiary to include SSI disabled recipients and Social Se-

curity beneficiaries receiving disability insurance, disabled widow's, and childhood disability benefits.

The Commissioner would prescribe regulations necessary to carry out the Program. The Program would be implemented on a graduated basis at phase-in sites selected by the Commissioner beginning no later than 1 year after enactment. The Commissioner would design and conduct a series of evaluations to assess the cost-effectiveness and effects of the Program. The Commissioner would periodically provide to the Congress a detailed evaluation of the Program's progress, success, and any modifications needed.

An Advisory Panel would be created consisting of experts representing consumers, providers of services, employers, and employees. The Panel would advise the Commissioner and report to the Congress on Program implementation including such issues as establishing pilot sites, refining the Program, and designing Program evaluations. The Advisory Panel would be appointed within 90 days of enactment. The Advisory Panel would be composed of six members appointed as follows:

One member would be appointed by the Chairman of the Committee on Ways and Means of the House of Representatives;

One member would be appointed by the ranking minority member of the Committee on Ways and Means of the House of Representatives;

One member would be appointed by the Chairman on Finance of the Senate;

One member would be appointed by the ranking minority member of the Committee on Finance of the Senate; and

Two members would be appointed by the President, who may not be of the same political party.

The Commissioner would prescribe regulations to address implementation issues such as the way in which tickets would be distributed to beneficiaries, the way in which State agencies would elect participation in the Program, the terms of agreements to be entered into with program managers and with employment networks, and procedures for effective oversight of the Program by the Commissioner.

The Commissioner would establish a corps of trained, accessible, and responsive work incentive specialists to specialize in disseminating accurate information to beneficiaries with disabilities.

SSA would be required to conduct a demonstration project on the effects of gradually reducing SSDI benefits \$1 for every \$2 in earnings over a level determined by the Commissioner.

GAO would conduct two studies to: (1) assess existing tax credits and other disability-related employment incentives under the Americans with Disabilities Act and other Federal laws and to address the extent to which these credits and incentives encourage employers to hire individuals with disabilities under the Program; and (2) evaluate the coordination of OASDI and SSI programs as they relate to individuals who become or who no longer are concurrently entitled to both programs, and the effectiveness of work incentives and medical coverage for these individuals.

Reason for change

The proposal builds on the principles of consumer choice and empowerment, encouraging competition among providers of services, rewarding providers for results, and encouraging providers to have a continuing interest in beneficiaries' long-term success in maintaining employment. The proposal is designed to increase choices available to beneficiaries and increase the supply of providers that would be available to help beneficiaries into the workforce.

Recognizing that State VR agencies are able to provide consumers with a wide range of specialized services, the proposal would provide the State VR agencies the option of electing to participate in the Program or remaining under the current law reimbursement system.

Given SSA's limited resources and experience in administering employment and vocational rehabilitation services, the bill establishes program managers to help SSA administer the Program on a national basis. The Committee intends that program managers attempt to maximize beneficiary access to needed services by recommending an adequate number of providers to the Commissioner for selection.

The Commissioner of Social Security is the authorizing agent in certifying payments from the Trust Funds and the general fund of the Treasury and is, therefore, responsible for overall administration of the Program.

With respect to the issuance of tickets, the Committee intends that the Commissioner would determine the method by which SSA would notify beneficiaries of the availability of tickets, the duration for which the tickets may be assigned to an employment network, as well as the allowable renewal periods, if any, of the ticket.

The Committee also intends that the Commissioner would prescribe the times at which payments would be made to employment networks. In addition, the Commissioner would determine the phase-in schedule for State participation in the Program.

The Committee recognizes that individuals with disabilities can benefit from early assistance from groups providing dispute resolution services and believes that the Commissioner should take this into account when establishing a mechanism to resolve disputes between beneficiaries and providers.

Because State VR agencies have a limited ability to accommodate a significant number of beneficiaries with disabilities, the proposal creates a level playing field which allows private and public entities to provide services along with the State VR agencies. Expanding the pool of providers from which a beneficiary may obtain employment and rehabilitation services will increase the number of beneficiaries who receive timely, high quality employment, rehabilitation, and other support services from providers. The proposal creates employment networks to provide services to disabled beneficiaries. The Committee intends that services provided would enhance beneficiaries' employment skills by making them more marketable in the workforce and ultimately help them secure long-term employment. Employment networks would be established so that providers could pool their resources together giving beneficiaries access to a wide array of services to meet their individualized needs.

The Committee encourages the Commissioner to ensure that services are available within a geographic location so that individuals would not be unduly restricted by State borders.

The Committee intends that the "other support services" which are offered by providers may include, but are not limited to, assistive technology services and devices, supported employment services, personal assistance services, and auxiliary aids and services.

The proposal requires that employment networks ensure that employment, vocational rehabilitation, and other support services are provided under individual work plans as defined by the Commissioner. The employment network and the beneficiary would work together to develop an individual work plan. The work plan will provide beneficiaries with ownership and meaningful participation in their work attempt. Such a plan may include a statement of:

- The vocational goal selected by the beneficiary;

- The services and supports and coordination that have been deemed necessary for the beneficiary to accomplish that goal along with information on the expected duration and estimated costs of such services and supports;

- Any terms and conditions related to the provision of such services and supports; and

- Understanding regarding the rights and responsibilities available to the beneficiary, including information as to where the beneficiary can obtain assistance in resolving disputes.

The Committee believes that a work plan should:

- Be signed by both the beneficiary and a representative of the employment network in receipt of the beneficiary's ticket;

- Provide the beneficiary with the opportunity to amend the plan if a change in circumstances necessitates a change in the plan; and

- be made available to the beneficiary and, as appropriate, in an accessible format chosen by the individual.

The proposal requires employment networks to undertake a vocational evaluation with each beneficiary in conjunction with the work plan. Recognizing that many beneficiaries are self-directed and may not need a vocational evaluation, the proposal provides for beneficiary waiver of the vocational evaluation. To the extent possible, state-of-the-art technology, evaluation tools, and work capacity testing should be utilized to generate as wide a variety of realistic vocational opportunities as possible. However, the Committee does not intend the vocational evaluation to be used as a screening device, but rather as a vehicle to assist individuals with respect to his or her abilities, capacities, interests, or desires.

The bill would authorize the Commissioner to pay employment networks under one of two payment systems: an outcome payment system; or an outcome-milestone payment system. Generally, providers bear a financial risk by providing services first, and being paid later according to their results, i.e., assisting beneficiaries to work, remaining at work and off the benefit rolls. To help small providers participate in the Program, the proposal would provide for one or more milestone payments to providers when an employment-related result has been achieved. Without the outcome-milestone payment system, provider participation in the Program might

be limited to only a few large providers who have the necessary cash flow to serve a substantial number of disabled individuals. However, to ensure the cost-effectiveness of the Program, the total of the outcome-milestone payment would be required to be less than the total amount payable to a provider that would have been payable for each individual under the outcome payment system. Because the provider would be paid for results in both payment systems, the provider has an incentive to work with the beneficiary to find the most effective means of helping that beneficiary remain employed.

Witnesses at the Subcommittee on Social Security hearings have indicated that many beneficiaries do not attempt work because of fears that a work attempt will trigger a continuing disability review that will result in benefit termination. Current law, however, provides that benefits may not be suspended or terminated for beneficiaries who are receiving rehabilitation services that are likely to help individuals to leave the disability rolls. For these reasons, the Committee provided that SSA would not initiate a continuing disability review for those beneficiaries using a ticket under the Program.

The Committee recognizes that implementing a Ticket to Work and Self-Sufficiency Program would require SSA to make system changes related to administering the Program, promulgate regulations, prepare field office instructions, design a Program evaluation methodology, award a contract to program manager(s), etc. Therefore, the proposal provides SSA with 1 year to prepare for Program implementation. The Committee intends that no later than 1 year of enactment, SSA will promulgate regulations as are necessary to carry out the provisions of the Program.

The proposal also provides for a phase-in of the Program to ensure that it is implemented in a feasible, cost-effective manner that provides expanded opportunities for beneficiaries to work and to ultimately assist them in leaving the disability program.

The proposal directs the Commissioner to design and conduct a series of evaluations of the Ticket to Work and Self-Sufficiency Program. The Commissioner would consult with the Comptroller General of the United States, private organizations with appropriate expertise, as well as design and evaluation experts within SSA, such as the Office of Research, Evaluation, and Statistics. These consultations would be expected to occur early in the process to ensure that a sound, reliable framework for evaluation is established at the beginning of the Program. In conducting the evaluations, the Commissioner would be required to consult with individuals who have participated in the Program.

Since SSA has no particular expertise in employment, vocational rehabilitation, or other support services, the proposal creates a Ticket to Work and Self-Sufficiency Advisory Panel to advise the Commissioner in implementing the Program. The Advisory Panel would be an active body consisting of diverse experts representing disability consumers, providers of services, employers, and employees. The bill stipulates that at least one member would be a current or former recipient of disability benefits, however, the Committee intends that to the degree possible, all individuals appointed

as Panel members should possess distinct knowledge and experience regarding return-to-work issues.

The Advisory Panel would provide guidance to the Commissioner on implementing the Program in an efficient, cost-effective manner that provides the maximum amount of incentive to disabled beneficiaries. The Advisory Panel would also provide advice on the design and evaluation of the Program as well as advice on the design of the demonstration project providing for reductions in SSDI benefits based on earnings. The Committee expects the Commissioner to take full advantage of the Advisory Panel's expertise.

The bill would repeal the current law provision that specifies that refusal to accept VR services without good cause will lead to the loss of benefits. Although current law, SSA has not enforced this provision. Because the Program is a voluntary one, a benefit withholding sanction is not feasible. In addition, research indicates that disabled beneficiaries who are most successful at work attempts are those who are self-motivated, therefore, the Committee views the imposition of penalties against disabled beneficiaries who choose not to work as counter-productive.

A recurring complaint among disabled beneficiaries and advocates for disabled individuals is that SSA's work incentives are complex, difficult to understand, and poorly implemented. The proposal requires SSA to establish a corps of work incentive specialists, similar to the cadres of Plan to Achieve Self-Support (PASS) specialists recently implemented in SSA. The work incentive specialist would be responsible for disseminating accurate and accessible information to disabled beneficiaries on all facets of SSA's SSDI and SSI work incentives, including demonstration projects designed to assist beneficiaries to work. Since some beneficiaries attempt work without receiving rehabilitation services, work incentive information would be available to all beneficiaries not just those participating in the Ticket Program. In addition, the Committee encourages SSA to provide available decision support software to these work incentive specialists to ensure accuracy and consistency of information provided.

At various disability-related hearings, the Subcommittee on Social Security learned about the problems unique to beneficiaries who have mental disabilities or chronic conditions, many of whom would like to work but have conditions that only let them work part time. SSDI beneficiaries lose cash benefits when they work and earn over \$500 a month after participating in the 9-month trial work period. Because of the \$500 earnings cliff, many SSDI beneficiaries view remaining on the rolls as financially more attractive than risking the uncertainties of competitive employment, especially when low-wage jobs are the likely outcome.

To help beneficiaries overcome this earnings-cliff hurdle, the proposal would require SSA to test a gradual offset of SSDI cash benefits by reducing benefits \$1 for every \$2 in earnings over a determined level. A reduction in benefits based on earnings will help soften the total loss of benefits to beneficiaries who attempt work. In addition, some experts assert that the results of a permanent provision allowing a SSDI benefit offset of \$1 for every \$2 earned over a determined level would result in prohibitive costs to the OASDI trust fund because it would encourage disabled individuals

who currently work despite their impairments to apply for benefits. The Committee intends that this demonstration project would test whether the elimination of an earnings cliff would remove the disincentive for disabled individuals to leave the disability program and yield reliable evidence regarding any induced entry effect. Also, the bill would require the Commissioner to annually report to the Congress on the progress of this demonstration project. The first report is due June 9, 2000. The Committee intends that SSA avoid any delay in implementation and would expedite the start of this project.

The proposal would require that GAO conduct two studies. There is scant information available regarding whether tax credits and other disability-related employment incentives encourage employers to hire and retain individuals with disabilities. Therefore GAO would study whether such credits are incentives to employers. Also, testimony provided to the Subcommittee revealed that disabled beneficiaries suffer adverse effects when they move from SSI eligibility to OASDI entitlement, particularly with respect to work incentives. GAO would study the effectiveness of work incentives and medical coverage for beneficiaries whose eligibility changes from one program to another.

Effective date

The proposal would be implemented on a gradual basis at phase-in sites selected by the Commissioner beginning no later than 1 year after enactment. The Program will be fully implemented as soon as practicable, but not later than 6 years after the Program begins.

C. SECTION 3. EXTENDING MEDICARE COVERAGE FOR OASDI DISABILITY BENEFIT RECIPIENTS WHO ARE USING TICKETS TO WORK AND SELF-SUFFICIENCY

Present law

SSDI beneficiaries are allowed to test their ability to work for at least 9 months without affecting their disability or Medicare benefits.

Disability benefit payments stop when a beneficiary has monthly earnings at or above the substantial gainful work level (\$500) after the 9-month period. If the beneficiary remains disabled but continues working, Medicare continues up to an additional 39 months.

Explanation of provision

Medicare coverage would be extended for an additional 2-year period beyond current law for SSDI beneficiaries during the 6-year implementation period of the Ticket to Work and Self-Sufficiency Program. The Medicare extension would be implemented on a phased-in basis, paralleling the phase-in of the Ticket.

The Secretary of Health and Human Services and the Commissioner of Social Security would report their recommendations for further legislative action regarding the 2-year Medicare expansion no later than 6 years and 6 months after the date of enactment.

Reason for change

According to beneficiaries, their advocates, and rehabilitation providers fear of losing medical benefits is the primary reason beneficiaries are reluctant to attempt work. This provision would eliminate beneficiaries' fear of losing medical coverage for those participating in the Program by extending medical coverage 2 additional years beyond current law provisions.

Effective date

The Medicare extension would be implemented on the same graduated basis as the Ticket to Work and Self-Sufficiency Program and at the same phase-in sites selected by the Commissioner no later than 1 year after enactment.

D. SECTION 4. TECHNICAL AMENDMENTS RELATING TO DRUG
ADDICTS AND ALCOHOLICS

Present law

Public Law 104–121 included amendments to the Social Security and Supplemental Security Income (SSI) disability programs providing that no individual could be considered to be disabled if alcoholism or drug addiction would otherwise be a contributing factor material to the determination of disability. The effective date for all new and pending applications was the date of enactment. For those whose claim had been finally adjudicated before the date of enactment, the amendments would apply commencing with benefits for months beginning on or after January 1, 1997. Individuals receiving benefits due to drug addiction or alcoholism can reapply for benefits based on another impairment. If the individual applied within 120 days after the date of enactment, the Commissioner is required to complete the entitlement redetermination by January 1, 1997.

Public Law 104–121 provided for the appointment of representative payees for recipients allowed benefits due to another impairment who also have drug addiction or alcoholism conditions, and the referral of those individuals for treatment.

Explanation of provision

The provision clarifies that the meaning of the term “final adjudication” includes a pending request for administrative or judicial review or a pending readjudication pursuant to class action or court remand. Also clarifies that if the Commissioner does not perform the entitlement redetermination before January 1, 1997, that entitlement redetermination must be performed in lieu of a continuing disability review.

Corrects an anomaly that currently excludes all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, from the requirement that a representative payee be appointed and that the recipient be referred for treatment.

Reason for change

The provision clearly defines “final adjudication” to avoid any misinterpretation by the courts. One court has concluded that it

can award benefits through January 1, 1997, because the Commissioner's decision denying benefits was issued before March 29, 1996.

As written, current law creates an anomaly, whereby all those allowed benefits (due to another impairment) before March 29, 1996, and redetermined before July 1, 1996, are excluded from the requirement that a representative payee be appointed and that they be referred for treatment. The provision corrects this anomaly.

Effective date

The amendments would be effective as though they had been included in the enactment of Section 105 of Public Law 104-121 (March 29, 1996).

E. SECTION 5. EXTENSION OF DISABILITY INSURANCE PROGRAM
DEMONSTRATION PROJECT AUTHORITY

Present law

Under authority that expired on June 9, 1996, the Commissioner may initiate experiments and demonstration projects to test ways to encourage Social Security Disability Insurance (SSDI) beneficiaries to return to work, and may waive compliance with certain benefit requirements in connection with these projects.

Explanation of provision

This provision would extend demonstration authority to June 10, 2001, and would include authority for demonstration projects involving applicants as well as beneficiaries.

Effective date

Date of enactment.

F. SECTION 6. PERFECTING AMENDMENTS RELATED TO
WITHHOLDING FROM SOCIAL SECURITY BENEFITS

Present law

The Uruguay Round Agreements Act includes revenue provisions requiring that U.S. taxpayers who receive specified Federal payments (including Social Security benefits) be given the option of requesting that the Department of Treasury withhold Federal income taxes from payments made after December 31, 1996.

Section 207 of the Social Security Act prohibits withholding or assignment of Social Security benefits to any party or entity other than the beneficiary.

Explanation of provision

Due to a drafting oversight, the Uruguay Round Agreements Act failed to override the Social Security Act provision that prohibits the assignment of benefits. The provision would amend the Social Security Act anti-assignment section to allow provisions in the tax code to be implemented. It also allocates funding for SSA to administer the tax-withholding provision.

Reason for change

These provisions amend the Social Security Act so that the provisions in the tax code may be implemented, as originally intended, and funding may be allocated for SSA to administer the tax-withholding provision.

Effective date

Applies to benefits paid on or after the first day of the second month beginning after the month of enactment.

G. SECTION 7. TREATMENT OF PRISONERS

1. IMPLEMENTATION OF PROHIBITION AGAINST PAYMENT OF TITLE II BENEFITS TO PRISONERS

Present law

Current law prohibits prisoners from receiving Old Age, Survivors and Disability (OASDI) benefits while incarcerated if they are convicted of any crime punishable by imprisonment of more than one year. Federal, State, county or local prisons are required to make available, upon written request, the name and Social Security number (SSN) of any individual so convicted who is confined in a penal institution or correctional facility.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996, requires the Commissioner to make agreements with any interested State or local institution to provide monthly the names, SSNs, confinement dates, dates of birth, and other identifying information of residents who are Supplemental Security Income (SSI) recipients. The Commissioner is required to pay the institution \$400 for each SSI recipient who becomes ineligible as a result, if the information is provided within 30 days of incarceration, and \$200 if the information is furnished after 30 days but within 90 days. P.L. 104-193 requires the Commissioner to study the desirability, feasibility, and cost of establishing a system for courts to directly furnish SSA with information regarding court orders affecting SSI recipients, and requiring that State and local jails, prisons, and other institutions that enter into contracts with the Commissioner furnish the information by means of an electronic or similar data exchange system.

The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to these agreements to any Federal or federally-assisted cash, food or medical assistance program, for the purpose of determining program eligibility.

Explanation of provision

The provision amends prisoner provisions in P.L. 104-193 to include Old Age, Survivors, and Disability Insurance (OASDI) benefits.

The Commissioner would enter into an agreement with State and local correctional institutions to provide monthly reports which list the names, SSNs, confinement dates, dates of birth, and other identifying information regarding prisoners who receive OASDI benefits. Certain requirements for computer matching agreements would not apply. For each eligible individual who becomes ineli-

gible as a result, the Commissioner would pay the institution an amount up to \$400 if the information is provided within 30 days of incarceration, and up to \$200 if provided after 30 days but within 90 days.

Payments to correctional institutions are reduced by 50 percent for multiple reports on the same individual who receives both SSI and OASDI benefits. Payments made to the correctional institution are made from OASI or DI Trust Funds, as appropriate.

The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to these agreements to any Federal or Federally-assisted cash, food, or medical assistance program for the purpose of determining program eligibility.

Reason for change

The provision applies the prohibitions against payment of benefits to OASDI benefits in the same manner that they apply to SSI benefits. Both SSI and OASDI prisoner provisions were included in the House-passed version of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996. OASDI provisions were deleted in the Senate because of Senate procedural rules. This language restores the OASDI provisions.

These provisions provide new financial incentives for State and local correctional institutions to report information on inmates to the Social Security Administration (SSA) so that payment of OASDI benefits to prisoners being supported at taxpayer expense are stopped promptly.

Privacy Act procedural requirements for computer matching agreements between the Commissioner and correctional institutions impose an excessively costly administrative burden that could hamper the administration of the prisoner payment provisions. Therefore, the Computer Matching and Privacy Protection Act would not apply to the information exchanged under these provisions.

The provision allows SSA to share, and be reimbursed for, any information obtained through these agreements that would assist other Federal agencies in administering their programs.

Payments would be restricted to \$400, even if the prisoner is entitled to both SSI and OASDI benefits.

Effective date

These amendments would be effective for confinements beginning at least three full months after the date of enactment.

2. ELIMINATION OF TITLE II REQUIREMENT THAT CONFINEMENT STEM FROM CRIME PUNISHABLE BY IMPRISONMENT FOR MORE THAN 1 YEAR

Present law

The Social Security Act bars payment of OASDI benefits to prisoners convicted, or who are institutionalized because they are found guilty but insane, of any crime punishable by imprisonment of more than a year.

Explanation of provision

This provision would broaden the prohibition of OASDI payment benefits to prisoners to be identical to those that apply to SSI benefits. In addition, it would replace “an offense punishable by imprisonment for more than 1 year” with “a criminal offense,” delete other language, and include benefits payable to persons confined, throughout a month, to: (1) a penal institution; or (2) other institution if found guilty but insane, regardless of the total duration of the confinement.

Reason for change

An audit conducted by the SSA Office of Inspector General determined that the language in existing law required that for each prisoner eligible for benefits, the duration of incarceration be determined on a case-by-case basis, based on data that can only be obtained from the courts. This is a costly, labor-intensive process that impedes timely suspension of benefits. As a matter of fairness, benefits would also be barred to persons who commit serious crimes but are found guilty by reason of insanity, regardless of the total duration of the institutionalization.

Effective date

Effective for those prisoners whose confinement begins on or after the first day of the fourth month after the month of enactment.

3. CONFORMING TITLE XVI AMENDMENTS

Present law

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 required the Commissioner of Social Security to enter into an agreement with any interested State or local institution (defined as a jail, prison, other correctional facility, or institution where the individual is confined due to a court order) under which the institution shall provide monthly the names, Social Security numbers, dates of birth, confinement dates, and other identifying information. The Commissioner must pay to the institution for each eligible individual who becomes ineligible for SSI \$400 if the information is provided within 30 days of the individual’s becoming an inmate. The payment is \$200 if the information is furnished after 30 days but within 90 days.

Explanation of provision

The amendment would clarify that, in cases in which an inmate receives benefits under both the SSI and Social Security programs, payments to correctional facilities would be restricted to \$400 or \$200, depending on when the report is furnished. The amendment also expands the categories of institutions eligible to report incarceration of prisoners.

Reason for change

Applies payment restriction to correctional facilities for OASDI benefits in the same manner that they apply to SSI payments.

Effective date

August 22, 1996.

4. CONTINUED DENIAL OF BENEFITS TO SEX OFFENDERS REMAINING CONFINED TO PUBLIC INSTITUTIONS UPON COMPLETION OF PRISON TERM

Present law

No provision.

Explanation of provision

The amendment would prohibit OASDI payments to sex offenders who, on completion of a prison term, remain confined in a public institution pursuant to a court finding that they continue to be sexually dangerous to others.

Reason for change

The denial of benefits is extended in the case of sex offenders who remain confined after completing their prison terms.

Effective date

The amendment would apply to benefits for months ending after the date of enactment.

H. SECTION 8. REVOCATION BY MEMBERS OF THE CLERGY OF EXEMPTION FROM SOCIAL SECURITY COVERAGE

Present law

Practicing members of the clergy are automatically covered by Social Security as self-employed workers unless they file for an exemption from Social Security coverage within a period ending with the due date of the tax return for the second taxable year (not necessarily consecutive) in which they receive reimbursement for their ministerial services. Members of the clergy seeking the exemption must file statements with their church, order, or licensing or ordaining body stating their opposition to the acceptance of Social Security benefits on religious principles. If elected, this exemption is irrevocable.

Explanation of provision

The proposal would provide a 2-year "open season," beginning January 1, 1999, for members of the clergy who want to revoke their exemption from Social Security. This decision to join Social Security would be irrevocable. A member of the clergy choosing such coverage would become subject to self employment taxes and his or her subsequent earnings would be credited for Social Security (and Medicare) benefit purposes.

Reason for change

Some members of the clergy elected not to participate in Social Security (and Medicare) early in their careers, before they fully understood the ramifications of doing so. Because the election is irrevocable, there is no way for them to gain access to the program under current law. Clergy typically have modest earnings through-

out their working life times and would be among those most likely to rely on Social Security (and Medicare) for much of their basic health care and living expenses in retirement. This proposal gives them a limited opportunity to enroll in the system, similar to those provided by Congress in 1977 and 1986.

Effective date

The proposal would be effective with respect to service performed in taxable years beginning after December 31, 1998, for a period of 2 years, and with respect to monthly benefits in or after the calendar year the individual's application for revocation is effective.

I. SECTION 9. ADDITIONAL TECHNICAL AMENDMENT RELATING TO COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS UNDER TITLES II AND TITLE XVI

Present law

Current law authorizes funding for making grants to States and public and other organizations for paying part of the cost of cooperative research or demonstration projects.

Explanation of provision

Clarifies current law to include agreements or grants concerning title II of the Social Security Act.

Reason for change

Corrects an omission of intended title II authority.

Effective date

August 4, 1994.

III. VOTE OF THE COMMITTEE

In compliance with change 2(1)(2)(B) of rule XI of the Rules of the House of Representatives, the following statement is made:

The bill, H.R. 3433 was ordered favorably reported to the House of Representatives May 6, 1998 by voice vote, with a quorum present.

IV. BUDGET EFFECTS OF THE BILL

A. COMMITTEE ESTIMATE OF BUDGETARY EFFECTS

In compliance with clause 7(a) of rule XIII of the Rules of the House of Representatives, the following statement is made:

The Committee agrees with the estimate prepared by the Congressional Budget Office (CBO) which is included below.

B. STATEMENT REGARDING NEW BUDGET AUTHORITY AND TAX EXPENDITURES

In compliance with clause 2(1)(3)(B) of rule XI of the Rules of the House of Representatives, the Committee states the Committee bill results in net decreased budget authority for direct spending programs relative to current law, and no new or increased tax expend-

itures. Revenues are increased due to the revocation by members of the clergy of exemption from Social Security coverage.

C. COST ESTIMATE PREPARED BY THE CONGRESSIONAL BUDGET OFFICE

In compliance with clause 2(1)(3)(C) of rule XI of the House of Representatives requiring a cost estimate prepared by the Congressional Budget Office, the following report prepared by CBO is provided:

U.S. CONGRESS,
CONGRESSIONAL BUDGET OFFICE,
Washington, DC, May 8, 1998.

Hon. BILL ARCHER,
*Chairman, Committee on Ways and Means,
House of Representatives, Washington, DC.*

DEAR MR. CHAIRMAN: The Congressional Budget Office has prepared the enclosed cost estimate for H.R. 3433, the Ticket to Work and Self-Sufficiency Act of 1998.

If you wish further details on this estimate, we will be pleased to provide them. The CBO staff contact is Kathy Ruffing.

Sincerely,

PAUL VAN DE WATER
(for June E. O'Neill, Director).

Enclosure.

H.R. 3433—Ticket to Work and Self-Sufficiency Act of 1998

Summary: H.R. 3433, the Ticket to Work and Self-Sufficiency Act of 1998, would revamp the system under which people collecting disability benefits from the Social Security and Supplemental Security Income programs receive vocational rehabilitation services. The bill would also require several demonstration projects, give certain members of the clergy another opportunity to enroll in the Social Security system, and tighten restrictions on the payment of Social Security benefits to certain prisoners. CBO estimates that the bill would add to the federal surplus by \$38 million over the 1999–2003 period; of that amount, \$11 million is in Social Security (which is legally off-budget) and the rest in other programs (which are on-budget).

H.R. 3433 contains no intergovernmental mandates, as defined in the Unfunded Mandates Reform Act (UMRA) and would impose no costs on state, local, or tribal governments.

Estimated cost to the Federal Government: The estimated budgetary impact of H.R. 3433 is summarized in the following table. The costs of this legislation fall within budget functions 570 (Medicare), 600 (Income Security), and 650 (Social Security).

TABLE 1. SUMMARY OF ESTIMATED BUDGETARY EFFECTS OF H.R. 3433

[By fiscal year, in millions of dollars]

| | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 |
|--|---------|---------|---------|---------|---------|---------|
| DIRECT SPENDING | | | | | | |
| Spending under current law: | | | | | | |
| Old-Age, Survivors, and Disability Insurance | 375,785 | 391,477 | 408,764 | 427,736 | 448,711 | 471,221 |

TABLE 1. SUMMARY OF ESTIMATED BUDGETARY EFFECTS OF H.R. 3433—Continued
 [By fiscal year, in millions of dollars]

| | 1998 | 1999 | 2000 | 2001 | 2002 | 2003 |
|--|----------------|------------------|------------------|------------------|------------------|------------------|
| Supplemental Security Income | 27,301 | 28,563 | 29,985 | 31,595 | 33,371 | 35,302 |
| Medicare ¹ | 196,941 | 208,178 | 218,505 | 239,668 | 246,198 | 270,931 |
| Medicaid | 100,506 | 108,418 | 115,014 | 122,594 | 130,891 | 140,742 |
| Total | 700,533 | 736,636 | 772,268 | 821,593 | 859,171 | 918,196 |
| Proposed changes: | | | | | | |
| Old-Age, Survivors, and Disability Insurance | 0 | 2 | 1 | 7 | 10 | 7 |
| Supplemental Security Income | 0 | -1 | -5 | -6 | -6 | -8 |
| Medicare ¹ | 0 | 0 | 0 | (²) | (²) | 2 |
| Medicaid | 0 | (²) | (^{2}) | (^{2}) | (^{2}) | (^{2}) |
| Total | 0 | 1 | -4 | 1 | 5 | 1 |
| Off-budget (OASDI) | 0 | 2 | 1 | 7 | 10 | 7 |
| On-Budget | 0 | -1 | -5 | -6 | -6 | -6 |
| Proposed spending under H.R. 3433: | | | | | | |
| Old-Age, Survivors, and Disability Insurance | 375,785 | 391,479 | 408,765 | 427,743 | 448,721 | 471,228 |
| Supplemental Security Income | 27,301 | 28,562 | 29,980 | 31,589 | 33,365 | 35,294 |
| Medicare ¹ | 196,941 | 208,178 | 218,505 | 239,668 | 246,198 | 270,933 |
| Medicaid | 100,506 | 108,418 | 115,014 | 122,594 | 130,891 | 140,742 |
| Total | 700,533 | 736,637 | 772,264 | 821,594 | 859,176 | 918,197 |
| REVENUES | | | | | | |
| Proposed Changes: | | | | | | |
| Off-budget (OSADI) | 0 | 3 | 7 | 9 | 9 | 10 |
| On-budget | 0 | (²) | 1 | 1 | 1 | 1 |
| Total | 0 | 3 | 8 | 10 | 10 | 11 |
| DEFICIT (-) OR SURPLUS | | | | | | |
| Proposed changes: | | | | | | |
| Off-budget (OASDI) | 0 | (²) | 7 | 2 | -1 | 2 |
| On-budget | 0 | 1 | 6 | 7 | 7 | 7 |
| Total | 0 | 2 | 12 | 9 | 6 | 9 |

¹ Medicare consists of outlays of the Hospital Insurance and Supplementary Medical Insurance trust funds, less premiums.

² Less than \$500,000.

Note.—Components may not sum to totals due to rounding. OASDI=Old-Age, Survivors, and Disability Insurance.

Basis of estimate: For purposes of estimating the budgetary effects of H.R. 3433, CBO assumes enactment in September 1998. CBO's estimate of the bill's effects, by provision, are detailed in the following table and explained below.

Ticket to Work and Self-Sufficiency Program (Section 2): Section 2 of H.R. 3433 would change the way that vocational rehabilitation (VR) services are provided to recipients of Social Security Disability Insurance (DI) and Supplemental Security Income (SSI) benefits. It would also require that SSA test the savings (or costs) of some alternative methods of treating earnings in the DI program.

Current Law. DI and SSI recipients currently receive VR services chiefly through state VR agencies. Data on their experience under those programs are sketchy. The Social Security Administration (SSA) attempts to spot good candidates for VR and refer them for services when it awards benefits, but it does not monitor what happens to them next. VR agencies accept only a fraction of the candidates referred. SSA reimburses the VR agencies for the cost of services rendered if the beneficiary has performed 9 consecutive months of substantial gainful activity (SGA, currently defined by regulation as earnings of more than \$500 a month). In 1996, SSA

began recruiting alternate providers under the Referral System for Vocational Rehabilitation Providers (RSVP) program. Candidates must first be referred to and rejected by the state VR agencies, and the alternate providers face the same reimbursement system (that is, a single payment after 9 months of substantial work). Thus, VR for DI and SSI recipients remains fundamentally a state program.

Scattered clues suggest that approximately 10 percent to 15 percent of new DI and SSI recipients are referred to state VR agencies and that about 10 percent of those referred are accepted. Recently, SSA has made approximately 650,000 DI awards a year; thus, it is likely that about 60,000 to 90,000 a year were referred to VR and perhaps 6,000 received services. SSA has consistently paid for about 4,000 claims per year for VR services provided to DI recipients. SSA has also steadily paid about 4,000 claims for VR services to SSI recipients. Since about 2,000 claims are for people who collect benefits under both programs, total claims reimbursed are about 6,000 a year.

TABLE 2. ESTIMATED BUDGETARY EFFECTS OF PROVISIONS OF H.R. 3433

[By fiscal year, in millions of dollars]

| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 |
|--|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| SECTION 2 | | | | | | | | | | |
| Ticket program for vocational rehabilitation clients-DI: | | | | | | | | | | |
| Payments to program manager | 1 | 2 | 1 | 1 | 2 | 3 | 3 | 4 | 4 | 4 |
| Milestone payments to providers | 0 | (¹) | 1 | 5 | 11 | 17 | 21 | 24 | 28 | 33 |
| Incentive payments to providers | 0 | (¹) | (¹) | 3 | 12 | 27 | 48 | 66 | 87 | 109 |
| Gradual phase-out of current VR system | 0 | (¹) | (¹) | -3 | -8 | -14 | -21 | -32 | -44 | -58 |
| Benefits avoided | 0 | (¹) | (¹) | -4 | -20 | -48 | -84 | -98 | -112 | -126 |
| Extra benefits paid | 0 | (¹) | 1 | 2 | 3 | 5 | 7 | 10 | 13 | 16 |
| Subtotal, DI | 1 | 2 | 3 | 5 | 1 | -10 | -26 | -27 | -24 | -22 |
| Resulting Medicare savings ² | 0 | 0 | (¹) | (¹) | 1 | 1 | 1 | -2 | -9 | -20 |
| Total, provision | 1 | 2 | 3 | 5 | 1 | -9 | -25 | -29 | -33 | -41 |
| Tickets program for vocational rehabilitation clients-SSI: | | | | | | | | | | |
| Payments to program manager | (¹) | 1 | (¹) | 1 | 1 | 1 | 2 | 2 | 2 | 2 |
| Milestone payments to providers | 0 | (¹) | 1 | 3 | 6 | 9 | 10 | 12 | 14 | 16 |
| Incentive payments to providers | 0 | (¹) | (¹) | 1 | 3 | 7 | 12 | 17 | 22 | 28 |
| Gradual phase-out of current VR system | 0 | (¹) | (¹) | -1 | -4 | -7 | -11 | -16 | -22 | -29 |
| Benefits avoided | 0 | (¹) | (¹) | -1 | -5 | -12 | -22 | -25 | -29 | -32 |
| Extra Benefits paid | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| Subtotal, SSI | (¹) | 1 | 1 | 2 | (¹) | -3 | -8 | -11 | -13 | -15 |
| Resulting Medicaid savings | (³) | (^{3}) | (^{3}) | (^{3}) | (^{3}) | (^{3}) | (^{3}) | (^{3}) | (^{3}) | (^{3}) |
| Total, Provision | (¹) | 1 | 1 | 2 | (¹) | -3 | -8 | -11 | -13 | -15 |
| “\$1-for-\$2” Demonstration Projects: ⁵ | | | | | | | | | | |
| Contractor Costs | 0 | (¹) | 4 | 5 | 6 | 6 | 4 | 4 | 4 | 4 |
| DI Benefit Costs | 0 | 0 | 3 | 8 | 13 | 18 | 19 | 18 | 18 | 18 |

TABLE 2. ESTIMATED BUDGETARY EFFECTS OF PROVISIONS OF H.R. 3433—Continued
 [By fiscal year, in millions of dollars]

| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 |
|---|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|------------------|
| Medicare Costs | 0 | 0 | 0 | 0 | 2 | 4 | 7 | 9 | 9 | 9 |
| Total, Provision | 0 | 0 | 7 | 13 | 20 | 28 | 29 | 31 | 31 | 31 |
| SECTION 3 | | | | | | | | | | |
| Extension of Medicare from 3 years to 5 years for clients suspended from DI who have used a ticket ⁴ | 0 | 0 | 0 | 0 | (¹) | (¹) | 1 | 0 | 0 | 0 |
| SECTION 5 | | | | | | | | | | |
| Extension of DI demonstration project authority until June 10, 2001 | 3 | 5 | 5 | 3 | (¹) | 0 | 0 | 0 | 0 | 0 |
| SECTION 7 | | | | | | | | | | |
| Prisoner-related provisions: | | | | | | | | | | |
| Payments to prison officials—OASDI | 2 | 7 | 7 | 8 | 9 | 10 | 10 | 10 | 10 | 10 |
| Payments to prison officials—SSI | 0 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Savings in benefits—OASDI | -3 | -13 | -15 | -18 | -20 | -20 | -20 | -20 | -20 | -20 |
| Savings in benefits—SSI | -1 | -6 | -7 | -8 | -9 | -10 | -10 | -10 | -10 | -10 |
| Total, provision | -3 | -13 | -15 | -17 | -20 | -20 | -20 | -20 | -20 | -20 |
| SECTION 8 | | | | | | | | | | |
| Two-year open season for enrollment by clergy: | | | | | | | | | | |
| Off-budget (OASDI) revenues | 3 | 7 | 9 | 9 | 10 | 10 | 10 | 11 | 11 | 11 |
| On-budget (HI) revenues | 1 | 2 | 2 | 2 | 2 | 2 | 2 | 2 | 3 | 3 |
| Other On-budget revenues ... | (¹) | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 | -1 |
| OASDI benefits | (¹) | (^{1}) | (^{1}) | (^{1}) | (^{1}) | (^{1}) | (^{1}) | (^{1}) | (^{1}) | (^{1}) |
| Total, provision (effect on deficit) | -3 | -8 | -10 | -10 | -11 | -11 | -11 | -12 | -12 | -13 |
| TOTAL | | | | | | | | | | |
| Outlays: | | | | | | | | | | |
| On-budget | -1 | -5 | -6 | -6 | -6 | -7 | -9 | -14 | -22 | -35 |
| Off-budget | 2 | 1 | 7 | 10 | 7 | 4 | -14 | -15 | -13 | -11 |
| Total | 1 | -4 | 1 | 5 | 1 | -2 | -23 | -29 | -35 | -46 |
| Revenues | | | | | | | | | | |
| On-budget | (¹) | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |
| Off-budget | 3 | 7 | 9 | 9 | 10 | 10 | 10 | 11 | 11 | 11 |
| Total | 3 | 8 | 10 | 10 | 11 | 11 | 11 | 12 | 12 | 13 |
| Deficit (-) or surplus (+) | | | | | | | | | | |
| On-budget | 1 | 6 | 7 | 7 | 7 | 8 | 10 | 15 | 23 | 36 |
| Off-budget | (¹) | 7 | 2 | -1 | 2 | 6 | 24 | 26 | 24 | 22 |
| Total | 2 | 12 | 9 | 6 | 9 | 14 | 35 | 41 | 47 | 58 |

¹ Less than \$500,000.

² These savings would occur under current Medicare law. Section 3 of the bill would also extend Medicare coverage for certain suspended recipients.

³ CBO expects that the vast majority of rehabilitated SSI recipients would continue to get Medicaid coverage through the 1619(b) program.

⁴ Under the proposal, the Medicare extension would cover only those recipients who returned to work and used a "ticket" under the new program. The provision would expire 7 years after enactment.

⁵ The bill would require SSA to test graduated reductions in benefits (such as "\$1-for-\$2" above \$85 or above SGA, currently \$500) on a sufficient scale and for a long enough period to permit valid statistical analysis.

Note.—Components may not sum to totals due to rounding.

Clearly, some DI and SSI recipients also return to work without the help of VR agencies. Research suggests that only 10 percent to

20 percent of DI recipients ever work after they start collecting benefits, and only 2 percent to 3 percent eventually have benefits withheld. In contrast, SSA reimburses claims for VR services for fewer than 1 percent of recipients. Thus, for each VR success, one or two other DI recipients go back to work and are suspended from the rolls without VR.

The DI program has several features that are meant to smooth beneficiaries' return to work. Applicants must show that they are incapable of substantial work in order to be awarded benefits. If they do work, the law permits them to earn unlimited amounts for a 9-month period (known as trial work) and a subsequent 3-month grace period before suspending benefits. During the next 3 years—a period known as the extended period of eligibility, or EPE—those beneficiaries may automatically return to the DI rolls if their earnings sink below \$500. Furthermore, Medicare benefits (for which DI beneficiaries qualify after two years on the rolls) also continue during the 3 years of extended eligibility.

The SSI disability program is restricted to people with low income and few resources. Although applicants for SSI benefits must meet the same disability criteria as in the DI program, the SSI program's subsequent treatment of earnings differs somewhat. SSI recipients who work get a reduced benefit (essentially, losing \$1 of benefits for each \$2 of earnings over \$85 a month) but do not give up their benefit entirely. If their earnings top \$500 but they are still medically disabled, they move into section 1619(a) status (and still collect a small cash benefit). If their earnings rise further, they enter 1619(b) status (where they collect no cash benefit but still qualify for Medicaid).

H.R. 3433. The bill would revamp the VR system by permitting nearly any recipient who desires VR to receive it, by permitting clients to choose from a variety of providers in addition to state VR agencies, and by stretching out reimbursements to providers for up to 5 years, contingent on their clients' sustained absence from the rolls.

Under H.R. 3433, SSA would issue tickets to DI and SSI beneficiaries that they could assign to approved VR providers, whether state, private for-profit, or nonprofit. The bill would grant wide latitude to SSA in deciding the terms and conditions of the tickets; SSA tentatively plans to issue tickets to new beneficiaries at the time of award, unless they are deemed likely to recover medically, and to current beneficiaries following a continuing disability review. By accepting a ticket, providers—labeled “networks” in the bill—would agree to supply services, such as training, assistive technology, physical therapy, or placement. A program manager, selected by SSA, would aid in recruiting providers and handling the nuts-and-bolts administration of the program.

Providers could choose between two forms of reimbursement from SSA. One system would be based solely on outcomes; the provider would receive 40 percent of the advantage DI or SSI benefit for up to 5 years, so long as the client stayed off the rolls. Some providers fear, through, that they would experience acute cash-flow problems under such a system. To address that concern, the bill also offers a blended system, bubbled the “milestone-outcome” system. Under that system, SSA would make some payments earlier, but would

trim subsequent payments to ensure that the overall cost (calculated on a net present value basis) did not exceed the cost of a pure outcomes system.

The new program would be phased in gradually. H.R. 3433 calls for it to start in selected areas a year after enactment, and to operate nationwide six years later. Because new providers would continue to come on board even after the program starts operation in an area, CBO assumes that it would take nearly 10 years for the new program to run at its full potential.

CBO assumes that about 7 percent of newly-awarded beneficiaries would seek VR services if they were readily available, versus only about 1 percent who receive them under current law. Both the Transitional Employment Demonstration (TED, a demonstration conducted in the mid-1980s and confined to mentally retarded recipients) and Project Network (a demonstration begun in 1992 and open to both DI and SSI beneficiaries) suggested that about 5 percent of beneficiaries would enroll in VR if given the chance. CBO judged that the level of interest ultimately would slightly exceed 5 percent for two reasons. First, intake under Project Network developed bottlenecks, which may have discouraged some potential participants. Second, Project Network barred any recipients who were employed or self-employed from enrolling; no such bar would be in place under H.R. 3433, however, and those recipients would probably be interested in receiving services and would be attractive to providers.

Research suggests that giving VR raises the propensity to work, and only work can lead to an earnings-related suspension. Based on several econometric studies and on the results to the TED demonstration, CBO assumes that slightly over half of the extra recipients would work. That raw figure, however, can easily exaggerate the effectiveness of VR. The handful of beneficiaries who would sign up for VR are probably the most motivated, and many would have worked anyway. In fact, CBO assumes that one effect of H.R. 3433 would be to enable providers to be reimbursed for providing services for many people who would have worked anyway.

These expected effects can be illustrated by following the experiences of one hypothetical cohort of 650,000 disabled workers—the approximate volume of annual awards in 1992 through 1997. Under current law, about 6,000 would be served under the state VR programs; 4,000 of them would eventually generate a reimbursement to the state program, and would be suspended for at least a month. Another 9,000 would be suspended due to earnings, for at least one month, without any reimbursement to VR. Thus, total suspensions would be about 13,000, or about 2 percent of the cohort, under current law. CBO assumes that, if those beneficiaries could freely enroll in VR using a “ticket,” about 7 percent or 47,000 would get VR services. Most of those VR clients would work, and many (about 12,000) would be suspended for at least one month, an increase of 8,000 in VR-reimbursed cases. However, CBO assumes that about 6,000 of these workers would have gone back to work unaided. Thus, for this cohort, net VR-related suspensions would be 2,000 higher.

In estimating H.R. 3433, CBO adjusted those hypothetical figures for its caseload projections and timing factors. First, CBO as-

sumes that the volume of disabled-worker awards gradually climbs from 625,000 in 1998 to about 810,000 in 2005. Second, CBO also assumed that some extra rehabilitations would occur among the nearly 5 million current DI beneficiaries, not just among new awards, although current beneficiaries are generally poorer candidates for VR than new applicants with more recent work experience. Third, CBO adjusted the numbers for the gradual phase-in of the new system. Under the bill's schedule, assuming enactment by September 1998, the first services would be rendered at a handful of sites in fiscal year 2000. If those clients engaged in trial work in 2001, the first extra suspensions would occur in 2002. Each year, more areas would be brought into the new system.

Specifically, CBO assumed that the number of net additional suspensions—that is, suspensions that would not occur in the absence of the new program—would equal only 400 in 2002, 1,800 in 2003, and between 3,000 and 4,000 a year in 2004 through 2008. Gross suspensions that involve reimbursement to a VR provider would range between 4,000 and 5,000 a year under current law, but would be markedly higher—about 700 more in 2002 and about 9,000 more in 2008—under the proposal. And the number of suspensions involving no reimbursement to VR would drop from about 9,000 in 2002 to about 5,500 in 2008.

CBO also had to make assumptions about recidivism. Many studies have documented that DI recipients who leave the rolls often return. It is not clear whether recipients of VR services are more or less likely to return to the rolls than others; some evidence suggests that the extra boost provided by VR fades over time. Because H.R. 3433 proposes to pay providers for up to 5 years, but only if the recipient stays off the rolls, assumptions about recidivism are critical. Based on a variety of sources, CBO assumes that recipients suspended from the rolls have about a two-thirds chance of still being suspended one year later, about a one-half chance 3 years later (when, technically, their DI entitlement is terminated), and a 40 percent chance after 5 years.

Effects of the Tickets Program in DI. The budgetary consequences of H.R. 3433, from the standpoint of the DI program, would consist of seven effects:

Payments to the program manager.—SSA would hire a program manager to coordinate issuance of tickets, the recruitment of providers, and other asks. Based on a similar arrangement in the RSVP program, CBO assumes that payments to the program manager would amount to just a few million dollars a year.

Milestone payments to providers.—As explained earlier, the bill would give providers a choice between a pure outcome-based system (in which providers would get only periodic payments during the period of suspension) and a blended outcome-milestone system (in which they could get some money earlier). CBO assumes that most providers would opt for the blended system, which CBO assumes to consist of \$500 after several months of work and a \$1,000 bonus on the date of suspension. Placements would be considerably easier for providers to achieve than suspensions. In 2002, milestone payments would be \$1 million for the first batch of 1,000 gross suspensions (mostly people enrolled in 2000, the first year of services) and another \$4 million for about 8,000 working clients (mostly peo-

ple served in 2001) for a total of \$5 million. In 2008, these payments would be about \$14 million for 14,000 gross suspensions and another \$19 million for about 38,000 work efforts, or \$33 million total.

Incentive payments to providers.—The incentive payments would occur over a period of up to 5 years if the beneficiary remains off the rolls. In the pure outcomes system, they would be 40 percent of average benefits. CBO assumes that most providers would opt for the blended payment system, under which—in return for getting some earlier milestone payments—they would accept incentive payments of 30 percent. In 2002, 1,000 suspended beneficiaries would each generate an incentive payment of 30 percent times about \$800 a month, or about \$3 million for the year. In fiscal year 2008, gross suspensions of rehabilitation clients over the 2004–2008 period are assumed to be about 50,000. Some of those would have returned to the rolls, and a few would have died; CBO assumes that 33,000 of the 50,000 would remain suspended. At an average benefit of about \$900 a month, incentive payments would total \$109 million.

Gradual phase-out of current VR system.—CBO assumes that, under current law, the DI trust fund would reimburse claims for VR services (principally claims from state agencies) of about 4,000 at present (at an average cost of about \$11,000), growing to about 5,300 in 2008 (at an average cost of about \$14,000). The new program would gradually replace the current-law system. Even by 2008, a few vestiges of the old system would remain; roughly 20 percent of services rendered in 2006, for example, might still lie outside ticket areas and therefore would generate reimbursements in 2008 (allowing one year for services and one year for trial work) under the old system. Thus, in 2008, the current-law VR program is expected to cost about \$70 million, and about 80 percent of that would have been superseded by the new system.

H.R. 3433 would grant state VR agencies the option of remaining in the current reimbursement system—that is, charging reimbursement for the full amount of costs incurred after 9 months of work. Whether or not those agencies would choose to remain, though, is largely immaterial to CBO's estimate; most clients would be served by other providers.

Benefits avoided.—The various payments to providers discussed above all depend on the number of gross rehabilitations. The savings in DI benefits, in contrast, depend on the number of net or extra rehabilitations. That distinction is important: when providers serve clients who would have worked and eventually been suspended anyway, they do not generate savings in DI benefits.

In 2002, of the total 1,000 suspensions of ticket holders, only 400 would constitute extra rehabilitations. At an average benefit of about \$800 a month, savings would be \$4 million. By 2008, CBO assumes that there would have been a total of 53,000 gross rehabilitations over the 2002–2008 period of which 20,000 would represent extra rehabilitations. Under CBO's assumptions about recidivism, about 12,000 of those 20,000 would still be off the rolls; at an average benefit of about \$900, benefit savings would be about \$126 million.

Extra benefits paid.—Some people might file for DI benefits in order to get VR services, or may even be encouraged to do so by prospective providers (for example, by an insurance company that helps to run their employer's private disability or workers' compensation coverage). For those filers, the entire benefit cost (for any time they spend on the rolls) and the VR cost (if they do eventually get suspended) would be a net cost to the DI program.

To some extent, SSA could minimize this problem by setting the terms and conditions under which it would issue tickets—for example, by denying them to beneficiaries who are expected to experience a medical recovery quite soon. But some such filers might still seep through. CBO assumes that, when fully phased in, about 500 such filers would be induced to apply each year, and half would in fact be rehabilitated after a year or two on the rolls. By 2008, under the phase-in assumptions used by CBO, there would have been a total of 2,400 awards to induced filers; 1,400 would still be on the rolls; and benefits to them, assuming an average monthly check of \$900, would cost about \$16 million.

Resulting Medicare savings.—DI recipients who return to work automatically continue to receive Medicare coverage for 3 years after their suspension from DI. By leading to the rehabilitation and suspension of more DI recipients, H.R. 3433 would be expected to generate some savings in Medicare. DI beneficiaries who are capable of working are probably healthier than other beneficiaries, and their per-capita Medicare cost therefore less than average.

Under CBO's assumption that the first services would be rendered in 2000 and the first resulting suspensions in 2002, Medicare savings would begin in 2005. Of the 400 extra suspensions in 2002, only 200 are still suspended when they complete their EPE in 2005, and Medicare savings would be a scant \$1 million. By 2008, 10,000 extra suspensions are assumed to have occurred over the 2002–2005 period; 5,000 would still be off the rolls; and \$20 million in Medicare savings would result.

On balance, over the 1999–2003 period, CBO posits a small net cost in the DI program from the proposed tickets, mainly because there would be very few extra rehabilitations but there would be some startup costs and a few dollars paid to induced filers. Later, CBO posits small net savings, chiefly because the DI benefit savings from the extra suspensions outweigh, by a slim margin, the costs of paying for those beneficiaries who are skimmed by the providers. Obviously, different assumptions about the relative sizes of these groups would change the conclusions.

Effects of the Tickets Program in SSI.—H.R. 3433 would also bring SSI participants into the new tickets to work program. CBO estimated effects in the SSI program in a manner similar to its estimates for DI. There are a few notable differences.

The number of SSI recipients affected by the bill is generally assumed to be only half as many as in DI. Under current law, SSA generally pays for about 6,000 rehabilitations a year—4,000 in DI and 4,000 in SSI, of which 2,000 are concurrent. Under the bill, services rendered by providers to concurrent beneficiaries would essentially be compensated under the DI rules. Thus, to avoid double-counting concurrent beneficiaries, CBO generally assumed only half as many cases in its SSI estimates as in the analogous DI esti-

mates. Average benefits for disabled SSI beneficiaries are also only about half as large as in the DI program—in 2002, for example, about \$400 in SSI versus \$800 in DI. Therefore, all payments under the proposed system that are pegged to the average benefit, such as the incentive payments to providers, would be smaller in SSI. In fact, that provision has aroused concern that providers would be less willing to provide services to the SSI population. CBO implicitly assumes that providers would serve this group, perhaps emphasizing cheaper services with repeated interventions if necessary.

Because SSI is limited to beneficiaries with low income and few resources, CBO assumed that there would be few induced filers. CBO also assumed that most SSI beneficiaries affected by the bill would retain Medicaid coverage through section 1619(b).

The upshot of H.R. 3433 in the SSI program is a pattern that resembles that for DI: small early costs, giving way to small savings after 2003.

Demonstration Projects. Under current law, after completing the trial work period and the 3-month grace period (during which earnings are disregarded), a disabled worker gives up his or her entire benefit in any month that earnings exceed SGA (\$500). Both anecdotal and statistical evidence suggest that many beneficiaries balk at that, instead quitting work or holding their earnings just below the threshold. Some advocates favor instead, cutting benefits by \$1 for every \$2 of earnings over \$500 a month. More modestly, some favor a treatment of earnings more like the SSI program—a cut of \$1 in benefits for every \$2 of earnings over \$85 a month.

It is very likely that such proposals would encourage more people who are already on the DI rolls to work. Although fewer beneficiaries would be suspended (i.e., have their benefit reduced to zero,) many might have their benefit substantially reduced. A major concern about such proposals is that they would encourage an unknown number of people to file for benefits. Survey data suggest that there are millions of severely impaired people who are nevertheless working and not collecting DI. Filing for benefits, and working part-time, might improve their standards of living. That incentive would be much stronger if the DI program liberalized its treatment of earnings. The SSA Actuary's office in 1994 estimated that applying a \$1-for-\$2 policy for earnings above \$500 would cost \$5 billion in extra DI benefits over a 5-year period and that setting the threshold at \$85 would cost \$2 billion.

H.R. 3433 would require SSA to conduct demonstrations to test the effects of a \$1 reduction in benefits for each \$2 of earnings. It would require that SSA conduct the demonstrations on a wide enough scale, and for a long enough period, to permit valid analysis of the results. CBO assumed that, to comply with those criteria, the demonstrations would have to include perhaps half a dozen small states, that the intake phase of the project would have to last three or four years to permit observation of the expected induced filers and that the incentives themselves would have to be promised to the beneficiaries for an indefinite period. Because the demonstrations would pose formidable issues of design and administration, CBO assumes they would not get under way until 2001. CBO also assumes that the demonstration would be conducted in areas

with and without the tickets to work and self-sufficiency, to enable the effect of the incentives to be isolated from the effects of the new VR program. Even a relatively small-scale demonstration might thereby apply to approximately 2 percent to 3 percent of the nation. Multiplying that percentage times the DI benefit costs contained in the Actuaries' 1994 memo suggests that the demonstration would, after intake is complete, cost almost \$20 million in extra DI benefits a year. It would also lead to slightly higher Medicare costs, since the induced filers would qualify for Medicare after two years on the DI rolls. Finally, CBO assumes that running the demonstrations and collecting and analyzing data would be handled by an expert contractor, at a cost of several million dollars a year. In sum, the \$1-for-\$2 demonstration projects mandated by the bill are estimated to cost \$190 million over the 2001–2008 period.

Extended Medicare Coverage (Section 3). As noted before, DI recipients who give up their cash benefits because of earnings can continue to get Medicare for 3 years. H.R. 3433 proposes to lengthen that period to 5 years. The extended coverage would only be available to beneficiaries who had registered a ticket with a VR provider. Furthermore, the coverage would expire 7 years after enactment (that is, in September 2005, under CBO's assumption).

Since CBO assumes that the first batch of VR clients under the new tickets program would be suspended in 2002, their 3-year period of extended Medicare eligibility under current law would expire in 2005. Therefore, the proposed extension would expire before it would have significant costs. CBO assumes costs of just \$1 million in 2005.

Other Provisions. The other provisions of H.R. 3433 are mostly technical corrections and clarifications to the Social Security Act. Those technical corrections have passed the House twice previously, in September 1996 (H.R. 4039) and April 1997 (H.R. 1048). As pointed out in previous CBO estimates, most do not have budgetary implications. Three sections do have budgetary effects.

Demonstration Project Authority (Section 5). SSA has the authority to conduct certain research and demonstration projects that occasionally require waivers of provisions of Title II of the Social Security Act. That waiver authority expired on June 10, 1996. This bill would extend it until June 10, 2001. This extension would be the fifth since the waiver authority was enacted in 1980. This general waiver authority should not be confused with the so-called \$1-for-\$2 demonstrations that would be required by Section 2 of this bill; those demonstrations are costlier and longer-lasting than the modest projects that SSA would likely conduct on its own.

When the waiver authority has been in effect, SSA has generally spent between \$2 million and \$4 million annually on the affected projects. Because the proposed extension would be for 3 years, CBO judges that it would lead to outlays of \$15 million, chiefly in fiscal years 2000 and 2001.

Provisions Affecting Prisoners (Section 7). H.R. 3433 would also strengthen restrictions on the payment of Social Security benefits to prisoners. Current law sets strict limits on the payment of SSI benefits to incarcerated people and somewhat milder limits on payments of OASDI. SSI recipients who are in prison for a full month—regardless of whether they are convicted—are to have their

benefits suspended while they are incarcerated. OASDI recipients who have been convicted of an offense carrying a maximum sentence of 1 year or more are to have their benefits suspended. Those who are convicted of lesser crimes, and those who are in jail awaiting trial, may still collect OASDI benefits. Those provisions are enforced chiefly by an exchange of computerized data between the Social Security Administration and the Federal Bureau of Prisons, state prisons, and some county jails. Those agreements are voluntarily and, until recently, involved no payments to the institutions.

The Personal Responsibility and Work Opportunity Reconciliation Act of 1996 changed that arrangement by directing SSA to pay institutions for reporting information that led to the identification of ineligible SSI recipients. The payment is \$400 if the institution reports information within 30 days of confinement and \$200 if the report is made 30 to 90 days after confinement. The law also exempts matching agreements between SSA and correctional institutions from certain provisions of the Privacy Act.

This bill would establish analogous arrangements for the OASDI Program. It would also drop the requirement that OASDI benefits be suspended only if the maximum sentence for the offense is 1 year or more. (A conviction would still be required; inmates who are in jail while they await trial could continue to collect benefits.) CBO estimated the effects of this provision, like its predecessor in the welfare reform law, by analyzing data from several sources that suggest about 4 percent to 5 percent of prisoners were receiving Social Security, SSI benefits, or both before incarceration. Reports from SSA's Inspector General showed that some of those prisoners were overlooked under matching arrangements either because their institution had not signed an agreement, had not renewed it promptly, or did not submit data on schedule.

CBO estimates that, over the 1999–2003 period, the provision in H.R. 3433 would lead to payments of \$32 million to correctional institutions out of the OASDI trust funds and benefit savings of \$69 million, for a net saving of \$37 million. CBO also expects that the broader arrangement, by doubling the pool of potential payments, would encourage more correctional institutions to submit information accurately and promptly and would therefore lead to spillover savings in the SSI program amounting to nearly \$30 million over the 1999–2003 period.

Open Season for Clergy to Enroll in Social Security (Section 8). Under current law, ministers of a church are generally treated as self-employed individuals for the purpose of the Social Security payroll tax. However, ministers who are opposed to participating in the program on religious principles may reject coverage by filing with the Internal Revenue Service before the tax filing date for their second year of work in the ministry. H.R. 3433 would give those ministers a chance to revoke their exemptions. It would give them a two-year window—ending on the tax filing deadline for the second taxable year beginning after December 31, 1998—to exercise that option.

In 1977 and 1986, the clergy were offered a similar opportunity to opt back into Social Security. Based on that experience, CBO estimates that about 3,500 ministers would take advantage of the opportunity. CBO estimates that the clergy who elect coverage would

pay about \$3 million in Social Security (OASDI) taxes, which are off-budget, in 1999 and \$10 million a year thereafter. They would also pay Hospital Insurance (HI) taxes, which are on-budget, of about \$2 million a year. Finally, income tax revenues would drop slightly because, as self-employed individuals, ministers paying Social Security could deduct a portion of that tax when computing income tax.

Pay-as-you-go considerations: The Balanced Budget and Emergency Deficit Control Act of 1985 establishes pay-as-you-go procedures for legislation affecting direct spending or receipts. The projected changes in direct spending are shown in the table below for fiscal years 1999–2008. Only changes affecting on-budget outlays and receipts (that is, those in non-Social Security programs) affect the pay-as-you-go scorecard. For purposes of enforcing pay-as-you-go procedures, only the effects in the current year, budget year, and the succeeding four years are counted.

TABLE 3.—SUMMARY OF PAY-AS-YOU-GA EFFECTS OF H.R. 3433

| | By fiscal years, in millions of dollars— | | | | | | | | | |
|--------------------------|--|------|------|------|------|------|------|------|------|------|
| | 1999 | 2000 | 2001 | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008 |
| Change in outlays | -1 | -5 | -6 | -6 | -6 | -7 | -9 | -14 | -22 | -35 |
| Change in receipts | (¹) | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 | 1 |

¹ Less than \$500,000.

Note.—components may not sum to totals due to rounding.

Social Security outlays and receipts do not appear on the pay-as-you-go scorecard, but the House of Representatives tracks them separately. That tally includes effects only for the year in which the legislation takes effect and the four subsequent years; for H.R. 3433, the relevant years are 1998 through 2002. It also includes balances carried over from laws enacted in previous years, such as the Contract with America Advancement Act (Public Law 104–121) enacted in 1996. Under the rules of the House, the Social Security scorecard includes only tax receipts and benefit outlays of the Social Security trust funds. Therefore, outlays for purposes other than benefits—such as the payments to VR providers and to prison officials that would occur under H.R. 3433—do not appear on the scorecard.

TABLE 4.—CBO ESTIMATE OF CURRENT STATUS OF THE SOCIAL SECURITY SCORECARD IN THE HOUSE OF REPRESENTATIVES

| | By fiscal years, in millions of dollars— | | | | |
|--|--|------|-------|-------|-------|
| | 1998 | 1999 | 2000 | 2001 | 2002 |
| Scorecard at state of 1998: | | | | | |
| OASDI taxes | 146 | 80 | ..... | ..... | ..... |
| OASDI benefits | -77 | -114 | 75 | ..... | ..... |
| Net effect | 223 | 194 | -75 | ..... | ..... |
| Ticket to Work and Self-Sufficiency Act of 1998 (H.R. 3433): | | | | | |
| OASDI taxes ..... | ..... | 8 | 9 | 9 | 9 |
| OASDI benefits | 0 | -3 | -13 | -11 | -12 |
| Net effect | 0 | 11 | 22 | 20 | 21 |
| Scorecard assuming enactment of H.R. 3433: | | | | | |
| OASDI taxes | 146 | 88 | 9 | 9 | 9 |

TABLE 4.—CBO ESTIMATE OF CURRENT STATUS OF THE SOCIAL SECURITY SCORECARD IN THE HOUSE OF REPRESENTATIVES—Continued

| | By fiscal years, in millions of dollars— | | | | |
|----------------------|--|------|------|------|------|
| | 1998 | 1999 | 2000 | 2001 | 2002 |
| OASDI benefits | -77 | -117 | 62 | -11 | -12 |
| Net effect | 223 | 205 | -53 | 20 | 21 |

Note.—Components may not sum to totals due to rounding.

Estimated impact on State, local, and tribal governments: H.R. 3433 contains no intergovernmental mandates as defined in UMRA and would impose no costs on state, local, or tribal governments. Although state VR agencies would lose their monopoly—or, technically, their “right of first refusal”—to serve SSA clients, the budgetary impact of this change would be minimal. In addition, state and local prisons would collect additional payments for providing certain computerized data to SSA that CBO estimates would total \$35 million over the 1999–2003 period.

Estimated impact on the private sector: H.R. 3433 contains no private-sector mandates as defined in UMRA.

Estimate prepared by: Federal cost: Kathy Ruffing. Impact on State, Local, and Tribal Governments: Marc Nicole. Impact on the Private Sector: Ralph Smith.

Estimate approved by: Paul N. Van de Water, Assistant Director for Budget Analysis.

V. OTHER MATTERS REQUIRED TO BE DISCUSSED UNDER THE RULES OF THE HOUSE

A. COMMITTEE OVERSIGHT FINDINGS AND RECOMMENDATIONS

In compliance with clause 2(1)(3)(A) of rule XI of the Rules of the House of Representatives, the Committee reports that the need for legislation was confirmed through its ongoing oversight of the Social Security Administration and the Social Security programs.

B. SUMMARY OF FINDINGS AND RECOMMENDATIONS OF THE GOVERNMENT REFORM AND OVERSIGHT COMMITTEE

In compliance with clause 2(1)(3)(D) of rule XI of the Rules of the House of Representatives, the Committee states that no oversight findings and recommendations have been submitted to this Committee by the Committee on Government Reform and Oversight with respect to the provisions contained in this bill.

C. CONSTITUTIONAL AUTHORITY STATEMENT

With respect to clause 2(1)(4) of rule XI of the Rules of the House of Representatives, relating to Constitutional Authority, the Committee states that the Committee’s action in reporting the bill is derived from Article I of the Constitution, Section 8 (“The Congress shall have power to lay and collect taxes, duties, imposts and excises, to pay the debts and to provide for * * * the general Welfare of the United States * * *”).

VI. APPLICABILITY OF FEDERAL ADVISORY COMMITTEE ACT

Pursuant to the Federal Advisory Committee Act (5 U.S.C., App., section 5(b)), the Committee states that any advisory bodies created by the bill, such as the Ticket to Work and Self-Sufficiency Advisory Panel are consciously created, and are deemed appropriate and necessary to carry out the purposes of the bill. It is the view of the Committee that the functions of any such advisory bodies are not being and could be performed by one or more agencies or by an advisory committee already in existence, or by enlarging the mandate of an existing advisory committee.

VII. CHANGES IN EXISTING LAW MADE BY THE BILL AS REPORTED

In compliance with clause 3 of rule XIII of the Rules of the House of Representatives, changes in existing law made by the bill, as reported, are shown as follows (existing law proposed to be omitted is enclosed in black brackets, new matter is printed in italic, existing law in which no change is proposed is shown in roman):

SOCIAL SECURITY ACT

* * * * *

TITLE II—FEDERAL OLD-AGE, SURVIVORS, AND DISABILITY INSURANCE BENEFITS

FEDERAL OLD-AGE AND SURVIVORS INSURANCE TRUST FUND AND FEDERAL DISABILITY INSURANCE TRUST FUND

SEC. 201. (a) * * *

* * * * *

Mother's and Father's Insurance Benefits

(g)(1)(A) The Managing Trustee of the Trust Funds (which for purposes of this paragraph shall include also the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund established by title XVIII) is directed to pay from the Trust Funds into the Treasury—

(i) * * *

(ii) the amounts estimated (pursuant to the applicable method prescribed under paragraph (4) of this subsection) by the Commissioner of Social Security which will be expended, out of moneys made available for expenditures from the Trust Funds, during such three-month period to cover the cost of carrying out the functions of the Social Security Administration, specified in section 232, which relate to the administration of provisions of the Internal Revenue Code of 1986 other than those referred to in clause (i) *and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons' representative payee.*

Such payments shall be carried into the Treasury as the net amount of repayments due the general fund account for reimbursement of expenses incurred in connection with the administration of titles II and XVIII of this Act and chapters 2 and 21 of the Internal Revenue Code of 1986. A final accounting of such payments for any fiscal year shall be made at the earliest practicable date after the close thereof. There are hereby authorized to be made available for expenditure, out of any or all of the Trust Funds, such amounts as the Congress may deem appropriate to pay the costs of the part of the administration of this title, title XVI, and title XVIII for which the Commissioner of Social Security is responsible, the costs of title XVIII for which the Secretary of Health and Human Services is responsible, and the costs of carrying out the functions of the Social Security Administration, specified in section 232, which relate to the administration of provisions of the Internal Revenue Code of 1986 other than those referred to in clause (i) of the first sentence of this subparagraph. Of the amounts authorized to be made available out of the Federal Old Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund under the preceding sentence, there are hereby authorized to be made available from either or both of such Trust Funds for continuing disability reviews—

- (i) for fiscal year 1996, \$260,000,000;
- (ii) for fiscal year 1997, \$360,000,000;
- (iii) for fiscal year 1998, \$570,000,000;
- (iv) for fiscal year 1999, \$720,000,000;
- (v) for fiscal year 2000, \$720,000,000;
- (vi) for fiscal year 2001, \$720,000,000; and
- (vii) for fiscal year 2002, \$720,000,000.

For purposes of this subparagraph, the term “continuing disability review” means a review conducted pursuant to section 221(i) and a review or disability eligibility redetermination conducted to determine the continuing disability and eligibility of a recipient of benefits under the supplemental security income program under title XVI, including any review or redetermination conducted pursuant to section 207 or 208 of the Social Security Independence and Program Improvements Act of 1994 (Public Law 103–296) *and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons’ representative payee.*

(B) After the close of each fiscal year—

- (i) the Commissioner of Social Security shall determine—
 - (I) the portion of the costs, incurred during such fiscal year, of administration of this title, title XVI, and title XVIII for which the Commissioner is responsible and of carrying out the functions of the Social Security Administration, specified in section 232, which relate to the administration of provisions of the Internal Revenue Code of 1986 (other than those referred to in clause (i) of the first sentence of [subparagraph (A)],] *subparagraph (A)) and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons*

entitled to such benefits or such persons' representative payee, which should have been borne by the general fund of the Treasury,

* * * * *

(C) After the determinations under subparagraph (B) have been made for any fiscal year, the Commissioner of Social Security and the Secretary shall each certify to the Managing Trustee the amounts, if any, which should be transferred from one to any of the other such Trust Funds and the amounts, if any, which should be transferred between the Trust Funds (or one of the Trust Funds) and the general fund of the Treasury, in order to ensure that each of the Trust Funds and the general fund of the Treasury have borne their proper share of the costs, incurred during such fiscal year, for—

(i) * * *

* * * * *

(iii) carrying out the functions of the Social Security Administration, specified in section 232, which relate to the administration of provisions of the Internal Revenue Code of 1986 (other than those referred to in clause (i) of the first sentence of subparagraph (A)) *and the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons' representative payee.*

The Managing Trustee shall transfer any such amounts in accordance with any certification so made.

(D) The determinations required under subclauses (IV) and (V) of subparagraph (B)(i) shall be made in accordance with the cost allocation methodology in existence on the date of the enactment of the Social Security Independence and Program Improvements Act of 1994, until such time as the methodology for making the determinations required under such subclauses is revised by agreement of the Commissioner and the Secretary, except that the determination of the amounts to be borne by the general fund of the Treasury with respect to expenditures incurred in carrying out the functions of the Social Security Administration specified in section 232 *and the functions of the Social Security Administration in connection with the withholding of taxes from benefits as described in section 207(c)* shall be made pursuant to the applicable method prescribed under paragraph (4).

* * * * *

(4) The Commissioner of Social Security shall utilize the method prescribed pursuant to this paragraph, as in effect immediately before the date of the enactment of the Social Security Independence and Program Improvements Act of 1994, for determining the costs which should be borne by the general fund of the Treasury of carrying out the functions of the Commissioner, specified in section 232, which relate to the administration of provisions of the Internal Revenue Code of 1986 (other than those referred to in clause (i) of the first sentence of paragraph (1)(A)). *The Board of Trustees of such Trust Funds shall prescribe the method of determining the*

costs which should be borne by the general fund in the Treasury of carrying out the functions of the Social Security Administration in connection with the withholding of taxes from benefits, as described in section 207(c), pursuant to requests by persons entitled to such benefits or such persons' representative payee. If at any time or times thereafter the Boards of Trustees of such Trust Funds consider such action advisable, they may modify the method of determining such costs.

* * * * *

AGE AND SURVIVORS INSURANCE BENEFIT PAYMENTS

Old Age Insurance Benefits

SEC. 202. (a) * * *

* * * * *

Limitation on Payments to Prisoners and Certain Other Inmates of Publicly Funded Institutions

(x)(1)(A) Notwithstanding any other provision of this title, no monthly benefits shall be paid under this section or under section 223 to any individual for any month **【during】** *throughout* which such individual—

(i) is confined in a jail, prison, or other penal institution or correctional facility pursuant to his conviction of **【an offense punishable by imprisonment for more than 1 year (regardless of the actual sentence imposed) a criminal offense, 【or】**

(ii) is confined by court order in an institution at public expense in connection with—

(I) a verdict or finding that the individual is guilty but insane, with respect to **【an offense punishable by imprisonment for more than 1 year】** *a criminal offense,*

(II) a verdict or finding that the individual is not guilty of such an offense by reason of insanity,

(III) a finding that such individual is incompetent to stand trial under an allegation of such an offense, or

(IV) a similar verdict or finding with respect to such an offense based on similar factors (such as a mental disease, a mental defect, or mental incompetence)**【.】**, **【or】**

(iii) immediately upon completion of confinement as described in clause (i) pursuant to conviction of a criminal offense an element of which is sexual activity, is confined by court order in an institution at public expense pursuant to a finding that the individual is a sexually dangerous person or a sexual predator or a similar finding.

(B)(i) * * *

(ii) For purposes of **【clause (ii)】** *clauses (ii) and (iii)* of subparagraph (A), an individual confined in an institution as described in such clause (ii) shall be treated as remaining so confined until—

(I) he or she is released from the care and supervision of such institution, and

(II) such institution ceases to meet the individual's basic living needs.

* * * * *

(3)(A) Notwithstanding the provisions of section 552a of title 5, United States Code, or any other provision of Federal or State law, any agency of the United States Government or of any State (or political subdivision thereof) shall make available to the Commissioner of Social Security, upon written request, the name and social security account number of any individual who is confined as described in paragraph (1) if the confinement is under the jurisdiction of such agency and the Commissioner of Social Security requires such information to carry out the provisions of this section.

(B)(i) *The Commissioner shall enter into an agreement under this subparagraph with any interested State or local institution comprising a jail, prison, penal institution, or correctional facility, or comprising any other institution a purpose of which is to confine individuals as described in paragraph (1)(A)(ii). Under such agreement—*

(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, social security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the individuals confined in the institution as the Commissioner may require for the purpose of carrying out paragraph (1); and

(II) the Commissioner shall pay to the institution, with respect to information described in subclause (I) concerning each individual who is confined therein as described in paragraph (1)(A), who receives a benefit under this title for the month preceding the first month of such confinement, and whose benefit under this title is determined by the Commissioner to be not payable by reason of confinement based on the information provided by the institution, \$400 (subject to reduction under clause (ii)) if the institution furnishes the information to the Commissioner within 30 days after the date such individual's confinement in such institution begins, or \$200 (subject to reduction under clause (ii)) if the institution furnishes the information after 30 days after such date but within 90 days after such date.

(ii) The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 1611(e)(1)(I).

(iii) The provisions of section 552a of title 5, United States Code, shall not apply to any agreement entered into under clause (i) or to information exchanged pursuant to such agreement.

(iv) There is authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund, as appropriate, such sums as may be necessary to enable the Commissioner to make payments to institutions required by clause (i)(II). Sums so transferred shall be treated as direct spending for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985 and excluded from budget totals in accordance with section 13301 of the Budget Enforcement Act of 1990.

(v) The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to agreements entered into under clause (i) to any agency administering a Federal or federally-assisted cash, food, or medical assistance program for eligibility purposes.

* * * * *

ASSIGNMENT

SEC. 207. (a) * * *

* * * * *

(c) Nothing in this section shall be construed to prohibit withholding taxes from any benefit under this title, if such withholding is done pursuant to a request made in accordance with section 3402(p)(1) of the Internal Revenue Code of 1986 by the person entitled to such benefit or such person's representative payee.

* * * * *

DISABILITY DETERMINATIONS

SEC. 221. (a) * * *

* * * * *

(c)(1) * * *

* * * * *

(4) For suspension of reviews under this subsection in the case of an individual using a ticket to work and self-sufficiency, see section 1147(i).

REHABILITATION SERVICES

Referral for Rehabilitation Services

SEC. 222. **[(a)** It is hereby declared to be the policy of the Congress that disabled individuals applying for a determination of disability, and disabled individuals who are entitled to child's insurance benefits, widow's insurance benefits, or widower's insurance benefits, shall be promptly referred to the State agency or agencies administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 for necessary vocational rehabilitation services, to the end that the maximum number of such individuals may be rehabilitated into productive activity.

[Deductions on Account of Refusal To Accept Rehabilitation Services

[(b)(1) Deductions, in such amounts and at such time or times as the Commissioner of Social Security shall determine, shall be made from any payment or payments under this title to which an individual is entitled, until the total of such deductions equals such individual's benefit or benefits under sections 202 and 223 for any month in which such individual, if a child who has attained the age of eighteen and is entitled to child's insurance benefits, a widow, widower, surviving divorced wife, or surviving divorced husband who has not attained age 60, or an individual entitled to disability

insurance benefits, refuses without good cause to accept rehabilitation services available to him under a State plan approved under title I of the Rehabilitation Act of 1973. Any individual who is a member or adherent of any recognized church or religious sect which teaches its members or adherents to rely solely, in the treatment and cure of any physical or mental impairment, upon prayer or spiritual means through the application and use of the tenets or teachings of such church or sect, and who, solely because of his adherence to the teachings or tenets of such church, or sect, refuses to accept rehabilitation services available to him under a State plan approved under title I of the Rehabilitation Act of 1973, shall, for the purposes of the first sentence of this subsection, be deemed to have done so with good cause.

[(2) Deductions shall be made from any child's insurance benefit to which a child who has attained the age of eighteen is entitled or from any mother's or father's insurance benefit to which a person is entitled, until the total of such deductions equals such child's insurance benefit or benefits or such mother's or father's insurance benefit or benefits under section 202 for any month in which such child or person entitled to mother's or father's insurance benefits is married to an individual who is entitled to disability insurance benefits and in which such individual refuses to accept rehabilitation services and a deduction, on account of such refusal, is imposed under paragraph (1). If both this paragraph and paragraph (3) are applicable to a child's insurance benefit for any month, only an amount equal to such benefit shall be deducted.

[(3) Deductions shall be made from any wife's, husband's, or child's insurance benefit, based on the wages and self-employment income of an individual entitled to disability insurance benefits, to which a wife, divorced wife, husband, divorced husband, or child is entitled, until the total of such deductions equals such wife's, husband's, or child's insurance benefit or benefits under section 202 for any month in which the individual, on the basis of whose wages and self-employment income such benefit was payable, refuses to accept rehabilitation services and deductions, on account of such refusal, are imposed under paragraph (1).

[(4) The provisions of paragraph (1) shall not apply to any child entitled to benefits under section 202(d), if he has attained the age of 18 but has not attained the age of 22, for any month during which he is a full-time elementary or secondary school student (as defined and determined under section 202(d)).]

* * * * *

ADDITIONAL RULES RELATING TO BENEFITS BASED ON DISABILITY

Suspension of Benefits

SEC. 225. (a) * * *

Continued Payments During Rehabilitation Program

(b) Notwithstanding any other provision of this title, payment to an individual of benefits based on disability (as described in the first sentence of subsection (a)) shall not be terminated or suspended because the physical or mental impairment, on which the

individual's entitlement to such benefits is based, has or may have ceased, if—

(1) such individual is participating in [a program of vocational rehabilitation services] *a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1147 or another program of vocational rehabilitation services, employment services, or other support services approved by the Commissioner of Social Security, and*

* * * * *

ENTITLEMENT TO HOSPITAL INSURANCE BENEFITS

SEC. 226. (a) * * *

(b) Every individual who—

(1) * * *

* * * * *

shall be entitled to hospital insurance benefits under part A of title XVIII for each month beginning with the later of (I) July 1973 or (II) the twenty-fifth month of his entitlement or status as a qualified railroad retirement beneficiary described in paragraph (2), and ending (subject to the last sentence of this subsection) with the month following the month in which notice of termination of such entitlement to benefits or status as a qualified railroad retirement beneficiary described in paragraph (2) is mailed to him, or if earlier, with the month before the month in which he attains age 65. In applying the previous sentence in the case of an individual described in paragraph (2)(C), the “twenty-fifth month of his entitlement” refers to the first month after the twenty-fourth month of entitlement to specified benefits referred to in paragraph (2)(C) and “notice of termination of such entitlement” refers to a notice that the individual would no longer be determined to be entitled to such specified benefits under the conditions described in that paragraph. For purposes of this subsection, an individual who has had a period of trial work which ended as provided in section 222(c)(4)(A), and whose entitlement to benefits or status as a qualified railroad retirement beneficiary as described in paragraph (2) has subsequently terminated, shall be deemed to be entitled to such benefits or to occupy such status (notwithstanding the termination of such entitlement or status) for the period of consecutive months [throughout all of which] *throughout the first 24 months of which the physical or mental impairment, on which such entitlement or status was based, continues, and throughout all of which such individual would have been entitled to monthly insurance benefits under title II or as a qualified railroad retirement beneficiary had such individual been unable to engage in substantial gainful activity, but not in excess of 24 such months (plus 24 additional such months in the case of an individual who the Commissioner determines is using a ticket to work and self-sufficiency issued under section 1147, but only for additional months that occur in the 7-year period beginning on the date of the enactment of the Ticket to Work and Self-Sufficiency Act of 1998).* In determining when an individual's entitlement or status terminates for purposes of the preceding sentence, the term “36 months” in the second sentence of section 223(a)(1), in section 202(d)(1)(G)(i), in the last sentence of section

202(e)(1), and in the last sentence of section 202(f)(1) shall be applied as though it read "15 months".

* * * * *

TITLE XI—GENERAL PROVISIONS, PEER REVIEW, AND ADMINISTRATIVE SIMPLIFICATION

* * * * *

PART A—GENERAL PROVISIONS

* * * * *

COOPERATIVE RESEARCH OR DEMONSTRATION PROJECTS

SEC. 1110. (a)(1) * * *

* * * * *

(3) Grants and payments under contracts or cooperative arrangements under paragraph (1) may be made either in advance or by way of reimbursement, as may be determined by the Secretary (or the Commissioner, with respect to any jointly financed cooperative agreement or grant concerning title *II* or *XVI*); and shall be made in such installments and on such conditions as the Secretary (or the Commissioner, as applicable) finds necessary to carry out the purposes of this subsection.

* * * * *

THE TICKET TO WORK AND SELF-SUFFICIENCY PROGRAM

SEC. 1147. (a) *IN GENERAL.*—The Commissioner of Social Security shall establish a Ticket to Work and Self-Sufficiency Program, under which a disabled beneficiary may use a ticket to work and self-sufficiency issued by the Commissioner in accordance with this section to obtain employment services, vocational rehabilitation services, or other support services from an employment network which is of the beneficiary's choice and which is willing to provide such services to such beneficiary.

(b) *TICKET SYSTEM.*—

(1) *DISTRIBUTION OF TICKETS.*—The Commissioner of Social Security may issue a ticket to work and self-sufficiency to disabled beneficiaries for participation in the Program.

(2) *ASSIGNMENT OF TICKETS.*—A disabled beneficiary holding a ticket to work and self-sufficiency may assign the ticket to any employment network of the beneficiary's choice which is serving under the Program and is willing to accept the assignment.

(3) *TICKET TERMS.*—A ticket issued under paragraph (1) shall consist of a document which evidences the Commissioner's agreement to pay (as provided in paragraph (4)) an employment network, which is serving under the Program and to which such ticket is assigned by the beneficiary, for such employment services, vocational rehabilitation services, and other support services as the employment network may provide to the beneficiary.

(4) *PAYMENTS TO EMPLOYMENT NETWORKS.*—The Commissioner shall pay an employment network under the Program in

accordance with the outcome payment system under subsection (h)(2) or under the outcome-milestone payment system under subsection (h)(3) (whichever is elected pursuant to subsection (h)(1)). An employment network may not request or receive compensation for such services from the beneficiary.

(c) STATE PARTICIPATION.—

(1) PERIODIC ELECTIONS.—Each State agency administering or supervising the administration of the State plan approved under title I of the Rehabilitation Act of 1973 may elect to participate in the Program (or to revoke any such election) as an employment network. The Commissioner shall provide for periodic opportunities for exercising such elections (and revocations).

(2) TREATMENT OF STATE AGENCIES.—Any such election (or revocation) by a State agency described in paragraph (1) taking effect during any period for which an individual residing in the State is a disabled beneficiary and a client of the State agency shall not be effective with respect to such individual to the extent that such election (or revocation) would result in any change in the method of payment to the State agency with respect to the individual from the method of payment to the State agency with respect to the individual in effect immediately before such election (or revocation).

(3) EFFECT OF PARTICIPATION BY STATE AGENCY.—

(A) STATE AGENCIES PARTICIPATING.—In any case in which a State agency described in paragraph (1) elects under paragraph (1) to participate in the Program—

(i) the employment services, vocational rehabilitation services, and other support services which, upon assignment of tickets to work and self-sufficiency, are provided to disabled beneficiaries by the State agency acting as an employment network shall be governed by plans for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973, and

(ii) the provisions of section 222(d) and the provisions of subsections (d) and (e) of section 1615 shall not apply with respect to such State.

(B) STATE AGENCIES ADMINISTERING MATERNAL AND CHILD HEALTH SERVICES PROGRAMS.—Subparagraph (A) shall not apply with respect to any State agency administering a program under title V of this Act.

(4) SPECIAL REQUIREMENTS APPLICABLE TO CROSS-REFERRAL TO CERTAIN STATE AGENCIES.—

(A) IN GENERAL.—In any case in which an employment network has been assigned a ticket to work and self-sufficiency by a disabled beneficiary, no State agency shall be deemed required, under this section, title I of the Rehabilitation Act of 1973, or a State plan approved under such title, to accept any referral of such disabled beneficiary from such employment network unless such employment network and such State agency have entered into a written agreement that meets the requirements of subparagraph (B).

(B) *TERMS OF AGREEMENT.*—An agreement required by subparagraph (A) shall specify, in accordance with regulations prescribed pursuant to subparagraph (C)—

(i) the extent (if any) to which the employment network holding the ticket will provide to the State agency—

(I) reimbursement for costs incurred in providing services described in subparagraph (A) to the disabled beneficiary, and

(II) other amounts from payments made by the Commissioner to the employment network pursuant to subsection (h), and

(ii) any other conditions that may be required by such regulations.

(C) *REGULATIONS.*—The Commissioner of Social Security and the Secretary of Education shall jointly prescribe regulations specifying the terms of agreements required by subparagraph (A) and otherwise necessary to carry out the provisions of this paragraph.

(D) *PENALTY.*—No payment may be made to an employment network pursuant to subsection (h) in connection with services provided to any disabled beneficiary if such employment network makes referrals described in subparagraph (A) in violation of the terms of the contract required under subparagraph (A) or without having entered into such a contract.

(d) *RESPONSIBILITIES OF THE COMMISSIONER OF SOCIAL SECURITY.*—

(1) *SELECTION AND QUALIFICATIONS OF PROGRAM MANAGERS.*—The Commissioner of Social Security shall enter into agreements with one or more organizations in the private or public sector for service as a program manager to assist the Commissioner in administering the Program. Any such program manager shall be selected by means of a competitive bidding process, from among organizations in the private or public sector with available expertise and experience in the field of vocational rehabilitation or employment services.

(2) *TENURE, RENEWAL, AND EARLY TERMINATION.*—Each agreement entered into under paragraph (1) shall provide for early termination upon failure to meet performance standards which shall be specified in the agreement and which shall be weighted to take into account any performance in prior terms. Such performance standards shall include (but are not limited to)—

(A) measures for ease of access by beneficiaries to services, and

(B) measures for determining the extent to which failures in obtaining services for beneficiaries fall within acceptable parameters, as determined by the Commissioner.

(3) *PRECLUSION FROM DIRECT PARTICIPATION IN DELIVERY OF SERVICES IN OWN SERVICE AREA.*—Agreements under paragraph (1) shall preclude—

(A) direct participation by a program manager in the delivery of employment services, vocational rehabilitation

services, or other support services to beneficiaries in the service area covered by the program manager's agreement, and

(B) the holding by a program manager of a financial interest in an employment network or service provider which provides services in a geographic area covered under the program manager's agreement.

(4) *SELECTION OF EMPLOYMENT NETWORKS.*—The Commissioner shall select and enter into agreements with employment networks for service under the Program. Such employment networks shall be in addition to State agencies serving as employment networks pursuant to elections under subsection (c).

(5) *TERMINATION OF AGREEMENTS WITH EMPLOYMENT NETWORKS.*—The Commissioner shall terminate agreements with employment networks for inadequate performance, as determined by the Commissioner.

(6) *QUALITY ASSURANCE.*—The Commissioner shall provide for such periodic reviews as are necessary to provide for effective quality assurance in the provision of services by employment networks. The Commissioner shall take into account the views of consumers and the program manager under which the employment networks serve and shall consult with providers of services to develop performance measurements. The Commissioner shall ensure that the results of the periodic reviews are made available to beneficiaries who are prospective service recipients as they select employment networks. The Commissioner shall ensure the performance of periodic surveys of beneficiaries receiving services under the Program designed to measure customer service satisfaction.

(7) *DISPUTE RESOLUTION.*—The Commissioner shall provide for a mechanism for resolving disputes between beneficiaries and employment networks and between program managers and employment networks. The Commissioner shall afford a party to such a dispute a reasonable opportunity for a full and fair review of the matter in dispute.

(e) *PROGRAM MANAGERS.*—

(1) *IN GENERAL.*—A program manager shall conduct tasks appropriate to assist the Commissioner in carrying out the Commissioner's duties in administering the Program.

(2) *RECRUITMENT OF EMPLOYMENT NETWORKS.*—A program manager shall recruit, and recommend for selection by the Commissioner, employment networks for service under the Program. The program manager shall carry out such recruitment and provide such recommendations, and shall monitor all employment networks serving in the Program in the geographic area covered under the program manager's agreement, to the extent necessary and appropriate to ensure that adequate choices of services are made available to beneficiaries. Employment networks may serve under the Program only pursuant to an agreement entered into with the Commissioner under the Program incorporating the applicable provisions of this section and regulations thereunder, and the program manager shall provide and maintain assurances to the Commissioner that payment by the Commissioner to employment networks pursuant to this sec-

tion is warranted based on compliance by such employment networks with the terms of such agreement and this section. The program manager shall not impose numerical limits on the number of employment networks to be recommended pursuant to this paragraph.

(3) *FACILITATION OF ACCESS BY BENEFICIARIES TO EMPLOYMENT NETWORKS.*—A program manager shall facilitate access by beneficiaries to employment networks. The program manager shall ensure that each beneficiary is allowed changes in employment networks for good cause, as determined by the Commissioner, without being deemed to have rejected services under the Program. The program manager shall establish and maintain lists of employment networks available to beneficiaries and shall make such lists generally available to the public. The program manager shall ensure that all information provided to disabled beneficiaries pursuant to this paragraph is provided in accessible format.

(4) *ENSURING AVAILABILITY OF ADEQUATE SERVICES.*—The program manager shall ensure that employment services, vocational rehabilitation services, and other support services are provided to beneficiaries throughout the geographic area covered under the program manager's agreement, including rural areas.

(5) *REASONABLE ACCESS TO SERVICES.*—The program manager shall take such measures as are necessary to ensure that sufficient employment networks are available and that each beneficiary receiving services under the Program has reasonable access to employment services, vocational rehabilitation services, and other support services. Such services may include case management, benefits counseling, supported employment, career planning, career plan development, vocational assessment, job training, placement, follow-up services, and such other services as may be specified by the Commissioner under the Program. The program manager shall ensure that such services are coordinated.

(f) *EMPLOYMENT NETWORKS.*—

(1) *QUALIFICATIONS FOR EMPLOYMENT NETWORKS.*—Each employment network serving under the Program shall consist of an agency or instrumentality of a State (or a political subdivision thereof) or a private entity, which assumes responsibility for the coordination and delivery of services under the Program to individuals assigning to the employment network tickets to work and self-sufficiency issued under subsection (b). No employment network may serve under the Program unless it demonstrates to the Commissioner substantial expertise and experience in the field of employment services, vocational rehabilitation services, or other support services for individuals with disabilities and provides an array of such services. An employment network shall consist of either a single provider of such services or of an association of such providers organized so as to combine their resources into a single entity. An employment network may meet the requirements of subsection (e)(4) by providing services directly, or by entering into agreements with other indi-

viduals or entities providing appropriate employment services, vocational rehabilitation services, or other support services.

(2) *REQUIREMENTS RELATING TO PROVISION OF SERVICES.*—Each employment network serving under the Program shall be required under the terms of its agreement with the Commissioner to—

(A) serve prescribed service areas,

(B) meet, and maintain compliance with, both general selection criteria (such as professional and governmental certification and educational credentials) and specific selection criteria (such as the extent of work experience by the provider with specific populations), and

(C) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans meeting the requirements of subsection (g).

(3) *ANNUAL FINANCIAL REPORTING.*—Each employment network shall meet financial reporting requirements as prescribed by the Commissioner.

(4) *PERIODIC OUTCOMES REPORTING.*—Each employment network shall prepare periodic reports, on at least an annual basis, itemizing for the covered period specific outcomes achieved with respect to specific services provided by the employment network. Such reports shall conform to a national model prescribed under this section. Each employment network shall provide a copy of the latest report issued by the employment network pursuant to this paragraph to each beneficiary upon enrollment under the Program for services to be received through such employment network. Upon issuance of each report to each beneficiary, a copy of the report shall be maintained in the files of the employment network pertaining to the beneficiary. The program manager shall ensure that copies of all such reports issued under this paragraph are made available to the public under reasonable terms.

(g) *INDIVIDUAL WORK PLANS.*—

(1) *IN GENERAL.*—Each employment network shall—

(A) take such measures as are necessary to ensure that employment services, vocational rehabilitation services, and other support services provided under the Program by, or under agreements entered into with, the employment network are provided under appropriate individual work plans as defined by the Commissioner, and

(B) develop and implement each such individual work plan, in the case of each beneficiary receiving such services, in a manner that affords such beneficiary the opportunity to exercise informed choice in selecting an employment goal and specific services needed to achieve that employment goal.

A beneficiary's individual work plan shall take effect upon approval by the beneficiary.

(2) *VOCATIONAL EVALUATION.*—In devising the work plan, the employment network shall undertake a vocational evaluation

with respect to the beneficiary. Each vocational evaluation shall set forth in writing such elements and shall be in such format as the Commissioner shall prescribe. The Commissioner may provide for waiver by the beneficiary of such a vocational evaluation, subject to regulations which shall be prescribed by the Commissioner providing for the permissible timing of, and the circumstances permitting, such a waiver.

(h) EMPLOYMENT NETWORK PAYMENT SYSTEMS.—

(1) ELECTION OF PAYMENT SYSTEM BY EMPLOYMENT NETWORKS.—

(A) IN GENERAL.—The Program shall provide for payment authorized by the Commissioner to employment networks under either an outcome payment system or an outcome-milestone payment system. Each employment network shall elect which payment system will be utilized by the employment network, and, for such period of time as such election remains in effect, the payment system so elected shall be utilized exclusively in connection with such employment network (except as provided in subparagraph (B)).

(B) METHOD OF PAYMENT TO EMPLOYMENT NETWORKS.—Any such election by an employment network taking effect during any period for which a disabled beneficiary is receiving services from such employment network shall not be effective with respect to such beneficiary to the extent that such election would result in any change in the method of payment to the employment network with respect to services provided to such beneficiary from the method of payment to the employment network with respect to services provided to such beneficiary as of immediately before such election.

(2) OUTCOME PAYMENT SYSTEM.—

(A) IN GENERAL.—The outcome payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

(B) PAYMENTS MADE DURING OUTCOME PAYMENT PERIOD.—The outcome payment system shall provide for a schedule of payments to an employment network, in connection with each individual who is a beneficiary, for each month, during the individual's outcome payment period, for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable to such individual.

(C) COMPUTATION OF PAYMENTS TO EMPLOYMENT NETWORK.—The payment schedule of the outcome payment system shall be designed so that—

(i) the payment for each of the 60 months during the outcome payment period for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable is equal to a fixed percentage of the payment calculation base for the calendar year in which such month occurs, and

(ii) such fixed percentage is set at a percentage which does not exceed 40 percent.

(3) OUTCOME-MILESTONE PAYMENT SYSTEM.—

(A) *IN GENERAL.*—The outcome-milestone payment system shall consist of a payment structure governing employment networks electing such system under paragraph (1)(A) which meets the requirements of this paragraph.

(B) *EARLY PAYMENTS UPON ATTAINMENT OF MILESTONES IN ADVANCE OF OUTCOME PAYMENT PERIODS.*—The outcome-milestone payment system shall provide for one or more milestones, with respect to beneficiaries receiving services from an employment network under the Program, which are directed toward the goal of permanent employment. Such milestones shall form a part of a payment structure which provides, in addition to payments made during outcome payment periods, payments made prior to outcome payment periods in amounts based on the attainment of such milestones.

(C) *LIMITATION ON TOTAL PAYMENTS TO EMPLOYMENT NETWORK.*—The payment schedule of the outcome milestone payment system shall be designed so that the total of the payments to the employment network with respect to each beneficiary is less than, on a net present value basis (using an interest rate determined by the Commissioner that appropriately reflects the cost of funds faced by providers), the total amount to which payments to the employment network with respect to the beneficiary would be limited if the employment network were paid under the outcome payment system.

(4) *DEFINITIONS.*—For purposes of this subsection—

(A) *PAYMENT CALCULATION BASE.*—The term “payment calculation base” means, for any calendar year—

(i) in connection with a title II disability beneficiary, the average disability insurance benefit payable under section 223 for all beneficiaries for months during the preceding calendar year, and

(ii) in connection with a title XVI disability beneficiary (who is not concurrently a title II disability beneficiary), the average payment of supplemental security income benefits based on disability payable under title XVI (excluding State supplementation) for months during the preceding calendar year to all beneficiaries who have attained at least 18 years of age.

(B) *OUTCOME PAYMENT PERIOD.*—The term “outcome payment period” means, in connection with any individual who had assigned a ticket to work and self-sufficiency to an employment network under the Program, a period—

(i) beginning with the first month, ending after the date on which such ticket was assigned to the employment network, for which benefits (described in paragraphs (2) and (3) of subsection (k)) are not payable to such individual by reason of engagement in work activity, and

(ii) ending with the 60th month (consecutive or otherwise), ending after such date, for which such benefits are not payable to such individual by reason of engagement in work activity.

(5) PERIODIC REVIEW AND ALTERATIONS OF PRESCRIBED SCHEDULES.—

(A) PERCENTAGES AND PERIODS.—*The Commissioner of Social Security shall periodically review the percentage specified in paragraph (2)(C), the total payments permissible under paragraph (3)(C), and the period of time specified in paragraph (4)(B) to determine whether such percentages, such permissible payments, and such period provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, while providing for appropriate economies. The Commissioner may alter such percentage, such total permissible payments, or such period of time to the extent that the Commissioner determines, on the basis of the Commissioner's review under this paragraph, that such an alteration would better provide the incentive and economies described in the preceding sentence.*

(B) NUMBER AND AMOUNT OF MILESTONE PAYMENTS.—*The Commissioner shall periodically review the number and amounts of milestone payments established by the Commissioner pursuant to this section to determine whether they provide an adequate incentive for employment networks to assist beneficiaries to enter the workforce, taking into account information provided to the Commissioner by program managers, the Ticket to Work and Self-Sufficiency Advisory Panel, and other reliable sources. The Commissioner may from time to time alter the number and amounts of milestone payments initially established by the Commissioner pursuant to this section to the extent that the Commissioner determines that such an alteration would allow an adequate incentive for employment networks to assist beneficiaries to enter the workforce. Such alteration shall be based on information provided to the Commissioner by program managers, the Ticket to Work and Self-Sufficiency Advisory Panel, or other reliable sources.*

(i) SUSPENSION OF DISABILITY REVIEWS.—*During any period for which an individual is using a ticket to work and self-sufficiency issued under this section, the Commissioner (and any applicable State agency) may not initiate a continuing disability review or other review under section 221 of whether the individual is or is not under a disability or a review under title XVI similar to any such review under section 221.*

(j) AUTHORIZATIONS.—

(1) TITLE II DISABILITY BENEFICIARIES.—*There are authorized to be transferred from the Federal Old-Age and Survivors Insurance Trust Fund and the Federal Disability Insurance Trust Fund each fiscal year such sums as may be necessary to carry out the provisions of this section with respect to title II disability beneficiaries. Money paid from the Trust Funds under this section with respect to title II disability beneficiaries who are entitled to benefits under section 223 or who are entitled to benefits under section 202(d) on the basis of the wages and self-employment income of such beneficiaries, shall be charged to the Federal Disability Insurance Trust Fund, and all other money paid from the Trust Funds under this section shall be charged*

to the Federal Old-Age and Survivors Insurance Trust Fund. The Commissioner of Social Security shall determine according to such methods and procedures as shall be prescribed under this section—

(A) the total amount to be paid to program managers and employment networks under this section, and

(B) subject to the provisions of the preceding sentence, the amount which should be charged to each of the Trust Funds.

(2) *TITLE XVI DISABILITY BENEFICIARIES.*—Amounts authorized to be appropriated to the Social Security Administration under section 1601 (as in effect pursuant to the amendments made by section 301 of the Social Security Amendments of 1972) shall include amounts necessary to carry out the provisions of this section with respect to title XVI disability beneficiaries.

(k) *DEFINITIONS.*—For purposes of this section—

(1) *DISABLED BENEFICIARY.*—The term “disabled beneficiary” means a title II disability beneficiary or a title XVI disability beneficiary.

(2) *TITLE II DISABILITY BENEFICIARY.*—The term “title II disability beneficiary” means an individual entitled to disability insurance benefits under section 223 or to monthly insurance benefits under section 202 based on such individual’s disability (as defined in section 223(d)). An individual is a title II disability beneficiary for each month for which such individual is entitled to such benefits.

(3) *TITLE XVI DISABILITY BENEFICIARY.*—The term “title XVI disability beneficiary” means an individual eligible for supplemental security income benefits under title XVI on the basis of blindness (within the meaning of section 1614(a)(2)) or disability (within the meaning of section 1614(a)(3)). An individual is a title XVI disability beneficiary for each month for which such individual is eligible for such benefits.

(4) *SUPPLEMENTAL SECURITY INCOME BENEFIT.*—The term “supplemental security income benefit under title XVI” means a cash benefit under section 1611 or 1619(a), and does not include a State supplementary payment, administered federally or otherwise.

(l) *REGULATIONS.*—The Commissioner of Social Security shall prescribe such regulations as are necessary to carry out the provisions of this section.

* * * * *

TITLE XVI—SUPPLEMENTAL SECURITY INCOME FOR THE AGED, BLIND, AND DISABLED

* * * * *

PART A—DETERMINATION OF BENEFITS
ELIGIBILITY FOR AND AMOUNT OF BENEFITS

Definition of Eligible Individual

SEC. 1611. (a) * * *

* * * * *

(e)(1)(A) Except as provided in subparagraphs (B), (C), (D), (E), and (G), no person shall be an eligible individual or eligible spouse for purposes of this title with respect to any month if throughout such month he is an inmate of a public institution.

* * * * *

(I)(i) The Commissioner shall enter into an agreement, with any interested State or local [institution described in clause (i) or (ii) of section 202(x)(1)(A) the primary purpose of which is to confine individuals as described in section 202(x)(1)(A),] *institution comprising a jail, prison, penal institution, or correctional facility, or with any other interested State or local institution a purpose of which is to confine individuals as described in section 202(x)(1)(A)(ii)*, under which—

(I) the institution shall provide to the Commissioner, on a monthly basis and in a manner specified by the Commissioner, the names, social security account numbers, dates of birth, confinement commencement dates, and, to the extent available to the institution, such other identifying information concerning the inmates of the institution as the Commissioner may require for the purpose of carrying out this paragraph; and

(II) the Commissioner shall pay to any such institution, with respect to each individual who receives in the month preceding the first month throughout which such individual is an inmate of the jail, prison, penal institution, or correctional facility that furnishes information respecting such individual pursuant to subclause (I), or is confined in the institution (that so furnishes such information) as described in section 202(x)(1)(A)(ii), a benefit under this title for such preceding month, and who is determined by the Commissioner to be ineligible for benefits under this title by reason of confinement based on the information provided by such institution, \$400 (*subject to reduction under clause (ii)*) if the institution furnishes the information described in subclause (I) to the Commissioner within 30 days after the date such individual becomes an inmate of such institution, or \$200 (*subject to reduction under clause (ii)*) if the institution furnishes such information after 30 days after such date but within 90 days after such date.

(ii) *The dollar amounts specified in clause (i)(II) shall be reduced by 50 percent if the Commissioner is also required to make a payment to the institution with respect to the same individual under an agreement entered into under section 202(x)(3)(B).*

[(ii)] (iii)(I) The provisions of section 552a of title 5, United States Code, shall not apply to any agreement entered into under clause (i) or to information exchanged pursuant to such agreement.

(II) The Commissioner is authorized to provide, on a reimbursable basis, information obtained pursuant to agreements entered into under clause (i) to any Federal or federally-assisted cash, food, or medical assistance program for eligibility purposes.

[(iii)] (iv) Payments to institutions required by clause (i)(II) shall be made from funds otherwise available for the payment of benefits under this title and shall be treated as direct spending for purposes of the Balanced Budget and Emergency Deficit Control Act of 1985.

* * * * *

REHABILITATION SERVICES FOR BLIND AND DISABLED INDIVIDUALS

[SEC. 1615. (a) In the case of any blind or disabled individual who—

[(1) has not attained age 65, and

[(2) is receiving benefits (or with respect to whom benefits are paid) under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State plan for vocational rehabilitation services approved under title I of the Rehabilitation Act of 1973, or, in the case of any such individual who has not attained age 16, to the State agency administering the State program under title V, and (except for individuals who have not attained age 16 and except in such other cases as the Commissioner may determine) for a review not less often than quarterly of such individual's blindness or disability and his need for and utilization of the services made available to him under such plan.]

SEC. 1615. (a) In the case of any blind or disabled individual who—

(1) has not attained age 16, and

(2) with respect to whom benefits are paid under this title,

the Commissioner of Social Security shall make provision for referral of such individual to the appropriate State agency administering the State program under title V.

* * * * *

[(c) Every individual age 16 or over with respect to whom the Commissioner of Social Security is required to make provision for referral under subsection (a) shall accept such services as are made available to him under the State plan for vocational and rehabilitation services approved under title I of the Rehabilitation Act of 1973; and no such individual shall be an eligible individual or eligible spouse for purposes of this title if he refuses without good cause to accept services for which the Commissioner is referred under subsection (a).]

* * * * *

PART B—PROCEDURAL AND GENERAL PROVISIONS

PAYMENTS AND PROCEDURES

Payment of Benefits

SEC. 1631. (a)(1) * * *

* * * * *

(6) Notwithstanding any other provision of this title, payment of the benefit of any individual who is an aged, blind, or disabled individual solely by reason of blindness (as determined under section 1614(a)(2)) or disability (as determined under section 1614(a)(3)) shall not be terminated or suspended because the blindness or other physical or mental impairment, on which the individual's eligibility for such benefit is based, has or may have ceased, if—

(A) such individual is participating in [a program of vocational rehabilitation services] *a program consisting of the Ticket to Work and Self-Sufficiency Program under section 1147 or another program of vocational rehabilitation services, employment services, or other support services approved by the Commissioner of Social Security, and,*

* * * * *

ADMINISTRATION

SEC. 1633. (a) * * *

* * * * *

(c)(1) In any case in which the Commissioner of Social Security initiates a review under this title, similar to the continuing disability reviews authorized for purposes of title II under section 221(i), the Commissioner of Social Security shall notify the individual whose case is to be reviewed in the same manner as required under section 221(i)(4).

(2) *For suspension of continuing disability reviews and other reviews under this title similar to reviews under section 221 in the case of an individual using a ticket to work and self-sufficiency, see section 1147(i).*

* * * * *

**SECTION 105 OF THE CONTRACT WITH AMERICA
ADVANCEMENT ACT OF 1996**

SEC. 105. DENIAL OF DISABILITY BENEFITS TO DRUG ADDICTS AND ALCOHOLICS.

(a) AMENDMENTS RELATING TO TITLE II DISABILITY BENEFITS.—

(1) * * *

* * * * *

(5) EFFECTIVE DATES.—

(A) The amendments made by paragraphs (1) and (4) shall apply to any individual who applies for, or whose claim is finally adjudicated [by the Commissioner of Social Security] with respect to, benefits under title II of the Social Security Act based on disability on or after the date

of the enactment of this Act, and, in the case of any individual who has applied for, and whose claim has been finally adjudicated [by the Commissioner] with respect to, such benefits before such date of enactment, such amendments shall apply only with respect to such benefits for months beginning on or after January 1, 1997.

[(B) The amendments made by paragraphs (2) and (3) shall apply with respect to benefits for which applications are filed after the third month following the month in which this Act is enacted.]

(B) The amendments made by paragraphs (2) and (3) shall take effect on July 1, 1996, with respect to any individual—

(i) whose claim for benefits is finally adjudicated on or after the date of the enactment of this Act, or

(ii) whose entitlement to benefits is based upon an entitlement redetermination made pursuant to subparagraph (C).

* * * * *

(D) For purposes of this paragraph, an individual's claim, with respect to benefits under title II of the Social Security Act based on disability, which has been denied in whole before the date of the enactment of this Act, may not be considered to be finally adjudicated before such date if, on or after such date—

(i) there is pending a request for either administrative or judicial review with respect to such claim, or

(ii) there is pending, with respect to such claim, a readjudication by the Commissioner of Social Security pursuant to relief in a class action or implementation by the Commissioner of a court remand order.

(E) Notwithstanding the provisions of this paragraph, with respect to any individual for whom the Commissioner of Social Security does not perform the entitlement redetermination before the date prescribed in subparagraph (C), the Commissioner shall perform such entitlement redetermination in lieu of a continuing disability review whenever the Commissioner determines that the individual's entitlement is subject to redetermination based on the preceding provisions of this paragraph, and the provisions of section 223(f) of the Social Security Act shall not apply to such redetermination.

* * * * *

SECTION 505 OF THE SOCIAL SECURITY DISABILITY AMENDMENTS OF 1980

AUTHORITY FOR DEMONSTRATION PROJECTS

SEC. 505. (a)(1) The Commissioner of Social Security shall develop and carry out experiments and demonstration projects designed to determine the relative advantages and disadvantages of (A) various alternative methods of treating the work activity of dis-

abled beneficiaries under the old-age, survivors, and disability insurance program, including such methods as a reduction in benefits based on earnings, designed to encourage the return to work of disabled beneficiaries and (B) altering other limitations and conditions applicable to such disabled beneficiaries (including, but not limited to, lengthening the trial work period, altering the 24-month waiting period for medicare benefits, altering the manner in which such program is administered, earlier referral of beneficiaries for rehabilitation, and greater use of employers and others to develop, perform, and otherwise stimulate new forms of rehabilitation), to the end that savings will accrue to the Trust Funds, or to otherwise promote the objectives or facilitate the administration of title II of the Social Security Act. *The Commissioner may expand the scope of any such demonstration project to include any group of applicants for benefits under such program with impairments which may reasonably be presumed to be disabling for purposes of such demonstration project, and may limit any such demonstration project to any such group of applicants, subject to the terms of such demonstration project which shall define the extent of any such presumption.*

* * * * *

(3) In the case of any experiment or demonstration project under paragraph (1) which is initiated before June 10, [1996] 2001, the Commissioner may waive compliance with the benefit requirements of title II of the Social Security Act, and the Secretary of Health and Human Services may (upon the request of the Commissioner) waive compliance with the benefits requirements of title XVIII of such Act, insofar as is necessary for a thorough evaluation of the alternative methods under consideration. No such experiment or project shall be actually placed in operation unless at least ninety days prior thereto a written report, prepared for purposes of notification and information only and containing a full and complete description thereof, has been transmitted by the Commissioner to the Committee on Ways and Means of the House of Representatives and to the Committee on Finance of the Senate. Periodic reports on the progress of such experiments and demonstration projects shall be submitted by the Commissioner to such committees. When appropriate, such reports shall include detailed recommendations for changes in administration or law, or both, to carry out the objectives stated in paragraph (1).

(4) On or before June 9 in 1986 and each of the succeeding years through 1995, *and on or before October 1, 2000*, the Commissioner shall submit to the Congress an interim report on the progress of the experiments and demonstration projects carried out under this subsection together with any related data and materials which the Commissioner may consider appropriate.

* * * * *

(c) The Secretary shall submit to the Congress a final report with respect to all experiments and demonstration projects carried out under this section (other than demonstration projects conducted

under section 5120 of the Omnibus Budget Reconciliation of 1990)
no later than October 1, ~~1996~~ 2001.

* * * * *

○

House Calendar No. 198

105TH CONGRESS
2^D SESSION

H. RES. 450

[Report No. 105-553]

Providing for consideration of the bill (H.R. 3433) to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses.

IN THE HOUSE OF REPRESENTATIVES

MAY 22, 1998

Mrs. MYRICK, from the Committee on Rules, reported the following resolution; which was referred to the House Calendar and ordered to be printed

RESOLUTION

Providing for consideration of the bill (H.R. 3433) to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses.

1 *Resolved*, That upon the adoption of this resolution
2 it shall be in order without intervention of any point of
3 order to consider in the House the bill (H.R. 3433) to
4 amend the Social Security Act to establish a Ticket to
5 Work and Self-Sufficiency Program in the Social Security
6 Administration to provide beneficiaries with disabilities
7 meaningful opportunities to return to work and to extend
8 Medicare coverage for such beneficiaries, and to amend
9 the Internal Revenue Code of 1986 to provide a tax credit
10 for impairment-related work expenses. The bill shall be
11 considered as read for amendment. The amendment rec-
12 ommended by the Committee on Ways and Means now
13 printed in the bill shall be considered as adopted, modified
14 by the amendment printed in the report of the Committee
15 on Rules accompanying this resolution. The previous ques-
16 tion shall be considered as ordered on the bill, as amended,
17 and on any further amendment thereto to final passage
18 without intervening motion except: (1) one hour of debate
19 on the bill, as amended, equally divided and controlled by
20 the chairman and ranking minority member of the Com-
21 mittee on Ways and Means; (2) a further amendment
22 printed in the Congressional Record pursuant to clause
23 6 of rule XXIII, if offered by Representative Rangel of
24 New York or his designee, which shall be considered as
25 read and shall be separately debatable for one hour equally

- 1 divided and controlled by the proponent and an opponent;
- 2 and (3) one motion to recommit with or without instruc-
- 3 tions.

House Calendar No. 198

105TH CONGRESS
2^D SESSION

H. RES. 450

[Report No. 105-553]

RESOLUTION

Providing for consideration of the bill (H.R. 3433) to amend the Social Security Act to establish a Ticket to Work and Self-Sufficiency Program in the Social Security Administration to provide beneficiaries with disabilities meaningful opportunities to return to work and to extend Medicare coverage for such beneficiaries, and to amend the Internal Revenue Code of 1986 to provide a tax credit for impairment-related work expenses.

MAY 22, 1998

Referred to the House Calendar and ordered to be printed

LEGISLATIVE

Bulletin

106-4

April 16, 1999

Senate Finance Committee Reports S. 331, the Work Incentives Improvements Act of 1999

On March 26, 1999, the Senate Committee on Finance amended and favorably reported S. 331, the Work Incentives Improvements Act of 1999, to the full Senate. This bill addresses barriers to work for individuals with disabilities. It would: expand the availability of health care coverage for working individuals with disabilities; establish a Ticket to Work and Self-Sufficiency Program; and provide such individuals with meaningful opportunities to work.

The bill contains the following provisions:

Expanded Availability of Health Care Services

State Options under Medicaid

- Would expand the States options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) due to medical improvement.
- Would be applicable with respect to medical assistance for items and services furnished on or after October 1, 1999.

Continuation of Medicare Coverage

- Would extend premium-free Medicare coverage for people with disabilities who return to work during a 10-year period beginning with the first month that begins after enactment. Further, it would extend coverage for subsequent months if they are entitled to health care benefits as of the last month of the 10-year period.

- It also would require GAO to examine the effectiveness and cost of providing such premium-free Medicare coverage and to recommend whether such coverage should be continued after the 10-year period.
- Would be applicable for months beginning with the first month that begins after the date of enactment.

Responsibilities of the Secretary of Health and Human Services

- Would direct the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits.
- Would be effective upon enactment.

Ticket to Work and Self-Sufficiency Program

General

- Would direct the Commissioner to establish a Ticket to Work and Self-Sufficiency Program (Program) which would provide SSDI beneficiaries and SSI disability recipients with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, or other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Would select and enter into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Would terminate agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Would preclude program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program manager's agreement.

- Would select, and enter into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.
- Would terminate agreements with employment networks whose performance is inadequate.
- Would provide for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Would provide for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Would perform such tasks as assigned by the Commissioner.
- Would recruit, and recommend for selection by the Commissioner, employment networks which can provide services under the Program.
- Would monitor employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Would ensure that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Would ensure beneficiaries are allowed changes in employment networks for good cause without being deemed to have rejected services under the Program.

Employment Network(s)

- Would assume responsibility for coordination and delivery of services under the Program to an individual assigning his/her ticket to work and self-sufficiency to an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Would provide services either directly or by entering into agreements with other providers which can furnish appropriate services.
- Would serve prescribed service areas and take measures to ensure that services provided under the Program meet the requirements of individual work plans.
- Would meet the financial reporting requirements prescribed by Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.
- Would develop and implement an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon written approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Would authorize the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network would be paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system would combine outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of

outcome-milestone payments must be than the total amount of payments if the employment network were paid under the outcome payment system.

- Would require the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.
- Would allow the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.

State Agency Participation

- Would permit a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program would provide services under plans approved under title I of the Rehabilitation Act of 1973.
- Would require a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Would direct the Commissioner and the Secretary of Education jointly to prescribe regulations specifying the terms of such agreements.
 - Would prohibit payment to an employment network if the employment network makes referrals to the State VR agency without entering into a written agreement with such State VR agency or in violation of the terms of the written agreement.
- Would require the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Would prohibit the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Would require payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance Trust Funds (OASDI) in the case of title II disability beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses must be allocated as appropriate from amounts made available for the administration of title II and title XVI.

Regulations

- Would direct the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.
- Would be effective with the first month following 1 year after enactment.

Reauthorization of Program

- Would terminate the Program 5 years after the date the Commissioner begins implementation of the ticket program.
- Would provide that individuals who initiated an individual work plan prior to such termination may receive services under the Program after this date.
- Employment networks would be paid during the outcome payment period of such individuals.

Scope of Program Implementation

- Would direct the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Would require the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Would require the Commissioner to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self sufficiency under the Program.
- Would require the Commissioner to design and conduct a series of evaluations after consultation with work incentive experts, the Advisory Panel, GAO, other Federal agencies and private organizations with appropriate expertise.

Reports

- Would require the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports would be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives Advisory Panel

- Would establish a Work Incentives Advisory Panel within the Social Security Administration. The Panel would be composed of 12 members appointed by the Commissioner in consultation with the Speaker and the Minority Leader of the House of Representatives and the Majority and Minority Leader of the Senate; at least 7 members should be individuals with disabilities or representatives of individuals with disability, and at least 5 of those 7 members should be current or former title II or title XVI disability beneficiaries.
- Would require that members be appointed not later than 90 days after enactment.
- Duties would include:
 - Advising the Secretary of HHS, the Secretary of Labor, the Secretary of Education, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self-Sufficiency on the following:
 - phase-in sites for implementation of the Program;

- access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability insurance benefits based on earnings;
 - development of performance measures for the employment networks; and
 - furnishing progress reports on the Program to the Commissioner and Congress.
- Would require the Panel to submit interim reports at least annually and a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.
 - Would terminate the Panel 30 days after the date it submits its final report.
 - The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

Elimination of Work Disincentives

Work Activity Standard as a Basis for Review

- Would prohibit the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 or monthly insurance benefits under section 202 based on disability and have received such benefits for at least 24 months.
- Would allow for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Would be effective upon enactment.

Expedited Reinstatement

- Would provide that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Would require that such individuals must have been unable to continue working on account of their medical condition and file a reinstatement request during the 60-month period following the month of termination.
- Would require that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals will be eligible for the payment of provisional benefits for a period of not more than 6 months.
- Would require that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Would be effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentive Outreach Program

- Would direct the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner would be directed to:
 - establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and
 - establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information to disabled beneficiaries.

- Would direct the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
- Would provide that the costs must be paid from amounts made available for the administration for title II and title XVI, and shall be allocated from those amounts as appropriate.
- Would be effective upon enactment.

Protection and Advocacy

- Would authorize the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment would be required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Would provide that protection and advocacy systems be paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year.
- Would provide that payments must be made from amounts made available for the administration for title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Would provide that payments may not exceed \$7 million for fiscal year 2000, and such sums as may be necessary for any fiscal year thereafter.
- Would be effective upon enactment.

Demonstration Projects and Studies

Permanent Disability Insurance Program Demonstration Project Authority

- Would: (1) permanently authorize section 505 of the Social Security Amendments of 1980 (Authority for Demonstration Projects), (2) direct the Commissioner to conduct demonstration related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income, and (3) permit presumptively eligible applicants to participate in demonstration projects.
- Would direct the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Would be effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Would direct the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Would provide that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the effect, if any, on a project being conducted in a locality under the administration of the Ticket to Work and Self-Sufficiency Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Would require the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, the employment outcomes, the merits of trial work periods and periods of extended eligibility for each project.
- Would authorize the Commissioner to waive compliance with the title II benefit provisions and the Secretary of Health and Human Services to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration.

- Would require the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, would require the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 after their completion.

Funding

- Would provide that expenditures made for the demonstration projects must be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Would be effective upon enactment.

Reports and Studies

- Would require the General Accounting Office (GAO) to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A written report would be due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report would be due not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A written report would be due not later than 2 years after the date of enactment of this Act.
- Would direct the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income disregards applicable to beneficiaries under SSDI and SSI programs. The report should

specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.

- Would be effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Would amend the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Would expand the applicability of the provisions in P.L. 104-121 which authorize the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.
- Would be effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Would extend the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would eliminate the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year--like SSI, benefits would be suspended for any month throughout which the person was confined because of a crime or finding of not guilty by reason of insanity.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.

- Would provide that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of the payment.
- Would be effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Would prohibit the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Would be effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Would create a 2-year window of opportunity to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption.
- The application for revocation would have to be filed before the due date for the income tax return for the applicants second taxable year beginning after 12/31/99. The revocation would be effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Would clarify the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Would be effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- Would authorize States to permit employers to submit wage reports of domestic workers on an annual basis.
- Would be applicable to wage reports required to be submitted on or after the date of enactment.

Miscellaneous

- The bill also contains several provisions related to the Internal Revenue Code of 1986.

LEGISLATIVE

Bulletin

106-7

May 28, 1999

House Committee on Commerce Approves H.R. 1180, the Work Incentives Improvement Act of 1999

On May 19, 1999, the House Committee on Commerce favorably reported, by voice vote, H.R.1180, as previously amended by the Subcommittee on Health and Environment.

H.R. 1180 is similar to Senate bill, S. 331 ("Work Incentives Improvement Act of 1999"), which has been reported by the Senate Committee on Finance and is awaiting action by the full Senate (see Legislative Bulletin 106-4). However, S.331 does not include the amendments in the Commerce Committee reported bill. These bills address barriers to work for individuals with disabilities. They would: expand the availability of health care coverage for working individuals with disabilities; establish a Ticket to Work and Self-Sufficiency Program; and provide such individuals with meaningful opportunities to work.

H.R. 1180, as reported by the House Committee on Commerce, is still subject to change because the House Committee on Ways and Means has not yet considered the bill.

The bill contains the following provisions:

Expanded Availability of Health Care Services

State Options under Medicaid

- Would expand, for individuals who are at least 16, but less than 65, years of age, the States options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) due to medical improvement.

- Would be applicable with respect to medical assistance for items and services furnished on or after October 1, 1999.

Continuation of Medicare Coverage

- Would extend premium-free Medicare coverage for people with disabilities who return to work during a 10-year period beginning with the first month that begins after enactment. Further, it would extend coverage for subsequent months if they are entitled to health care benefits as of the last month of the 10-year period. It also would require GAO to examine the effectiveness and cost of providing such premium-free Medicare coverage and to recommend whether such coverage should be continued after the 10-year period.
- Would be applicable for months beginning with the first month that begins after the date of enactment.

Responsibilities of the Secretary of Health and Human Services

- Would direct the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits.
- Would be effective upon enactment.

Election by Disabled Beneficiaries to Suspend Medigap Insurance

- Would allow workers with disabilities who have Medicare coverage and a Medigap policy to suspend the premiums and benefits of the Medigap policy if they have employer-sponsored coverage.

- Would be applicable with respect to requests made after the date of enactment.

Ticket to Work and Self-Sufficiency Program

General

- Would direct the Commissioner to establish a Ticket to Work and Self-Sufficiency Program (Program) which would provide SSDI beneficiaries and SSI disability recipients with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, or other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Would select and enter into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Would terminate agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Would preclude program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program manager's agreement.
- Would select, and enter into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.
- Would terminate agreements with employment networks whose performance is inadequate.
- Would provide for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Would provide for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Would perform such tasks as assigned by the Commissioner.
- Would recruit, and recommend for selection by the Commissioner, employment networks which can provide services under the Program.
- Would monitor employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Would ensure that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Would ensure beneficiaries are allowed changes in employment networks for good cause without being deemed to have rejected services under the Program.

Employment Network(s)

- Would assume responsibility for coordination and delivery of services under the program to an individual assigning his/her ticket to work and self-sufficiency an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Would provide services either directly or by entering into agreements with other providers which can furnish appropriate services.
- Would serve prescribed service areas and take measures to ensure that services provided under the Program meet the requirements of individual work plans.
- Would meet the financial reporting requirements prescribed by the Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.

- Would develop and implement an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Would authorize the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network would be paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system would combine outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of outcome-milestone payments must be less than the total amount of payments if the employment network were paid under the outcome payment system.
- Would require the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.
- Would allow the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.

State Agency Participation

- Would permit a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program would provide services under plans approved under title I of the Rehabilitation Act of 1973.

- Would require a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Would direct the Commissioner and the Secretary of Education jointly to prescribe regulations specifying the terms of such agreements.
 - Would prohibit payment to an employment network if the employment network makes referrals to the State VR agency without entering into a written agreement with such State VR agency or in violation of the terms of the written agreement.
- Would require the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Would prohibit the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Would require payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance Trust Funds (OASDI) in the case of title II disability beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses must be allocated as appropriate from amounts made available for the administration of title II and title XVI.

Regulations

- Would direct the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.
- Would be effective with the first month following 1 year after enactment.

Reauthorization of Program

- Would terminate the Program 5 years after the date the Commissioner begins implementation of the ticket program.
- Would provide that individuals who initiated an individual work plan prior to such termination may receive services under the Program after this date.
- Employment networks would be paid during the outcome payment period of such individuals.

Scope of Program Implementation

- Would direct the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Would require the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Would require the Commissioner to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self-sufficiency under the Program.
- Would require the Commissioner to design and conduct a series of evaluations after consultation with work incentive experts, the Advisory Panel, GAO, other Federal agencies and private organizations with appropriate expertise.

Reports

- Would require the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports would be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives Advisory Panel

- Would establish a Work Incentives Advisory Panel within the Social Security Administration. The Panel would be composed of 12 members appointed by the Commissioner in consultation with the Speaker and the Minority Leader of the House of Representatives and the Majority and Minority Leader of the Senate; at least 7 members should be individuals with disabilities or representatives of individuals with disability, and at least 5 of those 7 members should be current or former title II or title XVI disability beneficiaries. Would require that members be appointed not later than 90 days after enactment.
- Duties would include:
 - Advising the Secretary of HHS, the Secretary of Labor, the Secretary of Education, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self-Sufficiency on the following:
 - phase-in sites for implementation of the Program;
 - access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability insurance benefits based on earnings;
 - development of performance measures for the employment networks; and
 - furnishing progress reports on the Program to the Commissioner and Congress.
- Would require the Panel to submit interim reports at least annually and transmit a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.

- Would terminate the Panel 30 days after the date it submits its final report.
- The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

Elimination of Work Disincentives

Work Activity Standard as a Basis for Review

- Would prohibit the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 or monthly insurance benefits under section 202 based on disability and have received such benefits for at least 24 months.
- Would allow for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Would be effective upon enactment.

Expedited Reinstatement

- Would provide that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Would require that such individuals must have been unable to continue working on account of their medical condition and file a reinstatement request during the 60-month period following the month of termination.
- Would require that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals will be eligible for the payment of provisional benefits for a period of not more than 6 months.
- Would require that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Would be effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentive Outreach Program

- Would direct the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner would be directed to:
 - establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and
 - establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information to disabled beneficiaries.
- Would direct the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
- Would provide that the costs must be paid from amounts made available for the administration for title II and title XVI, and shall be allocated from those amounts as appropriate.
- Would be effective upon enactment.

Protection and Advocacy

- Would authorize the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment would be required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Would provide that protection and advocacy systems be paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year.
- Would provide that payments must be made from amounts made available for the administration of title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Would provide that payments may not exceed \$7 million for fiscal year 2000, and such sums as may be necessary for any fiscal year thereafter.
- Would be effective upon enactment.

Demonstration Projects and Studies

Permanent Disability Insurance Program Demonstration Project Authority

- Would: (1) permanently authorize section 505 of the Social Security Amendments of 1980 (Authority for Demonstration Projects), (2) direct the Commissioner to conduct demonstration related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income, and (3) permit presumptively eligible applicants to participate in demonstration projects.
- Would direct the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Would be effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Would direct the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Would provide that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the effect, if any, on a project being conducted in a locality under the administration of the Ticket to Work and Self-Sufficiency Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Would require the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, the employment outcomes, the merits of trial work periods and periods of extended eligibility for each project.
- Would authorize the Commissioner to waive compliance with the title II benefit provisions and the Secretary of Health and Human Services to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration.
- Would require the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, would require the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 year after their completion.

Funding

- Would provide that expenditures made for the demonstration projects must be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Would be effective upon enactment.

Reports and Studies

- Would require the General Accounting Office (GAO) to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A written report would be due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report would be due not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A written report would be due not later than 2 years after the date of enactment of this Act.
- Would direct the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income disregards applicable to beneficiaries under SSDI and SSI programs. The report should specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.
- Would be effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Would amend the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Would expand the applicability of the provisions in P.L. 104-121 which authorize the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.

- Would be effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Would extend the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would eliminate the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year--like SSI, benefits would be suspended for any month throughout which the person was confined because of a crime or finding of not guilty by reason of insanity.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would provide that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of the payment.
- Would be effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Would prohibit the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Would be effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Would create a 2-year window of opportunity to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption. The application for revocation would have to be filed before the due date for the income tax return for the applicants second taxable year beginning after

12/31/99. The revocation would be effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Would clarify the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Would be effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- For purposes of income and eligibility verification for various welfare programs, would authorize States to permit employers to submit wage reports of domestic workers on an annual basis (rather than on a quarterly basis).
- Would be applicable to wage reports required to be submitted on or after the date of enactment.

LEGISLATIVE *Bulletin*

SOCIAL SECURITY
ADMINISTRATION

106-10

July 14, 1999

Senate Passes S. 331 The Work Incentives Improvements Act of 1999

On June 16, 1999, the Senate passed S. 331, the Work Incentives Improvement Act of 1999, by a vote of 99 - 0. This bill addresses barriers to work for individuals with disabilities. It would: expand the availability of health care coverage for working individuals with disabilities; establish a Ticket to Work and Self-Sufficiency Program; and provide such individuals with meaningful opportunities to work.

The bill contains the following provisions:

Expanded Availability of Health Care Services

State Options under Medicaid

- Would expand, for individuals who are at least 16, but less than 65, years of age, the States' options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide the opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for Social Security Disability Insurance (SSDI) or Supplemental Security Income (SSI) disability benefits due to medical improvement. For purposes of the Medicaid buy-in, the States are authorized to require individuals to pay premiums, or other cost-sharing charges, set on a sliding scale based on income.
- Would be applicable with respect to medical assistance for items and services furnished on or after October 1, 1999.
- Would require the General Accounting Office (GAO) to report on these options not later than 3 years after enactment.

Continuation of Medicare Coverage

- Would extend premium-free Medicare Part A coverage for people with disabilities who return to work during the 6-year period beginning with the first month that begins after enactment. Further, it would extend coverage for subsequent months for individuals entitled to health care benefits as of the last month of the 6-year period.
- Would be applicable for months beginning with the first month that begins after the date of enactment.
- Would require GAO to examine the effectiveness and cost of providing such premium-free Medicare Part A coverage and to recommend whether such coverage should be continued after the 6-year period.

Responsibilities of the Secretary of Health and Human Services

- Would direct the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits.
- Would be effective upon enactment.

Election by Disabled Beneficiaries to Suspend Medigap Insurance

- Would allow workers with disabilities who have Medicare coverage and a Medigap policy to suspend the premiums and benefits of the Medigap policy if they have employer-sponsored coverage.
- Would be applicable with respect to requests made after the date of enactment.

Ticket to Work and Self-Sufficiency Program

General

- Would direct the Commissioner to establish a Ticket to Work and Self-Sufficiency Program (Program) which would provide SSDI beneficiaries and SSI disability recipients with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, or other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Would select and enter into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Would terminate agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Would preclude program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program manager's agreement.
- Would select, and enter into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.
- Would terminate agreements with employment networks whose performance is inadequate.
- Would provide for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Would provide for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Would perform such tasks as assigned by the Commissioner.
- Would recruit, and recommend for selection by the Commissioner, employment networks which can provide services under the Program.

- Would monitor employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Would ensure that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Would ensure beneficiaries are allowed changes in employment networks for good cause without being deemed to have rejected services under the Program.

Employment Network(s)

- Would assume responsibility for coordination and delivery of services under the Program to an individual assigning his/her ticket to work and self-sufficiency to an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Would provide services either directly or by entering into agreements with other providers which can furnish appropriate services.
- Would serve prescribed service areas and take measures to ensure that services provided under the Program meet the requirements of individual work plans.
- Would meet the financial reporting requirements prescribed by the Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.
- Would develop and implement an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon written approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Would authorize the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network would be paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system would combine outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of outcome-milestone payments must be less than the total amount of payments if the employment network were paid under the outcome payment system.
- Would require the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.
- Would allow the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.

State Agency Participation

- Would permit a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program would provide services under plans approved under title I of the Rehabilitation Act of 1973.
- Would require a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Would direct the Commissioner and the Secretary of Education jointly to prescribe regulations specifying the terms of such agreements.
 - Would prohibit payment to an employment network if the employment network makes referrals to the State VR agency without entering into a written agreement

with such State VR agency or in violation of the terms of the written agreement.

- Would require the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Would prohibit the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Would require payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance Trust Funds (OASDI) in the case of title II disability beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses must be allocated as appropriate from amounts made available for the administration of title II and title XVI.

Regulations

- Would direct the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.

Effective Date of the Program

- Would be effective with the first month following 1 year after enactment.

Scope of Program Implementation

- Would direct the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Would require the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Would require the Commissioner (after consultation with the Advisory Panel, beneficiaries using Tickets, GAO, other Federal agencies, and others with appropriate expertise) to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self sufficiency under the Program.

Reports

- Would require the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports would be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives Advisory Panel

- Would establish a Work Incentives Advisory Panel within the Social Security Administration. The Panel would be composed of 12 members--4 appointed by the President; 2 each by the Speaker and the Minority Leader of the House; and 2 each by the Majority and Minority Leaders of the Senate. At least one-half of the members should be individuals with disabilities or representatives of individuals with a disability, with consideration given to current and former Social Security and Supplemental Security Income disability beneficiaries. Would require that members be appointed not later than 90 days after enactment.
- Duties would include:
 - Advising the President, Congress, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Social Security Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self-Sufficiency Program on the following:
 - ? phase-in sites for implementation of the Program;
 - ? access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - ? the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability

insurance benefits based on earnings; and

? development of performance measures for the employment networks.

- Furnishing progress reports on the Program to the Commissioner and Congress.
- Would require the Panel to submit interim reports at least annually and transmit a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.
- Would terminate the Panel 30 days after the date it submits its final report.
- The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

Elimination of Work Disincentives

Work Activity Standard as a Basis for Review

- Would prohibit the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 of the Social Security Act (Act) or monthly insurance benefits under section 202 of the Act based on disability and have received such benefits for at least 24 months.
- Would allow for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Would be effective upon enactment.

Expedited Reinstatement of Benefits

- Would provide that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Would require that such individuals (1) are unable to continue working on account of their medical condition and (2) file a reinstatement request during the 60-month period following the month of termination.
- Would provide that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals would be eligible for the payment of provisional benefits for a period of not more than 6 months.
- Would require that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Would be effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentives Outreach Program

- Would direct the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner would be directed to:
 - establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and

- establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information to disabled beneficiaries.
- Would direct the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
- Would provide that the costs be paid from amounts made available for the administration for title II and title XVI, and that allocations be made from those amounts as appropriate.
- Would authorize \$23 million to be allocated for each of fiscal years 2000 through 2004.
- Would be effective upon enactment.

Protection and Advocacy

- Would authorize the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment would be required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Would provide that protection and advocacy systems be paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year.
- Would provide that payments be made from amounts available for the administration for title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Would authorize \$7 million to be appropriated for each of fiscal years 2000 through 2004.
- Would be effective upon enactment.

Demonstration Projects and Studies

Permanent Disability Insurance Program Demonstration Project Authority

- Would: (1) permanently authorize section 505 of the Social Security Disability Amendments of 1980 (Authority for Demonstration Projects), (2) direct the Commissioner to conduct demonstrations related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income, and (3) permit presumptively eligible applicants to participate in demonstration projects.
- Would direct the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Would be effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Would direct the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Would provide that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the extent, if any, to which the project being tested is affected by whether it is being conducted in a locality within an area under the administration of the Ticket to Work and Self-Sufficiency Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Would require the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, the employment outcomes of beneficiaries who return to work as a result of participation in the project.
- Would permit the Commissioner to evaluate the merits of the trial work period and the period of extended eligibility as part of the projects.
- Would authorize the Commissioner to waive compliance with the title II benefit provisions and the Secretary of Health and Human Services to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation

of the alternative methods under consideration.

- Would require the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, would require the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 year after their completion.

Funding

- Would provide that expenditures for the demonstration projects be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Would be effective upon enactment.

Reports and Studies

- Would require the General Accounting Office to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A report would be due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report would be due to the Congressional committees not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A report would be due to the Congressional committees not later than 2 years after the date of enactment of this Act.
- Would direct the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income

disregards applicable to beneficiaries under SSDI and SSI programs. The report should specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.

- Would be effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Would amend the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Would expand the applicability of the provisions in P.L. 104-121 which authorize the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.
- Would be effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Would extend the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would eliminate the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year--like SSI, benefits would be suspended for any month throughout which the person was confined because of a crime or finding of not guilty by reason of insanity.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would provide that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of

the payment.

- Would be effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Would prohibit the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Would be effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Would create a 2-year window of opportunity to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption.
- The application for revocation would have to be filed before the due date for the income tax return for the applicants second taxable year beginning after 12/31/99. The revocation would be effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Would clarify the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Would be effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- For purposes of income and eligibility verification for various welfare programs, would authorize States to permit employers to submit wage reports of domestic workers on an annual basis (rather than on a quarterly basis).
- Would be applicable to wage reports required to be submitted on or after the date of enactment.

LEGISLATIVE

Bulletin

106-11

November 9, 1999

On October 19, 1999, the House of Representatives passed H.R. 1180, the Ticket to Work and Work Incentives Improvement Act of 1999, by a vote of 412-9. Provisions of this bill are described below. On October 21, the Senate passed H.R. 1180 after amending it with the text of Senate-passed S. 331. Provisions of S. 331 were described in Legislative Bulletin 106-10.

Provisions of the House-passed bill are described below:

Establishment of the Ticket to Work and Self-Sufficiency Program

General

- Would direct the Commissioner to establish a Ticket to Work and Self-Sufficiency Program (Program) which would provide SSDI and SSI disability beneficiaries with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, or other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Would select and enter into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Would terminate agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Would preclude program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program manager's agreement.
- Would select, and enter into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.

OFFICE OF THE DEPUTY COMMISSIONER FOR LEGISLATION AND CONGRESSIONAL AFFAIRS

- Would terminate agreements with employment networks whose performance is inadequate.

- Would provide for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Would provide for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Would perform such tasks as assigned by the Commissioner.
- Would recruit, and recommend for selection by the Commissioner, employment networks which can provide services under the Program.
- Would monitor employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Would ensure that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Would ensure beneficiaries are allowed changes in employment networks for good cause without being deemed to have rejected services under the Program.

Employment Network(s)

- Would assume responsibility for coordination and delivery of services under the Program to an individual assigning his/her ticket to work and self-sufficiency to an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Would provide services either directly or by entering into agreements with other providers which can furnish appropriate services.
- Would serve prescribed service areas and take measures to ensure that services provided under the Program meet the requirements of individual work plans.
- Would meet the financial reporting requirements prescribed by the Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.

- Would develop and implement an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon written approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Would authorize the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network would be paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system would combine outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of outcome-milestone payments must be less than the total amount of payments if the employment network were paid under the outcome payment system.
- Would require the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.
- Would allow the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.
- Would require the Commissioner to report within 36 months of enactment on the adequacy of the payment system as an incentive for providing services to with a need for ongoing support or services, high cost accommodations, who earn a subminimum wage, or who work and receive partial benefits.

State Agency Participation

- Would permit a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program would provide services under plans approved under title I of the Rehabilitation Act of 1973.
- Would require a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Would direct the Commissioner and the Secretary of Education jointly to prescribe regulations specifying the terms of such agreements.
 - Would prohibit payment to an employment network if the employment network makes referrals to the State VR agency without entering into a written agreement with such State VR agency or in violation of the terms of the written agreement.
- Requires the Commissioner to establish in regulations a dispute resolution mechanism when the State VR agency and the employment network fail to reach an agreement on cross-referring beneficiaries.
- Would require the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Would prohibit the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Would require payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance Trust Funds (OASDI) in the case of SSDI beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses would be authorized as appropriate from amounts made available for the administration of title II and title XVI of the Social Security Act (the Act).

Regulations

- Would direct the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.

Effective Date of the Program

- Would be effective with the first month following 1 year after enactment.

Scope of Program Implementation

- Would direct the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Would require the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Would require the Commissioner (after consultation with the Advisory Panel, beneficiaries using Tickets, the General Accounting Office (GAO), other Federal agencies, and others with appropriate expertise) to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self sufficiency under the Program.

Reports

- Would require the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports would be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives

Work Incentives Advisory Panel

- Would establish a Work Incentives Advisory Panel within the Social Security Administration. The Panel would be composed of 12 members--4 appointed by the President; 2 each by the Speaker and the Minority Leader of the House; and 2 each by the Majority and Minority Leaders of the Senate. At least one-half of the members should be individuals with disabilities or representatives of individuals with a disability, with consideration given to current and

former Social Security and Supplemental Security Income disability beneficiaries. Would require that members be appointed not later than 90 days after enactment.

- Requires that 8 of 12 members represent the interests of recipients of service, providers of service, employers, and employees (two each).
- Duties would include:
 - Advising the President, Congress, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self- Sufficiency Program on the following:
 - ? phase-in sites for implementation of the Program;
 - ? access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - ? the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability insurance benefits based on earnings; and
 - ? development of performance measures for the employment networks.
 - Furnishing progress reports on the Program to the Commissioner and Congress.
- Would require the Panel to submit interim reports at least annually and transmit a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.
- Would terminate the Panel 30 days after the date it submits its final report.
- The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

Elimination of Work Disincentives

Work Activity Standard as a Basis for Review

- Would prohibit the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 of the Act or monthly insurance benefits under section 202 of the Act based on disability and have received such benefits for at least 24 months.
- Would allow for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Would be effective January 1, 2003.

Expedited Reinstatement of Benefits

- Would provide that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Would require that such individuals (1) are unable to continue working on account of their medical condition and (2) file a reinstatement request during the 60-month period following the month of termination.
- Would provide that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals would be eligible for the payment of provisional benefits for a period of not more than 6 months.
- Would require that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Would be effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentives Outreach Program

- Would direct the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner would be directed to:

- establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and
 - establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information to disabled beneficiaries.
- Would direct the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
 - Would provide that the costs be paid from amounts made available for the administration for title II and title XVI, and that allocations be made from those amounts as appropriate.
 - Would authorize \$23 million to be allocated for each of fiscal years 2000 through 2004.
 - Would be effective upon enactment.

Protection and Advocacy

- Would authorize the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment would be required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Would provide that protection and advocacy systems be paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year.
- Would provide that payments be made from amounts available for the administration for title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Would authorize \$7 million to be appropriated for each of fiscal years 2000 through 2004.
- Would be effective upon enactment.

Expanded Availability of Health Care Services

State Options under Medicaid

- Would expand, for individuals who are at least 16, but less than 65, years of age, the States' options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide the opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for SSDI or SSI disability benefits due to medical improvement. For purposes of the Medicaid buy-in, the States are authorized to require individuals to pay premiums, or other cost-sharing charges, set on a sliding scale based on income.
- Would be applicable with respect to medical assistance for items and services furnished on or after October 1, 1999.
- Would require GAO to report on these options not later than 3 years after enactment.

Continuation of Medicare Coverage

- Would extend premium-free Medicare Part A coverage for people with disabilities who return to work for an additional 6-year period beyond current law for SSDI beneficiaries (for a total of 10 years after work begins).
- Effective date is October 1, 2000.
- Would require GAO (5 years after enactment) to examine the effectiveness and cost of providing such premium-free Medicare Part A coverage and to recommend whether such coverage should be continued beyond the 6-year period and to examine the viability of employer buy-in to Medicare.

Responsibilities of the Secretary of Health and Human Services

- Would direct the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and funding is authorized, not mandatorily appropriated; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits. Funding is authorized, not mandatorily appropriated.
- Would be effective upon enactment.

Election by Disabled Beneficiaries to Suspend Medigap Insurance

- Would allow workers with disabilities who have Medicare coverage and a Medigap policy to suspend the premiums and benefits of the Medigap policy if they have employer-sponsored coverage.
- Would be applicable with respect to requests made after the date of enactment.

Demonstration Projects and Studies

Disability Insurance Program Demonstration Project Authority

- Would: (1) authorize section 505 of the Social Security Disability Amendments of 1980 (Authority for Demonstration Projects) for a 5-year period, (2) direct the Commissioner to conduct demonstrations related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income, and (3) permit presumptively eligible applicants to participate in demonstration projects.
- Would direct the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Requires GAO to study and recommend as to whether the authority should be permanent.
- Would be effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Would direct the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Would provide that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the extent, if any, to which the project being tested is affected by whether it is being conducted in a locality within an area under the administration of the Ticket Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Would require the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, the employment outcomes of beneficiaries who return to work as a result of participation in the project.

- Would permit the Commissioner to evaluate the merits of the trial work period and the period of extended eligibility as part of the projects.
- Would authorize the Commissioner to waive compliance with the title II benefit provisions and the Secretary of HHS to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration.
- Would require the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, would require the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 year after their completion.

Funding

- Would provide that expenditures for the demonstration projects be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Would be effective upon enactment.

Reports and Studies

- Would require GAO to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A report would be due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report would be due to the congressional committees not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A report would be due to the congressional committees not later than 2 years after the date of enactment of this Act.

- Would direct the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income disregards applicable to beneficiaries under SSDI and SSI programs. The report should specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.
- Would be effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Would amend the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Would expand the applicability of the provisions in P.L. 104-121, which authorizes the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.
- Would be effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Would extend the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Would eliminate the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year. Benefits would be suspended for any month during which the person was confined because of a crime or finding of not guilty by reason of insanity except that no monthly benefit would be suspended for any month falling within a period of confinement that lasts for less than 31 days.
- Would be applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.

- Would provide that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of the payment.
- Would be effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Would prohibit the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Would be effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Would create a 2-year window to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption.
- The application for revocation would have to be filed before the due date for the income tax return for the applicant's second taxable year beginning after 12/31/99. The revocation would be effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Would clarify the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Would be effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- For purposes of income and eligibility verification for various welfare programs, would authorize States to permit employers to submit wage reports of domestic workers on an annual basis (rather than on a quarterly basis).
- Would be applicable to wage reports required to be submitted on or after the date of enactment.

Assessment on Attorneys Who Receive their Fees Via the Social Security Administration

- Allows the Commissioner to charge an assessment in the amount of 6.3 percent for withholding, processing, and forwarding an attorney's fee directly to the attorney.

- Would be applicable in the case of any attorney with respect to whom a fee for services is required to be certified for payments from a claimant's past-due payments after December 31, 1999 or the last day of the first month beginning after the month of enactment.

Elimination of Fraud and Abuse Associated with Certain Payments Under the Medicaid Program

- Tightens the requirements for school-based Medicaid reimbursement in the areas of transportation, bundling of claims, and administrative charges to eliminate fraud and abuse.
- In general, would be applicable to items and services provided on and after the date of enactment. The amendments related to provisions of items and services provided through Managed Care Organizations would be applicable to contracts entered into or renewed after the date of enactment.

Extension of Authority of State Medicaid Fraud Control Units

- Extend the authority of State Medicaid fraud control units to investigate and prosecute fraud in other Federal health care programs.
- Would be effective upon enactment.

Legislative *Bulletin*

106-13

November 24, 1999

CONGRESS PASSES THE TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999

On November 18, 1999, the House of Representatives passed the conference report accompanying H.R. 1180, the Ticket to Work and Work Incentives Improvement Act of 1999, by a vote of 418-2. The Senate passed the conference report, by a vote of 95-1, on November 19, 1999. The President has indicated that he will sign the legislation. The bill contains the following provisions of interest to SSA:

Ticket to Work and Self-Sufficiency Program

General

- Directs the Commissioner to establish a Ticket to Work and Self-Sufficiency program (Program) which would provide SSDI and SSI disability beneficiaries with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, and other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Selects and enters into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Terminates agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Precludes program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program manager's agreement.
- Selects, and enters into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.
- Terminates agreements with employment networks whose performance is inadequate.

- Provides for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Provides for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Performs such tasks as assigned by the Commissioner.
- Recruits and recommends for selection by the Commissioner, employment networks which can provide services under the Program.
- Monitors employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Ensures that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Ensures beneficiaries are allowed changes in employment networks for good cause without being deemed to have rejected services under the Program.

Employment Network(s)

- Assumes responsibility for coordination and delivery of services under the Program to an individual assigning his/her ticket to work and self-sufficiency to an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Provides services either directly or by entering into agreements with other providers which can furnish appropriate services.
- Serves prescribed service areas and takes measures to ensure that services provided under the Program meet the requirements of individual work plans.

- Meets the financial reporting requirements prescribed by the Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.
- Develops and implements an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon written approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Authorizes the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network is paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system combines outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of outcome-milestone payments must be less than the total amount of payments if the employment network is paid under the outcome payment system.
- Requires the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.
- Allows the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.
- Requires the Commissioner to report within 36 months of enactment on the adequacy of the payment system as an incentive for providing services to individuals with a need for ongoing support or services, high cost accommodations, who earn a subminimum wage, or who work and receive partial benefits.

State Agency Participation

- Permits a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program will provide services under plans approved under title I of the Rehabilitation Act of 1973.
- Requires a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Directs the Commissioner and the Secretary of Education jointly to prescribe regulations specifying the terms of such agreements.
 - Prohibits payment to an employment network if the employment network makes referrals to the State VR agency without entering into a written agreement with such State VR agency or in violation of the terms of the written agreement.
- Requires the Commissioner to establish in regulations a dispute resolution mechanism when the State VR agency and the employment network fail to reach an agreement on cross-referring beneficiaries.
- Requires the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Prohibits the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Requires payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance Trust Funds (OASDI) in the case of SSDI beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses would be authorized as appropriate from amounts made available for the administration of title II and title XVI of the Social Security Act (the Act).

Regulations

- Directs the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.

Effective Date of the Program

- Effective with the first month following 1 year after enactment.

Scope of Program Implementation

- Directs the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Requires the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Requires the Commissioner (after consultation with the Advisory Panel, beneficiaries using Tickets, the General Accounting Office (GAO), other Federal agencies, and others with appropriate expertise) to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self sufficiency under the Program. Also, requires the Commissioner to provide for independent evaluations to assess the activities carried out under the Program.

Reports

- Requires the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports should be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives Advisory Panel

- Establishes a Work Incentives Advisory Panel within the Social Security Administration. The Panel will be composed of 12 members--4 appointed by the President; 2 each by the Speaker and the Minority Leader of the House; and 2 each by the Majority and Minority Leaders of the Senate. At least one-half of the members should be individuals with disabilities or representatives of individuals with a disability, with consideration given to current and former Social Security and Supplemental Security Income disability beneficiaries. Requires that members be appointed not later than 90 days after enactment.
- Requires that all 12 members represent the interests of recipients of service, providers of service, employers, and employees (two each).
- Duties include:
 - Advising the President, Congress, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self-Sufficiency Program on the following:
 - ? phase-in sites for implementation of the Program;
 - ? access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - ? the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability insurance benefits based on earnings; and
 - ? development of performance measures for the employment networks.

- ? furnishing progress reports on the Program to the Commissioner and Congress.
- Requires the Panel to submit interim reports at least annually and transmit a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.
 - Terminates the Panel 30 days after the date it submits its final report.
 - The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

Elimination of Work Disincentives

Work Activity Standard as a Basis for Review

- Prohibits the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 of the Act or monthly insurance benefits under section 202 of the Act based on disability and have received such benefits for at least 24 months.
- Allows for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Effective January 1, 2002.

Expedited Reinstatement of Benefits

- Provides that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Requires that such individuals (1) are unable to continue working on account of their medical condition and (2) file a reinstatement request during the 60-month period following the month of termination.

- Provides that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals are eligible for the payment of provisional benefits for a period of not more than 6 months.
- Requires that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentives Outreach Program

- Directs the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner is directed to:
 - establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and
 - establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information to disabled beneficiaries.
- Directs the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
- Provides that the costs be paid from amounts made available for the administration for title II and title XVI, and that allocations be made from those amounts as appropriate.
- Authorizes \$23 million to be allocated for each of fiscal years 2000 through 2004.

- Effective upon enactment.

Protection and Advocacy

- Authorizes the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment is required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Provides that protection and advocacy systems be paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year.
- Provides that payments be made from amounts available for the administration for title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Authorizes \$7 million to be appropriated for each of fiscal years 2000 through 2004.
- Effective upon enactment.

Expanded Availability of Health Care Services

State Options under Medicaid

- Expands, for individuals who are at least 16, but less than 65, years of age, the States' options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide the opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for SSDI or SSI disability benefits due to medical improvement. For purposes of the Medicaid buy-in, the States are authorized to require individuals to pay premiums, or other cost-sharing charges, set on a sliding scale based on income.
- Applicable with respect to medical assistance for items and services furnished on or after October 1, 2000.
- Requires GAO to report on these options not later than 3 years after enactment.

Continuation of Medicare Coverage

- Extends premium-free Medicare Part A coverage for people with disabilities who return to work for an additional 4 1/2-year period beyond the four years provided under current law for SSDI beneficiaries.
- Effective date is October 1, 2000.
- Requires GAO (5 years after enactment) to examine the effectiveness and cost of providing such premium-free Medicare Part A coverage and to recommend whether such coverage should be continued and to examine the viability of employer buy-in to Medicare.

Responsibilities of the Secretary of Health and Human Services

- Directs the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and funding is authorized, not mandatorily appropriated; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits. Funding is authorized, not mandatorily appropriated.
- Effective October 1, 2000.

Election by Disabled Beneficiaries to Suspend Medigap Insurance

- Allows workers with disabilities who have Medicare coverage and a Medigap policy to suspend the premiums and benefits of the Medigap policy if they have employer-sponsored coverage.
- Applicable with respect to requests made after the date of enactment.

Demonstration Projects and Studies

Disability Insurance Program Demonstration Project Authority

- Authorizes section 505 of the Social Security Disability Amendments of 1980 (Authority for Demonstration Projects) for a 5-year period. Directs the Commissioner to conduct demonstrations related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income. Permits presumptively eligible applicants to participate in demonstration projects.
- Directs the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Requires GAO to study and recommend as to whether the authority should be permanent.
- Effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Directs the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Provides that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the extent, if any, to which the project being tested is affected by whether it is being conducted in a locality within an area under the administration of the Ticket Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Requires the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, the employment outcomes of beneficiaries who return to work as a result of participation in the project.
- Permits the Commissioner to evaluate the merits of the trial work period and the period of extended eligibility as part of the projects.

- Authorizes the Commissioner to waive compliance with the title II benefit provisions and the Secretary of HHS to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration.
- Requires the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, requires the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 year after their completion.

Funding

- Provides that expenditures for the demonstration projects be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Effective upon enactment.

Reports and Studies

- Requires GAO to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A report is due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report is due to the congressional committees not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A report is due to the

congressional committees not later than 2 years after the date of enactment of this Act.

- Directs the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income disregards applicable to beneficiaries under SSDI and SSI programs. The report should specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.
- Effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Amends the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Expands the applicability of the provisions in P.L. 104-121, which authorizes the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.
- Effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Extends the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program for purpose of determining program eligibility.
- Applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Eliminates the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year. Benefits would be suspended for any month during which the person was confined because of a crime or finding of not guilty by reason of

insanity except that no monthly benefit would be suspended for any month falling within a period of confinement that lasts for less than 30 days.

- Applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Provides that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of the payment.
- Effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Prohibits the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Creates a 2-year window to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption.
- The application for revocation must be filed before the due date for the income tax return for the applicant's second taxable year beginning after 12/31/99.
- The revocation is effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Clarifies the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- Authorizes States to permit employers to submit wage reports of domestic workers to the State on an annual rather than quarterly basis for purposes of the income and eligibility verification system for the TANF, Medicaid, food stamp and unemployment compensation programs.
- Applicable to wage reports required to be submitted on or after the date of enactment.

Assessment on Attorneys Who Receive their Fees Via the Social Security Administration

- Allows the Commissioner to charge an assessment, not to exceed 6.3 percent, to recover the costs for determining, and certifying (processing, withholding, and distributing) fees to attorneys.
- Eliminates the requirement that the Commissioner may not certify an attorney fee before the end of the 15-day waiting period.
- Requires GAO to study the costs of administering the attorney fee provisions, the feasibility of a fixed fee for services to an attorney, and make recommendations to improve or modify the attorney fee payment process. A report would be due to the congressional committees not later than one year after the date of enactment.
- Applicable in the case of any attorney with respect to whom a fee for services is required to be certified for payments from a claimant's past-due payments after the later of December 31, 1999 or the last day of the first month beginning after the month of enactment.

Extension of Authority of State Medicaid Fraud Control Units

- Extends the authority of State Medicaid fraud control units to investigate and prosecute fraud in other Federal health care programs.
- Effective upon enactment.

Schedule for SSI Supplementation Payments

- Effective for months after September 2009, requires a State that has entered into an agreement with the Commissioner for Federal administration of State supplementary payments to remit the payments and fees required of them no later than the business day preceding the SSI payment date. (With respect to State supplementary payments paid for the month which is the last month of the State's fiscal year, the fifth business day following the SSI payment date.)
- Authorizes the Commissioner to charge a penalty equal to 5 percent of the payment and fees if the remittance is received after the required date.
- Also provides that under extraordinary circumstances affecting the State's ability to make payment, the Commissioner may make the State supplementary payments on a reimbursable basis.

LEGISLATIVE

Bulletin

106-15

December 17, 1999

PRESIDENT CLINTON SIGNS THE TICKET TO WORK AND WORK INCENTIVES IMPROVEMENT ACT OF 1999

Today the President signed into law H.R. 1180, the Ticket to Work and Work Incentives Improvement Act of 1999. The law contains the following provisions of interest to SSA:

Ticket to Work and Self-Sufficiency Program

General

- Directs the Commissioner to establish a Ticket to Work and Self-Sufficiency program (Program) which would provide SSDI and SSI disability beneficiaries with a ticket they may use to obtain vocational rehabilitation (VR) services, employment services, and other support services from an employment network of their choice.

Responsibilities of the Commissioner of Social Security

- Selects and enters into agreements with one or more organizations in the public or private sector to serve as a program manager(s) to assist the Commissioner in administering the Program.
- Terminates agreements with program manager(s) who fail to meet the performance standards specified in the agreements.
- Precludes program managers from direct participation in the delivery of services to beneficiaries or from holding a financial interest in an employment network in the service area covered by the program managers' agreement.
- Selects, and enters into agreements with, employment networks, including alternate participants who choose to act as an employment network, to provide services under the Program.

- Terminates agreements with employment networks whose performance is inadequate.
- Provides for periodic reviews of employment networks to ensure effective quality assurance in the provision of services.
- Provides for a process to resolve disputes between beneficiaries and employment networks, between program managers and employment networks, and between program managers and providers of services.

Responsibilities of the Program Manager(s)

- Performs such tasks as assigned by the Commissioner.
- Recruits and recommends, for selection by the Commissioner, employment networks which can provide services under the Program.
- Monitors employment networks under its jurisdiction to ensure that beneficiaries have adequate choices of services and reasonable access to services, e.g., case management, benefits counseling, supported employment, job training, placement, and follow-up services.
- Ensures that employment networks comply with the terms of their agreements with the Commissioner and that payment by the Commissioner to an employment network is warranted.
- Ensures beneficiaries are allowed changes in employment networks without being deemed to have rejected services under the Program.

Employment Network(s)

- Assumes responsibility for coordination and delivery of services under the Program to an individual assigning his/her ticket to work and self-sufficiency to an employment network.
- May consist of a one-stop delivery system established under the Workforce Investment Act of 1998 or either a single provider of such services or a group of providers organized to combine their resources into a single entity.
- Provides services either directly or by entering into agreements with other providers which can furnish appropriate services.

- Serves prescribed service areas and takes measures to ensure that services provided under the Program meet the requirements of individual work plans.
- Meets the financial reporting requirements prescribed by the Commissioner. Prepares periodic reports, on at least an annual basis, itemizing specific outcomes achieved with respect to services provided to beneficiaries.
- Develops and implements an individual work plan in partnership with each beneficiary that includes a statement of the: (1) beneficiary's vocational goal, (2) services and supports necessary to accomplish that goal, (3) terms and conditions related to the provision of those services and supports, (4) rights and remedies available to the beneficiary, and (5) beneficiary's right to modify his/her work plan if needed. The individual work plan is effective upon written approval by the beneficiary and a representative of the employment network.

Employment Network Payment Systems

- Authorizes the Commissioner to pay an employment network under either an outcome payment system or an outcome-milestone payment system. Each employment network will elect the payment system under which it will be paid.
 - Under the outcome payment system, an employment network is paid a percentage, not to exceed 40 percent, of the national average SSDI or SSI payment for each month that a beneficiary does not receive a benefit payment due to work activity for a period not to exceed 60 months.
 - The outcome-milestone payment system combines outcome payments with payments for achieving one or more milestones directed toward assisting the beneficiary in achieving permanent employment. However, the total amount of outcome-milestone payments must be less than the total amount of payments if the employment network is paid under the outcome payment system.
- Requires the Commissioner to review periodically the specifications of the payment system (percentage and total payment) to ensure that the system provides an adequate incentive for employment networks to assist beneficiaries in entering the workforce.

- Allows the Commissioner to alter the percentage or total permissible payments, as well as the number and amount of milestone payments, to allow an adequate incentive for employment networks.
- Requires the Commissioner to report within 36 months of enactment on the adequacy of the payment system as an incentive for providing services to individuals with a need for ongoing support or services, high cost accommodations, who earn a subminimum wage, or who work and receive partial benefits.

State Agency Participation

- Permits a State VR agency to elect participation in the Program as an employment network with respect to each disabled beneficiary for whom it will provide services.
- State VR agencies participating in the Program will provide services under plans approved under title I of the Rehabilitation Act of 1973.
- Requires a written agreement between the State VR agency and the employment network before a State VR agency can accept any referral of a disabled beneficiary from an employment network assigned a ticket to work by the disabled beneficiary.
 - Directs the Commissioner to prescribe regulations specifying the terms of such agreements.
- Requires the Commissioner to establish in regulations a dispute resolution mechanism when the State VR agency and the employment network fail to reach an agreement on cross-referring beneficiaries.
- Requires the Commissioner, if the amendments have not been fully implemented in a State, to determine through regulations the extent (1) to which the requirement concerning prompt referral to the State VR agency applies, and (2) of the Commissioner's authority to provide vocational rehabilitation services by agreement or contract with other public or private agencies in the State.

Continuing Disability Reviews

- Prohibits the Commissioner from initiating continuing disability reviews during the period that a beneficiary is using a ticket to work and self-sufficiency.

Financing

- Requires payments to employment networks to be made from the Federal Old-Age, Survivors and Disability Insurance (OASDI) Trust Funds in the case of SSDI beneficiaries who return to work and from appropriations made available for making SSI payments under title XVI. The costs for administrative expenses would be authorized as appropriate from amounts made available for the administration of title II and title XVI of the Social Security Act (the Act).

Regulations

- Directs the Commissioner to prescribe regulations necessary to implement the Ticket to Work and Self-Sufficiency Program not later than 1 year after the date of enactment.

Effective Date of the Program

- Effective with the first month following 1 year after enactment.

Scope of Program Implementation

- Directs the Commissioner to implement the amendments in graduated phases at sites selected by the Commissioner to ensure the refinement of the Program processes prior to full implementation.
- Requires the Commissioner to fully implement the Program as soon as practicable, but not later than 3 years after the effective date.

Evaluation

- Requires the Commissioner (after consultation with the Advisory Panel, beneficiaries using Tickets, the General Accounting Office (GAO), other Federal agencies, and others with appropriate expertise) to design and conduct a series of evaluations to assess the cost-effectiveness of the Program and the work outcomes for beneficiaries receiving a ticket to work and self sufficiency under the Program. Also, requires the Commissioner to provide for independent evaluations to assess the activities carried out under the Program.

Reports

- Requires the Commissioner to report following the close of the third and fifth fiscal years and prior to the close of the seventh fiscal year ending after the effective date. Reports should be submitted to the House Committee on Ways and Means and the Senate Committee on Finance on the Commissioner's evaluation of the progress of activities, as well as the success of the Program and the Commissioner's conclusions on whether or how the Program should be modified.

Work Incentives Advisory Panel

- Establishes a Work Incentives Advisory Panel within the Social Security Administration. The Panel will be composed of 12 members--4 appointed by the President; 2 each by the Speaker and the Minority Leader of the House; and 2 each by the Majority and Minority Leaders of the Senate. At least one-half of the members shall be individuals with disabilities or representatives of individuals with a disability, with consideration given to current and former Social Security and Supplemental Security Income disability beneficiaries. Requires that members be appointed not later than 90 days after enactment.
- Requires that all 12 members represent the interests of recipients of service, providers of service, employers, and employees (two each).

- Duties include:
 - Advising the President, Congress, and the Commissioner of Social Security on issues related to work incentive programs, planning, and assistance for individuals with disabilities, including work incentive provisions under titles II, XI, XVI, XVIII, and XIX of the Act.
 - Advising the Commissioner with respect to the Ticket to Work and Self-Sufficiency Program on the following:
 - phase-in sites for implementation of the Program;
 - access of disabled beneficiaries to employment networks, payment systems, and management information systems to ensure the success of the Program;
 - the most effective designs for research and demonstration projects associated with the Program or conducted with respect to the reduction in disability insurance benefits based on earnings; and
 - development of performance measures for the employment networks.
 - Furnishing progress reports on the Program to the Commissioner and Congress.
- Requires the Panel to submit interim reports at least annually and transmit a final report which includes a detailed statement of the findings and conclusions of the Panel and its recommendations for legislation and administrative actions, to the President and the Congress not later than 8 years after the date of enactment.
- Terminates the Panel 30 days after the date it submits its final report.
- The costs for the Panel shall be made from amounts available for the administration of title II and title XVI, and shall be allocated from those amounts as appropriate.

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- Prohibits the use of work activity as a basis for review for individuals who are entitled to disability insurance benefits under section 223 of the Act or monthly insurance benefits under section 202 of the Act based on disability and have received such benefits for at least 24 months.
- Allows for continuing disability reviews on a regularly scheduled basis that are not triggered by work activity, and termination of benefits if the individual has earnings that exceed the level of earning established by the Commissioner to represent substantial gainful activity (SGA).
- Effective January 1, 2002.

Expedited Reinstatement of Benefits

- Provides that individuals, whose prior entitlement to disability and health care benefits had been terminated as a result of earnings from work activity, may request reinstatement of benefits without filing a new application.
- Requires that such individuals (1) are unable to continue working on account of their medical condition and (2) file a reinstatement request during the 60-month period following the month of termination.
- Provides that, while SSA is making a determination (by applying the medical improvement review standard) on the reinstatement request, individuals are eligible for the payment of provisional benefits for a period of not more than 6 months.
- Requires that, if SSA makes a favorable determination, both the individual's prior entitlement to benefits and the prior benefits of his dependents who continue to meet the entitlement criteria would be reinstated.
- Effective on the first day of the 13th month beginning after the date of enactment.

Work Incentives Planning, Assistance, and Outreach

Work Incentives Outreach Program

- Directs the Commissioner, in consultation with the Work Incentives Advisory Panel, to establish a community-based work incentives planning and assistance program for the purpose of providing accurate information related to work incentives to disabled beneficiaries.
- Under the Program, the Commissioner is directed to:
 - establish a competitive program of grants, cooperative agreements, or contracts to provide benefits planning and assistance, including information on the availability of protection and advocacy services, to disabled beneficiaries;
 - conduct directly, or through grants, cooperative agreements, or contracts, ongoing outreach efforts; and
 - establish a corps of work incentive specialists within the Social Security Administration who specialize in title II and title XVI work incentives for the purpose of providing accurate information.
- Directs the Commissioner to award a grant, cooperative agreement, or contract to an entity based on a percentage of the population of disabled beneficiaries in the State where the entity is located. No entity will receive a grant, cooperative agreement, or contract for a fiscal year that is less than \$50,000 or more than \$300,000. The total amount of all grants, cooperative agreements, and contracts awarded for a fiscal year may not exceed \$23 million.
- Provides that the costs be paid from amounts made available for the administration for title II and title XVI, and that allocations be made from those amounts as appropriate.
- Authorizes \$23 million to be allocated for each of fiscal years 2000 through 2004.
- Effective upon enactment.

Protection and Advocacy

- Authorizes the Commissioner to make payments to protection and advocacy systems established in each state. Each system that receives payment is required to submit an annual report to the Commissioner and the Work Incentives Advisory Panel.
- Provides that protection and advocacy systems are paid the greater of \$100,000 or 1/3 of 1 percent of the amount available for payments for a fiscal year. Provides that payments are made from amounts available for the administration for title II and title XVI, and would be allocated from those amounts as appropriate. Any amounts allotted for payments to a protection and advocacy system would remain available until the end of the succeeding fiscal year.
- Authorizes \$7 million to be appropriated for each of fiscal years 2000 through 2004.
- Effective upon enactment.

Expanded Availability of Health Care Services

State Options under Medicaid

- Expands, for individuals who are at least 16, but less than 65, years of age, the States' options and funding for the Medicaid buy-in for workers with disabilities by permitting States to: (1) liberalize limits on resources and income, and (2) provide the opportunity for employed individuals with medically determinable impairments, as determined by the Secretary of Health and Human Services (HHS), to buy into Medicaid even though they are no longer eligible for SSDI or SSI disability benefits due to medical improvement. For purposes of the Medicaid buy-in, the States are authorized to require individuals to pay premiums, or other cost-sharing charges, set on a sliding scale based on income.
- Applicable with respect to medical assistance for items and services furnished on or after October 1, 2000.
- Requires GAO to report on these options not later than 3 years after enactment.

Continuation of Medicare Coverage

- Extends premium-free Medicare Part A coverage for people with disabilities who return to work for an additional 4 1/2-year period beyond the four years provided under current law for SSDI beneficiaries.
- Effective October 1, 2000.
- Requires GAO (5 years after enactment) to examine the effectiveness and cost of providing such premium-free Medicare Part A coverage and to recommend whether such coverage should be continued and to examine the viability of employer buy-in to Medicare.

Responsibilities of the Secretary of Health and Human Services

- Directs the Secretary of HHS to:
 - provide grants to establish State infrastructures to support working individuals with disabilities; and
 - create a demonstration of a Medicaid buy-in for people whose disabilities have not yet gotten severe enough to cause them to stop work and file for benefits.
- Effective October 1, 2000.

Election by Disabled Beneficiaries to Suspend Medigap Insurance

- Allows workers with disabilities who have Medicare coverage and a Medigap policy to suspend the premiums and benefits of the Medigap policy if they have employer-sponsored coverage.
- Applicable with respect to requests made after the date of enactment.

Demonstration Projects and Studies

Disability Insurance Program Demonstration Project Authority

- Authorizes section 505 of the Social Security Disability Amendments of 1980 (Authority for Demonstration Projects) for a 5-year period. Directs the Commissioner to conduct demonstrations related to sliding scale benefit offsets using variations in the amounts of the offset as a proportion of earned income. Permits presumptively eligible applicants to participate in demonstration projects.

- Directs the Commissioner to submit: (1) interim reports on or before June 9 of each year on the progress of the demonstration projects, and (2) a final report not later than 90 days after the termination of any experiment or demonstration project carried out under this provision.
- Requires GAO to study and recommend as to whether the authority should be permanent.
- Effective upon enactment.

Reduction in Disability Benefits Based on Earnings

- Directs the Commissioner to conduct demonstration projects to evaluate the effects of a \$1 for \$2 withholding of SSDI payments for earnings over a level specified by the Commissioner.
- Provides that the demonstration projects should determine:
 - the effects, if any, of induced entry and reduced exit;
 - the extent, if any, to which the project being tested is affected by whether it is being conducted in a locality within an area under the administration of the Ticket Program; and,
 - the savings to the Trust Funds and other Federal programs as a result of the project.
- Requires the Commissioner to determine the annual cost, the reasons for the return to work of beneficiaries who participate in the project, and the employment outcomes of beneficiaries who return to work as a result of participation in the project.
- Permits the Commissioner to evaluate the merits of the trial work period and the period of extended eligibility as part of the projects.
- Authorizes the Commissioner to waive compliance with the title II benefit provisions and the Secretary of HHS to waive compliance with the benefit requirements of title XVIII, insofar as is necessary for a thorough evaluation of the alternative methods under consideration.

- Requires the Commissioner to submit a written report to the House Committee on Ways and Means and the Senate Committee on Finance 90 days prior to the start of a project. Also, requires the Commissioner to submit periodic reports not later than 2 years after the date of enactment, and annually thereafter, on the progress of the project(s) and a final report on all demonstration projects to the Congressional committees not later than 1 year after their completion.

Funding

- Provides that expenditures for the demonstration projects be made from the Federal Disability Insurance Trust Fund and the Federal Old-Age and Survivor's Insurance Trust Fund as determined appropriate by the Commissioner of Social Security, and from the Federal Hospital Insurance Trust Fund and the Federal Supplementary Medical Insurance Trust Fund as determined by the Secretary of Health and Human Services, to the extent provided in advance in appropriation Acts.
- Effective upon enactment.

Reports and Studies

- Requires GAO to study:
 - the extent to which existing tax credits and other employer incentives under current law encourage employers to hire and retain individuals with disabilities. A report is due to the Committee on Ways and Means of the House of Representatives and the Committee on Finance of the Senate not later than 3 years after the date of enactment of this Act;
 - the coordination of SSDI and SSI programs as they relate to individuals who are eligible for benefits under both programs, or whose eligibility changes from one program to the other. The study should focus on the effectiveness of work incentives and medical coverage for these individuals. A report is due to the congressional committees not later than 3 years after the date of enactment; and
 - the SGA levels applicable to disabled beneficiaries; whether the levels serve as a disincentive for those returning to work, the merits of increasing SGA levels, and the rationale for not indexing the levels to inflation. A report is due

to the congressional committees not later than 2 years after the date of enactment of this Act.

- Directs the Commissioner to report to the House Ways and Means Committee and the Senate Finance Committee, not later than 90 days after enactment, on all income disregards applicable to beneficiaries under SSDI and SSI programs. The report should specify the most recent statutory or regulatory change in each disregard; estimate the current value of any disregard if the disregard had been indexed for inflation; and recommend any further changes.
- Effective upon enactment.

Technical Amendments

Drug Addicts and Alcoholics (DA&A)

- Amends the Contract with America Advancement Act of 1996 (P.L. 104-121) to clarify SSA's authority to make SSDI medical redeterminations after January 1, 1997. (A similar SSI provision was included in the Balanced Budget Act of 1997, P.L. 105-33.)
- Expands the applicability of the provisions in P.L. 104-121, which authorizes the Commissioner to determine if a representative payee would be in the best interest of a disabled beneficiary who is incapable and has a DA&A condition, and whether such individual should be referred to a State agency for substance abuse treatment services.
- Effective as if included in the enactment of section 105 of the Contract with America Advancement Act of 1996 (P.L. 104-121).

Treatment of Prisoners

- Extends the incentive payment provisions now in effect for SSI prisoners to OASDI, and would authorize the Commissioner to provide, on a reimbursable basis, this reported information to any agency administering a Federal or federally assisted cash, food, or medical assistance program for purpose of determining program eligibility.
- Applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Eliminates the OASDI requirement that confinement stem from a crime punishable by imprisonment for more than 1 year. Benefits would be suspended for any month during which the person was confined because of a crime or finding of not guilty by reason of insanity except that no monthly benefit would be suspended for any month falling within a period of confinement that lasts for less than 30 days.
- Applicable to individuals whose period of confinement in an institution begins on or after the first day of the fourth month beginning after the month of enactment.
- Provides that an institution does not get two incentive payments when the reported prisoner is a concurrent OASDI/SSI beneficiary--the programs would split the cost of the payment.
- Effective as if included in enactment of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193).
- Prohibits the payment of monthly benefits to any title II beneficiary who upon completion of a prison term remains confined by court order to a public institution based on a finding that the individual is a sexually dangerous person or a sexual predator.
- Effective with respect to benefits for months ending after the date of enactment.

Revocation by Members of the Clergy of Exemption from Social Security Coverage

- Creates a 2-year window to allow members of the clergy who applied for and received an exemption from Social Security coverage to revoke the exemption.
- The application for revocation must be filed before the due date for the income tax return for the applicant's second taxable year beginning after 12/31/99.
- The revocation is effective, at the applicant's option, beginning with either the first or second taxable year beginning after 12/31/99.

Cooperative Research or Demonstration Projects Under Title II and Title XVI

- Clarifies the Commissioner's authority to make grants and payments under cooperative research or demonstration projects in advance or by way of reimbursement to carry out demonstration projects and cooperative research not only for title XVI, but also title II under section 1110(a) of the Social Security Act.
- Effective as if included in the enactment of the Social Security Independence and Program Improvement Act of 1994 (P.L. 103-296).

Authorization for State to Permit Annual Wage Reports

- Authorizes States to permit employers to submit wage reports of domestic workers to the State on an annual rather than quarterly basis for purposes of the income and eligibility verification system for the TANF, Medicaid, food stamp and unemployment compensation programs.
- Applicable to wage reports required to be submitted on or after the date of enactment.

Assessment on Attorneys who Receive their Fees Via the Social Security Administration

- Allows the Commissioner to charge an assessment, not to exceed 6.3 percent, to recover the costs for determining, and certifying (processing, withholding, and distributing) fees to attorneys.
- Eliminates the requirement that the Commissioner may not certify an attorney fee before the end of the 15-day waiting period.
- Requires GAO to study the costs of administering the attorney fee provisions, the feasibility of a fixed fee for services to an attorney, and make recommendations to improve or modify the attorney fee payment process. A report would be due to the congressional committees not later than one year after the date of enactment.
- Applicable in the case of any attorney with respect to whom a fee for services is required to be certified for payments from a claimant's past-due payments after the later of December 31, 1999 or the last day of the first month beginning after the month of enactment.

Extension of Authority of State Medicaid Fraud Control Units

- Extends the authority of State Medicaid fraud control units to investigate and prosecute fraud in other Federal health care programs.
- Effective upon enactment.

Schedule for SSI Supplementation Payments

- Effective for months after September 2009, requires a State that has entered into an agreement with the Commissioner for Federal administration of State supplementary payments to remit the payments and fees required of them no later than the business day preceding the SSI payment date. (With respect to State supplementary payments paid for the month which is the last month of the State's fiscal year, the fifth business day following the SSI payment date.)
- Authorizes the Commissioner to charge a penalty equal to 5 percent of the payment and fees if the remittance is received after the required date.

- Also provides that under extraordinary circumstances affecting the State's ability to make payment, the Commissioner may make the State supplementary payments on a reimbursable basis.