

MAXIMUS

Request for Important Information

MAXIMUS Ticket to Work
P.O. Box 1433
Alexandria, Virginia 22313
May 20, 2005
Claim Account Number: 111-11-1111 A

JOHN SMITH
ABC EMPLOYMENT NETWORK
123 MAIN STREET
ANYTOWN, USA 12345
Notice Code: Q0p01000

Re: Initial 24-Month Timely Progress Review
Name: SALLY SAMPLE

SSN: 111-11-1111 A

We are writing to you because our records indicate that the ticket for SALLY SAMPLE has been in-use and assigned to your organization for 24 months. Therefore, we must now conduct the initial 24-month progress review to assess whether your client is engaging in activities outlined in her employment plan on a regular basis and in the approximate time frames specified in the plan.

What You Should Do

Please complete the attached form and return it to us according to the instructions on the form within 30 days. If we do not hear from you in writing within 30 days of the date of this request, we will conclude that your response to each question is "Yes." This will mean that your client will pass her initial 24-month timely progress review and we will consider her to be using her ticket.

How Timely Progress Affects Your Client's Disability Benefits

SSA usually reviews disability cases on a scheduled basis to determine if beneficiaries are still disabled under SSA rules. This is called a Medical Continuing Disability Review. If your client does not meet the disability rules, SSA may stop her benefits. If your client's benefits stop because of a medical review, she may not be eligible to participate in the Ticket to Work Program.

SSA does not conduct the Medical Continuing Disability Review if your client is using her ticket. However, if you indicate on the attached form that your client is not actively participating in her employment plan, then she is not using her ticket and her disability case may be subject to a medical review. If your client still meets the disability rules, her benefits may continue.

If You Have Questions

As our valued partner in the Ticket to Work Program, we appreciate your interest and commitment. We look forward to working with you to serve your needs. We invite you to visit the www.yourtickettowork.com and www.ssa.gov/work websites regularly for program updates, general information, and training opportunities.

If you have any questions regarding the Ticket to Work Program, please contact us at 1-866-968-7842 or TDD 1-866-833-2967. You can also write to us at the following address:

MAXIMUS Ticket to Work
P. O. Box 1433
Alexandria, VA 22313

Sincerely,

MAXIMUS Ticket to Work Program

Initial 24-Month Timely Progress Review Form

From: ABC EMPLOYMENT NETWORK

Re: SALLY SAMPLE

INSTRUCTIONS: Assess the level of participation your client has demonstrated in the Ticket to Work Program and answer the questions below. Please sign, date, and return this form to MAXIMUS at the address above or fax it to MAXIMUS, Attn: Progress Review, (703) 683-3289. It is important that you respond within 30 days. You may retain a copy of this form for your files.

Initial 24-Month Timely Progress Review - Please check the appropriate box.

1. Did your client actively participate in her employment plan by engaging in the activities outlined in her employment plan on a regular basis and in the approximate time frames specified in the plan?

Yes

No

2. Does your client's employment plan include a goal of working for at least three months with earnings at or above the substantial gainful activity level by the time of the first 12-month timely progress review? This review is currently scheduled for [April 1, 2006](#) provided that your client continues to make timely progress toward self-supporting employment. This substantial gainful activity amount for 2005 is \$830.

Yes

No

3. Given your client's current progress, can she reasonably be expected to reach the goal of working at least three months and earning at or above the substantial gainful activity level by the time of the first 12-month timely progress review?

Yes

No

Please sign and date.

EN/State VR Agency Representative Signature

Date