DATA NOTE PLUS
Issue #112, 2026

SOCIAL SECURITY ADMINISTRATION DATA: EMPLOYMENT TRENDS AND WORK INCENTIVE PARTICIPATION AMONG SSI RECIPIENTS (2024)

By Daria Domin and Ryan Wedeking

Introduction

The Social Security Administration (SSA) manages two cash assistance programs for people with disabilities:

1. The Supplemental Security Income (SSI) program for individuals with low incomes who are seniors, blind, or have another disability.
2. The Social Security Disability Insurance (SSDI) program for individuals who have worked and become disabled or, in some cases, are the children of a worker who became disabled or is deceased.

While both programs support people who are found to be too disabled to work, they serve different purposes and have different rules and structures. For both programs, SSA provides incentives designed to support people to work while they receive assistance.

People with intellectual disabilities may receive SSI, SSDI, or both. However, adults with intellectual disabilities most commonly receive SSI. This DataNote Plus will focus on individuals with an intellectual disorder[1] as identified in SSA reporting, who are SSI recipients.

SSA's work incentives for SSI recipients include:

- Plan to Achieve Self-Support (PASS)
- Impairment-Related Work Expenses (IRWE)
- Blind Work Expenses (BWE)
- Section 1619(a) benefits
- Section 1619(b) benefits

PASS, IRWE, and BWE allow people to set aside money, resources, and expenses to be excluded from total earned income calculations. This means that people who receive SSI can still earn and save money without losing their benefits. Learn more about these work incentives in Table 2.

Here are five key findings from our SSA dataset analysis:

1. **Employment rates among SSI recipients ages 18–64 have continued to increase since 2020.**
2. **SSI recipients with disabilities do not often participate in work incentive programs.**
3. **SSI recipients with intellectual disorders work at higher rates but use work incentives less, though the gap is narrowing.**
4. **Employment declines with age, while participation in Section 1619(b) increases as people age.**
5. **Employment rates and rankings vary across SSI diagnostic groups and continue to shift over time (2015–2024).**

Methods

These data are from the SSI Annual Statistical Reports from 2004–2024. The SSA reports work incentive participation and the number of people receiving SSI who are working. For this DataNote Plus, we have extracted national data on SSI recipients ages 18–64 and SSI recipients ages 18–64 who work from Table 42 of the report. The number of SSI recipients and the number of SSI recipients who work are estimated using the percent distributions provided for each diagnostic category[2]. We extracted data on the use of work incentives from Tables 52 and 55[3].

Beginning in 2010, the SSI Annual Statistical Report provided more specific details for mental disorders by diagnostic group. Prior to 2010, the mental disorders category was composed of just three disorders. In 2010, SSI expanded its categories, and in 2020, it renamed those expanded categories. Please refer to Table 1 for a list of diagnostic groups.

Table 1. SSI Annual Statistical Report Mental Disorders Diagnostic Groups by Year

2010–2019	2020–2024
Autistic disorders	Autism spectrum disorders
Developmental disorders	Developmental disorders
Childhood and adolescent disorders not elsewhere classified	Childhood and adolescent disorders not elsewhere classified
Intellectual disability	Intellectual disorders
Mood disorders	Depressive, bipolar, and related disorders
Organic mental disorders	Neurocognitive disorders
Schizophrenic and other psychotic disorders	Schizophrenia spectrum and other psychotic disorders
Other mental disorders	Other mental disorders

Table 2. SSI Work Incentive Program Definitions

Program	Definition
Plan for Achieving Self-Support (PASS)	Allows a person with a disability to set aside income or resources to support achieving a specific work goal. They can pay for education, vocational training, assistive technology that is used for employment-related purposes, and starting a business, if the expenses are related to achieving a work goal. Money set aside under a PASS is excluded both as current income and from the SSI resource limits.
Impairment-Related Work Expenses (IRWE)	Allows a person with a disability to exclude the cost of certain impairment-related services or items needed to earn income when determining the beneficiary's current earned income for SSI eligibility and benefits. Examples include attendant care services, transportation costs, service animals, medical devices, medication, and specialized equipment.
Blind Work Expenses (BWE)	Allows workers who are blind to exclude expenses related to earning income when determining their current earned income for SSI eligibility and benefits. These include service animal expenses, transportation to and from work, income taxes, attendant care services, visual/sensory aids, and professional or union dues.
Section 1619(a)	Allows people with disabilities to continue receiving SSI income even if their earned income is at or above Substantial Gainful Activity (SGA) levels (i.e., the amount that would normally make them ineligible for SSI).
Section 1619(b)	Allows people with disabilities to continue receiving Medicaid benefits if their earnings disqualify them from eligibility for SSI cash payments but are not enough to afford medical insurance.

Findings

Changes in Employment Rates for SSI Recipients Ages 18–64 Since 2020

In 2024, the SSA reported that 281,399 blind and disabled SSI recipients ages 18–64 were working, out of a total of 3,951,866 recipients in that age group. This reflects an employment rate of 7.1%. In 2023, 7.5% of SSI recipients ages 18–64 were working (Domin, 2025). In 2020, 275,560 (5.9%) recipients ages 18-64 were reported as working, and in 2021, 281,748 (6.3%) were reported as working (SSI Statistical Annual Report, 2020 & 2021; Domin et al., 2023). While the increase from 2020 to 2023 is small, it represents continued progress since 2020 (Domin et al., 2023).

Other projects have seen similar trends in employment. Data from the National Core Indicators (NCI) also show people returning to work. In 2018–2019, 21.5% of individuals held paid community jobs. This dropped to 14.4% in 2020–2021, then rose slightly to 15.8% in 2021–2022 (NCI, 2019, 2021, 2022). In 2023 and 2024, NCI reported that 17% of individuals held paid community jobs, reflecting continued return to work (NCI, 2023, 2024). That figure remained the same at 17% in 2024–25 (NCI, 2026).

State-level data report similar trends when available. For example, the Massachusetts Department of Developmental Services reported that the number of people receiving supports for individual supported employment declined by 29% between 2019 and 2021, from 2,462 to 1,750. Participation rebounded to 2,321 in 2022 — nearly returning to 2019 levels—and continued to increase in subsequent years, reaching 2,394 in 2024 and 2,401 in 2025 (ICI at the University of Massachusetts Boston, 2024, 2025). Maryland showed a similar trend. In fall 2019, 23% of people served by the Developmental Disabilities Administration held integrated jobs. This share dropped to 15% in 2020, but began to recover in 2021, reaching 21%. By spring 2026, it had slightly surpassed 2019 levels at 24% (Maryland Developmental Disabilities Administration, 2026).

SSI Recipients with Disabilities Do Not Often Participate in Work Incentive Programs

Although the percentage of SSI recipients who are employed has increased slightly, enrollment in work incentive programs continues to decline. As shown in Table 3, national participation in these programs has remained low and has steadily decreased between 2004 and 2024. PASS participation fell most sharply, with enrollments dropping nearly eight-fold (from 1,598 in 2004 to 204 in 2024). During the same period, BWE enrollment declined more than six-fold (from 2,827 to 463), and IRWE participation decreased more than four-fold (from 6,874 to 1,508).

Table 3. Number of SSI Recipients Enrolled Nationally in Work Incentive Programs, 2003–2023[4].

	2004	2006	2008	2010	2012	2014	2016	2018	2020	2022	2024
PASS	1,598	1,583	1,559	1,393	1,116	862	692	568	401	270	204
IRWE	6,874	5,650	4,572	3,491	3,157	3,040	3,128	2,942	2,191	1,831	1,508
BWE	2,827	2,370	1,925	1,847	1,410	1,145	1,068	955	653	568	463

Table 4. Employment Outcomes and Participation in Work Incentives for SSI Recipients with Disabilities Ages 18–64, 2020–2024

		Intellectual Disorder	All Other Disabilities
	Year	Percentage	
Percentage of SSI recipients with disabilities who work	2020	10.4%	5.0%
	2021	10.5%	5.5%
	2022	11.2%	6.4%
	2023	11.4%	6.6%
	2024	10.6%	6.3%
Percentage of working SSI recipients who participate in 1619(a)	2020	3.1%	4.3%
	2021	3.7%	4.9%
	2022	3.8%	4.7%
	2023	3.5%	4.2%
	2024	3.5%	4.1%
Percentage of working SSI recipients who participate in 1619(b)	2020	23.7%	36%
	2021	25.3%	37%
	2022	27.1%	38.1%
	2023	28.2%	38.9%
	2024	31.2%	40.9%
Percentage of working SSI recipients who participate in IRWE	2020	0.8%	0.8%
	2021	0.6%	0.7%
	2022	0.6%	0.6%
	2023	0.6%	0.6%
	2024	0.5%	0.5%

SSI Recipients with Intellectual Disorders Work at Higher Rates But Use Work Incentives Less, Though the Gap is Narrowing

In 2024, nearly one-fifth (19.7%) of SSI recipients with disabilities ages 18–64 were people with intellectual disorders, same as in 2023. Of the 778,518 total SSI recipients with intellectual disorders , 82,450 (10.6%) were employed, a decrease from 11.4% in 2023.

As shown in Table 4, SSI recipients with intellectual disorders worked at a rate of 10.6% in 2024—1.7 times higher than recipients with other disabilities (6.3%). Since 2020, employment participation has risen by one percentage point for recipients with intellectual disorders and by 1.6 percentage points for those with other disabilities. During this period, the employment gap between the two groups has narrowed from 5.4% to 4.8%.

From 2020 to 2024, SSI recipients with intellectual disorders consistently had higher employment rates than people with other disabilities. Employment among people with intellectual disorders increased from 10.4% in 2020 to a peak of 11.4% in 2023, before declining slightly to 10.6% in 2024. For people with other disabilities, employment rates steadily rose from 5.0% in 2020 to 6.6% in 2023, followed by a small decrease to 6.3% in 2024. Overall, both groups showed gradual employment growth through 2023 and a modest decline in 2024, while people with intellectual disorders remained employed at notably higher rates throughout the period.

Despite higher employment rates, Table 4 shows that SSI recipients with intellectual disorders continue to participate in the 1619(a) and 1619(b) work incentive programs at lower rates than recipients with other disabilities. From 2020–2024, SSI recipients with other disabilities who

work consistently participated in 1619(a) at higher rates than those with intellectual disorders. Among recipients with intellectual disorders, participation increased from 3.1% in 2020 to 3.8% in 2022, then declined slightly and stabilized at 3.5% in both 2023 and 2024. For people with other disabilities, participation rose from 4.3% in 2020 to a peak of 4.9% in 2021, before gradually decreasing to 4.1% in 2024. Overall, both groups experienced modest fluctuations over the period, with participation peaking earlier in the decade and tapering slightly by 2024.

From 2020–2024, participation in 1619(b) increased steadily for both groups of working SSI recipients. Recipients with other disabilities consistently had higher participation rates than those with ID throughout the period. Among people with intellectual disorders, participation rose from 23.7% in 2020 to 31.2% in 2024, reflecting strong and continuous growth over the five years. For people with other disabilities, participation increased from 36.0% in 2020 to 40.9% in 2024. Growth was more gradual compared to the intellectual disorders group, but rates remained consistently higher overall. Overall, both groups showed upward trends in 1619(b) participation, with the gap between the two groups narrowing slightly over time as participation among people with intellectual disorders grew more rapidly. Over the same period, IRWE participation declined for both groups.

Several factors could explain differences in 1619(a) and 1619(b) participation. Analysis of other data sources, (e.g., the RSA-911), has shown that people with intellectual disabilities[5] often work fewer hours and earn less than people from other disability subgroups. Using the most recent RSA-911 data available, in fiscal year 2025, people with intellectual disabilities worked an average of 21.5 hours per week while people with other disabilities worked an average of 30.5 hours per week. Data from 2025 also show that people with intellectual disabilities earned $316.79 per week, and people with other disabilities earned $641 per week (Rehabilitation Services Administration Data [RSA-911], 2025). As a result, people with intellectual disabilities who work are less likely to have earnings close to substantial gainful activity (SGA). More research is needed on why people with intellectual disabilities intellectual disorders do not obtain earnings close to SGA, including research on their awareness of 1619 (a) and 1619 (b).

The low rates of participation in work incentive programs by SSI recipients with intellectual disorders should not overshadow the overall impact of these programs. For instance, in 2024, Section 1619(b) benefits allowed 25,688 people with intellectual disorders to work and to continue receiving Medicaid healthcare benefits. Researchers have hypothesized that if employment and disability services professionals provide better explanations of incentives it may encourage more participation in incentive programs, resulting in better employment outcomes for people receiving SSI. While research on how people with intellectual disorders view work incentives is scarce, the benefits of working outweigh the alternative of not working (Shapiro et al., 2016). More recent studies found that work incentives benefits counseling (WIBC) is associated with improved employment outcomes. Among vocational rehabilitation clients receiving SSI and/or SSDI, those who received WIBC had employment rates that were 4.9% higher than those who did not receive counseling, after controlling for other factors (Kaya, 2023).

In analyzing the National Beneficiary Survey data, Baker et al. (2023) found that the SSI beneficiaries most likely to work successfully:

- were under age 40
- could still do their previous jobs
- felt their health didn't limit them
- knew they could keep Medicare or Medicaid even if their SSI cash benefits ended due to higher earnings

If more people knew they could use incentives to continue their medical benefits even when their earnings exceed the SGA level, they may feel more encouraged to work.

Employment Declines with Age, While Section 1619(b) Participation Increases

In 2024, approximately 4.1 million blind and disabled adults ages 18–64 received SSI benefits[6], and 6.9% were employed. Of those who worked, 107,035 were enrolled in 1619(b) (Table 43 of the SSI Statistical Annual Report, 2024). Employment varied substantially by age. Adults ages 40–64 represented nearly 61% of all SSI recipients, yet only 3.9% were working, compared to 11.8% of recipients ages 18–39.

Among employed recipients, however, older adults were more likely to participate in the Section 1619(b) work incentive. Approximately 43% of employed recipients ages 40–64 participated in Section 1619(b), compared to 35% of employed recipients ages 18–39. Participation in Section 1619(b) increased with age among younger adults, from 19% of employed recipients ages 18–21 to 41% among those ages 30–39, and was highest among recipients ages 60–64 (44%). Although employment rates decline with age, older SSI recipients who work continue to rely on Section 1619(b) at higher rates than younger workers. The reasons for this pattern remain unclear and warrant further research.

Shifting Employment Rates and Rankings Across SSI Diagnostic Groups (2015–2024)

We conducted a trend analysis to explore the rate of employment among SSI recipients ages 18–64 from the mental disorders diagnostic group by the following subcategories: intellectual disorders, developmental disorders, and autism spectrum disorders. In addition, we grouped depressive, bipolar, and related disorders (formerly mood disorders); neurocognitive disorders (formerly organic mental disorders); and schizophrenia spectrum and other psychotic disorders together to represent mental health disorders to view trends going back to 2015 and compare the pattern to SSI recipients with intellectual disorders. As part of the application for benefits, an applicant submits medical evidence from physicians, psychologists, hospitals, and other providers. A state disability determination services (DDS) examiner, together with a medical or psychological consultant, reviews the evidence. During the disability determination process, SSA assigns: a primary diagnosis; optionally, a secondary diagnosis; an impairment code; and a broader diagnostic group. To reference the findings, please view Table 5.

In 2020, SSI recipients with intellectual disorders had the fourth-highest employment rate among all diagnostic groups, behind recipients with autism, congenital anomalies, and developmental disorders. In 2021 and 2022, their ranking dropped to fifth, trailing recipients with autism, childhood and adolescent disorders not elsewhere classified, developmental disorders, and congenital anomalies. By 2023, SSI recipients with intellectual disorders rose back to fourth, narrowly surpassing those with congenital anomalies (see Table 42 of the SSA report) but then dropped down to fifth after diseases of the blood and blood-forming organs.

Intellectual Disorders: Since 2015, employment rates among SSI recipients with intellectual disorders have fluctuated. Rates remained relatively stable from 2015– 2019 before declining by more than two percentage points to 10.4% in 2020. A modest rebound began in 2021, with continued increases in 2022 and 2023. However, the employment rate declined by 0.8 percentage points in 2024.

Developmental Disorders: Employment among SSI recipients with developmental disorders peaked at nearly 14% in 2019 before declining to 11.4% in 2020. From 2020 to 2021, this group experienced the strongest rebound of the four diagnostic groups. Employment rates continued to increase in 2022 and 2023, reaching a peak of nearly 16% in 2023 and the highest employment rate among the four groups. However, the rate declined in 2024.

Autism Spectrum Disorders: Employment among SSI recipients with autism spectrum disorders remained relatively stable from 2015–2019 before declining by nearly four percentage points in 2020. Rates increased modestly in 2021 and 2022 but declined in both 2023 and 2024, reaching 13.0% in 2024.

Mental Health Disorders: Employment rates among SSI recipients with mental health disorders were consistently lower than those of the other diagnostic groups but increased steadily from 3.7% in 2015 to 6.1% in 2023. This group experienced only a modest decline in 2020 and surpassed pre-pandemic employment levels by 2021. The employment rate declined slightly to 5.6% in 2024. In 2024, employment among SSI recipients with mental health disorders (5.6%) was roughly 40–60% lower than rates among other diagnostic groups in Table 5.

Table 5. Percent of SSI Recipients and Rate of Employment Among SSI Recipients by Diagnostic Group, 2015–2024

Diagnostic Groups	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024
Intellectual disorders	12.6%	12.6%	12.4%	12.6%	12.5%	10.4%	10.5%	11.2%	11.4%	10.6%
Developmental disorders	10.4%	12.4%	13.5%	13.8%	13.9%	11.4%	12.3%	14.6%	15.8%	14.2%
Autism spectrum disorders	18.6%	18.5%	17.6%	17.5%	17.3%	13.5%	13.6%	15.0%	14.3%	13.0%
Mental health disorders	3.7%	4.0%	4.3%	4.6%	4.8%	4.4%	5.0%	5.8%	6.1%	5.6%

Endnotes

[1] Prior to 2020, **intellectual disorder** was labelled **intellectual disability** in SSA reporting.

[2] The numbers reported in this DataNote Plus differ from the number of recipients and number working reported in Table 41 and on Statedata.info because they emphasize working age adults ages 18–64.

[3] Table 55 includes data on recipients who work but does not specify an age range. In contrast, Tables 42 and 52 specify an age range of 18–64.

[4] Includes data from SSA Annual Statistical Reports data Table 55 (2004–2024).

[5] The RSA-911 dataset uses the term intellectual disability.

[6] Age-specific data are available only in Table 43 of the *SSI Annual Statistical Report, titled All Blind and Disabled Recipients, Those Who Work, and Section 1619(b) Participants Aged 18-64.* Unlike the findings presented elsewhere in this Data Note, Table 43 includes Section 1619(b)

References

Baker, A., Livermore, G., & Drury, J. (2023, September). *Social Security disability beneficiaries who earn above the substantial gainful activity level* (Disability Data Brief). Mathematica, Rehabilitation Research & Training Center on Statistics and Demographics.

Domin, D. (2025). *Social Security Administration data: Employment trends and work incentive participation among SSI recipients* (2023). DataNote Series, DataNote Plus 104. ICI at the University of Massachusetts Boston.

Domin, D., Butterworth, J., Winsor, J., Wedeking, R (2023). *Social Security Administration 2000–2021.* DataNote Series, DataNote Plus 84. ICI at the University of Massachusetts Boston.

ICI at the University of Massachusetts Boston. (2024). *2024 statewide employment snapshot: Massachusetts Department of Developmental Services.* https://statedata.thinkwork.org/massachusetts/snapshot_2024_D1.pdf

Iwanaga, K., Wehman, P., Brooke, V., Avellone, L., & Taylor, J. (2021). Evaluating the effect of work incentives benefits counseling on employment outcomes of transition-age and young adult supplemental security income recipients with intellectual disabilities: A case control study. *Journal of Occupational Rehabilitation, 31,* 581–591. https://doi.org/10.1007/s10926-020-09950-7

Kaya, C., Bishop, M. & Torres, A. (2023). The impact of work Incentives benefits counseling on employment outcomes: A national vocational rehabilitation study. *Journal of Occupational Rehabilitation. 33,* 538–549 https://doi.org/10.1007/s10926-022-10092-1

Mann, D. R., Mamun, A., & Hemmeter, J. (2015). Employment, earnings, and primary impairments among beneficiaries of Social Security disability programs. *Social Security Bulletin, 75*(2), 19–40.

Maryland Developmental Disabilities Administration Employment Outcome Information System. (2026). https://www.thinkwork.org/maryland-data

Migliore, A., Wedeking, R., & Winsor, J. (2025). *Vocational rehabilitation services and outcomes of people with intellectual disabilities: 2015–2024.* DataNote Series, DataNote 102. ICI at the University of Massachusetts Boston.

National Core Indicators (2019). *2018–19 in-person survey national report: Work.* https://idd.nationalcoreindicators.org/wp-content/uploads/2022/06/Employment_4_16.pdf

National Core Indicators (2021). *2020–21 national in-person survey report: Employment.* https://idd.nationalcoreindicators.org/wp-content/uploads/2022/06/IPS_2020-21__4_Employment.pdf

National Core Indicators (2022). *2021–22 in-person survey (IPS) national report: Employment.* https://idd.nationalcoreindicators.org/wp-content/uploads/2023/05/IPS-21-22-Employment_FINAL.pdf

National Core Indicators (2023). *2022–23 in-person survey (IPS) national report: Employment.* https://idd.nationalcoreindicators.org/wp-content/uploads/2024/06/IPS-22-23-Ch02-Employment_FINAL.pdf

National Core Indicators (2024). *2023–24 in-person survey (IPS) national report: Employment.* https://idd.nationalcoreindicators.org/wp-content/uploads/2025/06/IPS-23-24-Ch02-Employment_FINAL.pdf

National Core Indicators (2026). *2024-25 in-person survey (IPS) national report: Employment.* https://idd.nationalcoreindicators.org/wp-content/uploads/2026/05/IPS-24-25-02-Employment.pdf

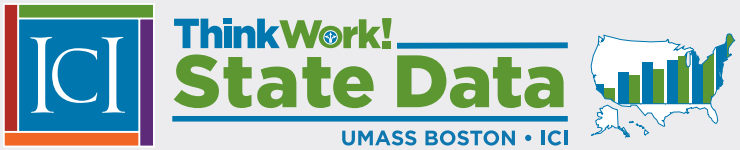
Rehabilitation Services Administration Data (RSA-911): VR Closures: Intellectual Disabilities in U.S. Total during years: 2023, 2024, 2025: https://www.thinkwork.org/statedata/chart-builder

Rehabilitation Services Administration Data (RSA-911): VR Closures: All disabilities in U.S. Total during years: 2023, 2024, 2025: https://www.thinkwork.org/statedata/chart-builder

Shapiro, I., Greenstein, R., Trisi, D., & Dasilva, B. (2016, March). *It pays to work: Work incentives and the safety net. Center on Budget and Policy Priorities.* http://www.cbpp.org/research/federal-tax/it-pays-to-work-work-incentives-and-the-safety-net

Social Security Administration. (2004–2024). *SSI annual statistical reports:* 2004, 2005, 2006, 2007, 2008, 2009, 2010, 2011, 2012, 2013, 2014, 2015, 2016, 2017, 2018, 2019, 2020, 2021, 2022, 2023, 2024. https://www.ssa.gov/policy/docs/statcomps/ssi_asr/

Wedeking, R. & Domin, D. (2024). *Social Security Administration 2000–2022.* DataNote Series, DataNote Plus 92. ICI at the University of Massachusetts Boston.



Funding

This Data Note is a product of ThinkWork!, housed within the ICI at the University of Massachusetts Boston, supported in part by the Administration on Disabilities, Administration for Community Living, US Department of Health and Human Services, under cooperative agreement #90DNPA0002. The opinions contained in this report are those of the grantee and do not necessarily reflect those of the funders.

Data Source

Social Security Administration, Office of Retirement and Disability Policy, Office of Research, Evaluation, and Statistics: SSI Annual Statistical Reports, 2004-2024.

Suggested Citation

Domin, D. & Wedeking, R. (2026). Social Security Administration Data: Employment Trends and Work Incentive Participation Among SSI Recipients (2024). Data Note Series, DataNote Plus 112. ICI at the University of Massachusetts Boston.