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Subseries: Grants

OA/ID Number: 52087
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Folder Title:
[Cornell Disability Research Institute] [1999]

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Page 1 of 1

Collection:

Record Group: Donated Historical Materials

Office:

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WHORM Cat.:

File Location: [Cornell Disability Research Institute] [1999]

Pinksheet Number: MB10691

OA/ID Number: 52087-008

Date Closed: 8/16/2016

FOIA/Sys Case #: 2016-2624-S

Re-review Case #:

P-2/P-5 Review Case #:



December 16, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Liberty Mutual Group

Research Center for Safety & Health
71 Frankland Road
Hopkinton, MA 01748
Phone (508) 435-9061
Fax (508) 435-8136

Dear Dr. Burkhauser:

As Director of the Liberty Mutual Center for Disability Research, and an active member of the University of Massachusetts Dept. of Family Medicine and Community Health, and the University of Massachusetts Center for Health Policy and Research, I am pleased to offer our participation in the Cornell/University of Massachusetts proposal to the Social Security Administration for a Disability Research Institute. Your proposal has brought together a distinguished team of researchers with unusual breadth of experience, representing a wide range of disciplines, that will provide a new, valuable perspective to the understanding trends and opportunities in disability in the US. The proposed projects are thoughtful, relevant, and reasonable in scope, and should yield substantial, significant insights.

There are a number of excellent potential areas for collaboration between the UMASS/Cornell consortium and the Liberty Mutual Center for Disability Research in this project. Liberty is interested in Social Security Disability Insurance, as those workers' compensation claimants who transition to SSI have extremely low rates of ever returning to work. To some extent, these individuals may represent a sub-population that is most amenable to rehabilitation, as they have an established history of prior employment, and often have conditions that are appropriate for rehabilitation. At this point, there is very little information on the extent to which chronic cases in workers' compensation transition to SSI and the potential impact of rehabilitation or disability prevention on these transitions.

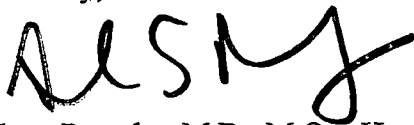
Effective approaches to disability prevention will require new methods to identify those individuals at highest risk for prolonged disability after the onset of illness. I am looking forward to collaborating with Dr. Sweet in a proposed project to use Massachusetts State data to develop predictive models, and hope that we can perform a complementary study on workers compensation data for low back pain, as described in the attached proposal. As SSA data becomes available to the Disability Evaluation Service, we may have an opportunity to link to a sample of workers compensation cases, and thus gain new insights into those factors most closely related to chronicity and prolonged disability.

Data from the National Health Interview Study, and other cross-sectional population-based investigations have demonstrated that, for a given medical condition and severity, there is a wide range of disability outcomes. Thus, understanding those factors that enable some persons with severe disability to maintain gainful employment is critical to formulation of an effective policy for primary and secondary disability prevention. It has

been postulated that accommodations at the workplace play a critical role in determining disability outcomes especially in the context of more severe medical conditions. Investigations that incorporate workers' compensation data present ideal opportunities for identifying and studying effective accommodations, as workers' compensation databases contain administrative records that imply the presence of an accommodation, in the form of partial disability payments records, and case files that indicate ongoing need for medical care, but resolution of work absence. In collaboration with the proposed DRI, we would like to further examine these data, enabling us to provide new information on the personal, workplace, condition, and job characteristics associated with effective accommodations. Outcomes of interest include not only initial return to work, but safe and sustained gainful employment.

Our previous, extensive experience with outcomes research and database-linked activities at the LMRC will provide an ideal opportunity for trainees involved in the proposed Center. Because there is a long and productive track record of collaboration between the Liberty Mutual Center for Disability Research and the UMass Center for Health Policy and Health Services Research, I am sure that further, productive working relationships will continue to evolve.

Sincerely,

A handwritten signature in black ink, appearing to read 'Glenn Pransky', written in a cursive style.

Glenn Pransky, M.D., M.Occ.H
Director, Liberty Mutual Center for Disability Research

GP/jat

Encl: proposals

c. Tom Leamon, PhD, Liberty Mutual Research Center



Liberty Mutual Group

Research Center for Safety & Health
71 Frankland Road
Hopkinton, MA 01748
Phone (508) 435-9061
Fax (508) 435-8136

December 21, 1999

Dr. Jay Himmelstein, MD, MPH, Director,
Center for Health Policy and Research
University of Massachusetts Medical School
220 East Maple Street
Shrewsbury, MA 01545

Dear Dr. Himmelstein:

As Director of the Liberty Mutual Center for Disability Research, and an active member of the University of Massachusetts Dept. of Family Medicine and Community Health, and the University of Massachusetts Center for Health Policy and Research, I am pleased to offer our participation in the Cornell/University of Massachusetts proposal to the Social Security Administration for a Disability Research Institute. Your proposal has brought together a distinguished team of researchers with unusual breadth of experience, representing a wide range of disciplines, that will provide a new, valuable perspective to the understanding trends and opportunities in disability in the US. The proposed projects are thoughtful, relevant, and reasonable in scope, and should yield substantial, significant insights.

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Data from the National Health Interview Study, and other cross-sectional population-based investigations have demonstrated that, for a given medical condition and severity, there is a wide range of disability outcomes. Thus, understanding those factors that enable some persons with severe disability to maintain gainful employment is critical to formulation of an effective policy for primary and secondary disability prevention. It has been postulated that accommodations at the workplace play a critical role in determining disability outcomes especially in the context of more severe medical conditions.

Investigations that incorporate workers' compensation data present ideal opportunities for identifying and studying effective accommodations, as workers' compensation databases contain administrative records that imply the presence of an accommodation, in the form of partial disability payments records, and case files that indicate ongoing need for medical care, but resolution of work absence. In collaboration with the proposed DRI, we would like to further examine these data, enabling us to provide new information on the personal, workplace, condition, and job characteristics associated with effective accommodations. Outcomes of interest include not only initial return to work, but safe and sustained gainful employment.

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Sincerely,



Glenn Pransky, M.D., M.Occ.H.
Director, Liberty Mutual Center for Disability Research

GP/jat

Encl: proposals

c. Tom Leamon, PhD, Liberty Mutual Research Center

MATHEMATICA
Policy Research, Inc.

Walter S. Corson
Vice President

P.O. Box 2393
Princeton, NJ 08543-2393
Telephone (609) 799-3535
Fax (609) 799-0005
www.mathematica-mpr.com

December 23, 1999

Professor Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

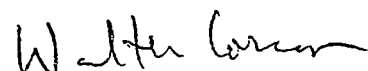
Mathematica Policy Research (MPR) is pleased to participate in the consortium that Cornell University is proposing in response to the Social Security Administration's request for applications to create a Disability Research Institute.

MPR will participate in the research components of your proposed Consortium. We expect to develop research projects for possible funding after the first year. These projects will draw on our extensive experience regarding employment support programs for people with disabilities and on our expertise in the areas of health, welfare, and education policy. Given our experience using SSA administrative data files, we can also help you and others use this rich source of information. We will also be pleased to assist in the general operation of the consortium by participating on review panels, conducting short turn-around evaluations, and contributing to your planned conferences and web page. Finally, we are bidding a small team of researchers to be consortium investigators, but we would be glad to bring in other MPR staff and resources in order to help the Consortium.

MPR has been conducting research in the field of disability policy for more than 20 years. Most recently, we have been working on SSA-funded projects to develop a survey for disabled children and to evaluate the 18 State Projects funded under SSA's State Partnership Initiative. Disability issues also arise in our studies of welfare reform, particularly with respect to those individuals who are remaining on the rolls due to ill health or disability, and in our studies of the use of managed care in Medicaid and Medicare.

Thank you for inviting us to participate. We look forward to the opportunity to work with you and the other Consortium members in the future.

Sincerely,





December 17, 1999

Richard Burkhauser, Ph.D.
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

The MEDSTAT Group is pleased to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. MEDSTAT brings to the consortium a solid core of health care researchers with expertise in evaluating the health, income support, and long term care needs of persons receiving SSI and/or SSDI cash assistance. In addition, MEDSTAT provides access to a unique portfolio of data assets that can be used to augment information available on SSA administrative data sets for these populations.

MEDSTAT's interest in participating as a member of the consortium is primarily in regard to conducting stand-alone research projects and short turn-around policy/program analyses and evaluations for the Social Security Administration. We anticipate that SSA will have a strong interest in the unique kinds of policy and program analyses that could be conducted by merging SSA administrative data sets with MEDSTAT's health care data assets in the private insurance and Medicaid markets.

MEDSTAT staff would also be interested in participating in collaborative activities of the Disability Research Institute, such as planning research agendas, planning and sponsoring conferences or expert forums on topics of acute policy interest, and writing papers for the Institute's working paper series.

We thank you for including MEDSTAT as a member of the DRI consortium and look forward to working with you and the Social Security Administration on these important policy issues in the coming years.

Sincerely,

A handwritten signature in dark ink, appearing to read "William D. Marder".

William D. Marder, Ph.D.
Vice President and General Manager

Enclosures

MICHIGAN STATE UNIVERSITY

DEPARTMENT OF ECONOMICS · MARSHALL HALL
Jeff E. Biddle
Professor of Economics

EAST LANSING · MICHIGAN 48824-1038
Phone: 517-353-7862
Fax: 517-432-1068
e-mail: biddle@pilot.msu.edu

December 13, 1999

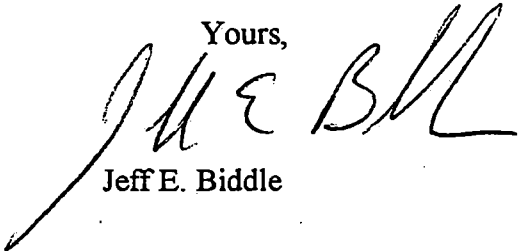
Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Prof. Burkhauser:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate. I am particularly excited by the prospect of gaining access to SSA data. My current research involves estimating the long term labor market consequences of workplace injuries and disabilities. In the past, I have made use of state Unemployment Insurance earnings data for this task, but such data are deficient in that they do not record the age and sex of the worker, and do not allow the tracking of earnings of workers who migrate across state lines. SSA earnings data would not suffer from these problems.

I expect my own future research to focus increasingly on explaining variation in the extent of economic losses associated with disability, whether due to worker characteristics, program parameters, or labor market conditions, and anticipate pursuing funding for such research through the institute. I also look forward to taking advantage of the opportunities the Institute will offer participants for keeping abreast of disability-related research, through such activities as reviewing research proposals and participating in Institute sponsored conferences.

Yours,



Jeff E. Biddle

Joshua Angrist
Professor of Economics



Department of Economics
MIT, E52-353
50 Memorial Drive
Cambridge, MA 02142-1347

DEC 01 1999

PAM CHAN

November 29, 1999

Professor Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Rich:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate.

I believe that I can make contributions to the DRI through new research using restricted SSA data. As you may know, I have used this sort of data to study the effects of military service on the civilian labor market in a number of projects. This research gave me considerable experience with SSA data, and a keen sense of the truly exceptional value of SSA's data resources for social science research. Unfortunately, use of these data has traditionally involved burdensome confidentiality review and disclosure restrictions that had a major impact on the speed and scope of my analyses. Although I recognize the need for such procedures, I would welcome any innovation, such as a partnership with John Abowd's CISER, that will streamline data access.

It requires no special effort for me to sketch a research agenda that would make use of the proposed facility. Recently, I became interested in disability issues through a project on the labor market consequences of the Americans with Disabilities Act. In future work, I would like to use SSA data to study the labor market experiences of mentally retarded people. The experiences of this group are of immediate policy interest since they account for a large fraction of SSI recipients. A study of this sort would also be of broader scientific interest, since labor economists are intensely concerned with the possible negative labor-market consequences of skill-biased technical change for low-IQ individuals. Another issue of interest to me in this context is the question of whether federally-funded rehabilitation and support programs for the mentally handicapped are effective. Study of this question would allow me to combine my substantive interest in mental disability with my long-standing interest in program evaluation methodology. Finally, if it turns out to be possible to use DRI data resources for an outside-funded project, I would hope to use these resources for a project submitted to the Veterans Administration on the labor market experiences of Gulf War veterans.

My work for the center would undoubtedly involve a large number of MIT Ph.D. students, as do all my other research projects. One attraction of involvement with the center is the possibility of generating ideas for thesis projects related to the work of the Center, and additional funding for my students.

To sum up, I am very excited by the prospect of being part of the Cornell DRI team.

Sincerely,

A handwritten signature in black ink, which appears to read "Josh Angrist", is written over a horizontal line. The signature is stylized and fluid.

Josh Angrist

December 23, 1999

Richard Burkhauser, PhD
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Richard:

We are pleased to participate in the consortium that Cornell University is proposing in response to SSA's RFA to establish a Disability Research Institute.

The NRH Center for Health & Disability Research (NRH-CHDR) is a clinical and policy research center that focuses on issues at the intersection of American health and disability policy. Established 14 years ago, the center conducts a wide variety of research activities related to the manner in which American health and income policies affect individuals with disabilities. We are currently the home to the Research and Training Center on Managed Care and Disability. We believe that access to health care is a material issue in the income assistance and employment decisions that individuals make.

We look forward to participating with DRI in a number of different ways. First, we seek access to the DRI data archive to help us answer questions related to issues of health and income support. Second, CHDR welcomes the proposed participation of DRI interns and graduate students. Our center has been laboratory to graduate students and has offered research fellowships and research support to masters and doctoral level students. Third, CHDR welcomes the opportunity to work with DRI in shaping the national research agenda in this area, in reviewing research products resulting from the proposed Institute's work, and providing expert advice to DRI project staff. Fourth, our center looks forward to collaborating on research projects of mutual interests. And fifth, we welcome the opportunity to help facilitate dissemination of the Institute's work through conferences, publications, and the Web.

Thank you again for inviting us to participate. We look forward to working with you.

Sincerely,



Gerben DeJong, PhD
Director

cc: Tammie Martin
David Stapleton, PhD

Mailing Address
102 Irving Street, NW
Washington, DC 20010-2949

Street Address
1016 16th Street, N.W.
Fourth Floor
Washington D.C. 20036
(202)466-1900

Fax (202) 466-1911

The NRH Research Center is a division of
the Medlantic Research Institute

RAND

December 9, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

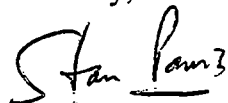
Dear Richard:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate.

My research agenda centers around health and financial security of the elderly. My interest is therefore primarily in conducting disability-related research through the DRI.

Let me know if I can be of further assistance. I look forward to working with you.

Sincerely,

A handwritten signature in black ink, appearing to read "Stan Panis", with a stylized flourish at the end.

Constantijn Panis



20 December 1999

Dr. Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

Thank you for inviting RAND to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. We are very pleased to participate.

RAND researchers have expressed interest in participating in the proposed Disability Research Institute at all levels. We intend to submit research proposals for consideration by SSA. We will also participate in various Institute activities as needed, including assisting in the research agenda planning, reviewing proposals or papers, and consulting on projects. We will also propose research to other agencies that is complementary to Institute projects, and in particular projects that will use the restricted access data center. We will participate in Institute conferences and in the working paper series. Through the RAND Graduate School, we are likely to seek doctoral research grants for Public Policy dissertation research.

Sincerely,

A handwritten signature in dark ink, appearing to read "Rob Reville". The signature is fluid and cursive, with the first name "Rob" and last name "Reville" clearly distinguishable.

Robert Reville
Director of Research

RR/jn

Enclosures

STATE OF CALIFORNIA

GRAY DAVIS, Governor

DEPARTMENT OF INDUSTRIAL RELATIONS
COMMISSION ON HEALTH AND SAFETY
AND WORKERS' COMPENSATION
455 Golden Gate Avenue, 10th Floor
San Francisco, CA 94102
Telephone (415) 703-4220
Fax: (415) 703-4234



January 5, 2000

Robert T. Reville, PhD
RAND
1700 Main Street
PO Box 2138
Santa Monica, CA 90407-2138

Dear Dr. Reville:

Thank you for informing us about RAND's participation in a consortium led by Cornell University to propose a center to conduct research on disability for the Social Security Administration.

The California Commission for Health and Safety and Workers' Compensation (CHSWC) supports the proposed link of data from the California Department of Industrial Relations and Employment Development Department data to SSA data. Since this ties to our ongoing study of permanent disability, CHSWC will pay the data processing costs incurred for our research purposes by selected California agencies.

In addition, given mutual interest in policies to reduce disability and to improve the economic circumstances of individuals with disabilities, CHSWC supports the proposed research project by RAND and hopes that other mutually beneficial projects can be funded by both agencies.

Sincerely,

A handwritten signature in cursive script that reads "Christine Baker".

Christine Baker
Executive Officer

cc: Commission members
Stephen J. Smith, DIR Director
Suzanne Marria, DIR Assistant Director



State of California



Gray Davis, Governor

Michael Bernick, Director

January 10, 2000

Robert T. Reville, PhD
RAND
1700 Main Street
P.O. Box 2138
Santa Monica, CA 90407-2138

Dear Dr. Reville:

We have been informed by Christine Baker, the Executive Director of the Commission for Health and Safety and Workers' Compensation (CHSWC), that RAND is participating in a consortium led by Cornell University to propose a center to conduct research on disability for the Social Security Administration (SSA). The center will include the ability to link SSA data to other data sources. RAND is proposing to link California Department of Industrial Relations and Employment Development Department data to SSA data.

The State of California regards the research that RAND is conducting for CHSWC as a critical component for workers' compensation policy in the future. We understand that extensions of this research for the State of California, and the proposed project by RAND for the Social Security Administration, require linking California data to data from the Social Security Administration. We support the plans to link these databases and, subject to negotiation of adequate arrangements to ensure confidentiality, will cooperate in the plans for creation of the linked database.

Sincerely,

MICHAEL S. BERNICK
Director



STATE OF CALIFORNIA

GRAY DAVIS, Governor

DEPARTMENT OF INDUSTRIAL RELATIONS

Office of the Director

455 Golden Gate Avenue, 10th Floor

San Francisco, CA 94102

Tel: (415) 703-5050 Fax: (415) 703-5059/8

MAILING ADDRESS:

P. O. Box 420603

San Francisco, CA 94142-0603



December 22, 1999

Robert T. Reville, PhD
RAND
1700 Main Street
PO Box 2138
Santa Monica, CA 90407-2138

Dear Dr. Reville:

We have been informed by Christine Baker, the Executive Director of the Commission for Health and Safety and Workers' Compensation (CHSWC), that RAND is participating in a consortium led by Cornell University to propose a center to conduct research on disability for the Social Security Administration (SSA). The center will include the ability to link SSA data to other data sources. RAND is proposing to link California Department of Industrial Relations and Employment Development Department data to SSA data.

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DIR found that RAND was particularly successful at maintaining confidentiality of records, based on their long history of experience handling and analyzing US security and defense data and information. In addition, RAND met the requirements of data security and confidentiality as detailed in Memorandums of Understanding and contracts with EDD. I expect that RAND will make similar provisions and negotiate similar terms with respect to California EDD and federal SSA confidentiality requirements.

Sincerely,

A handwritten signature in cursive script that reads 'Stephen J. Smith'.

Stephen J. Smith
Director



SYRACUSE UNIVERSITY

MAXWELL SCHOOL OF CITIZENSHIP AND PUBLIC AFFAIRS
CENTER FOR POLICY RESEARCH

December 13, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Rich:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate.

I am particularly interested in continuing to develop the research agenda on which you, J.S. Butler, and I are presently working. I hope to develop models of lifetime experience with the DI program, in which the onset and persistence of disability status are endogenous; I also wish to use microsimulation methods to explore the life cycle implications of such models under alternative assumptions and counterfactual programmatic environments. In addition, I look forward to participating in the planned research conferences and the mentoring of graduate students that is envisioned in the DRI.

Sincerely,

Douglas A. Wolf
Gerald B. Cramer Professor
of Aging Studies

DAW/agw



Wellness and Human Services
School of Physical Activity
and Educational Services

283 Arps Hall
1945 North High Street
Columbus, OH 43210-1120
Phone 614-292-8183
FAX 614-292-4255

January 6, 2000

Dr. Susanne Bruyere
Cornell University
School of Industrial and Labor Relations
106 ILR Extension Bldg.
Ithaca, New York 14853-3901

Dear Dr. Bruyere:

This letter is written to confirm my interest in participating in the Cornell University Disability Research Institute operated under the auspices of the Social Security Administration. As a participating researcher, I would be pleased to conduct research on the efficacy and efficiency of the Work Incentives Improvement Act (PL 106-170). This new law is crucial to the continued success of the SSA in providing needed vocational opportunities for its beneficiaries.

In particular, I would like to address the following research question: To identify the characteristics of successful rehab providers, i.e., employment networks, under P.L. 106-170. In particular, this research will explore those characteristics of rehab providers that make them successful in returning beneficiaries to work. Some of the characteristics which will be examined are professional affiliation/orientation, geographical location, size of company/organization, payment schedule chosen, relationship with other specialties, # of yrs in the field, other types of clients currently being served, etc. The overall purpose of this research will be to better describe the type of providers who are successful with beneficiaries of SSA. In this way, potentially successful providers may be actively recruited in the future to participate in the Ticket-to-Work program of service delivery.

I hope this letter helps you appreciate what contributions I can make to your project, and hope that you are successful with your bid. If you need any more information, please don't hesitate to call.

Sincerely,


Bruce S. Growick, Ph.D.
Associate Professor

BSG/dmc

Special Education
292-8148

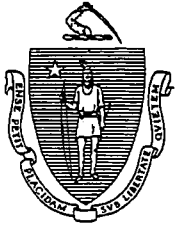
Sport & Exercise Sciences
292-2504

Sections
Wellness & Human Services
292-8183

Workforce Education & Lifelong Learning
292-5037

Disk 17: Dr. Susanne Bruyere

College of Education



The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Massachusetts Rehabilitation Commission

Fort Point Place - Suite 600

27-43 Wormwood Street

Boston, MA 02210-1616

ARGEO PAUL CELLUCCI
GOVERNOR

JANE SWIFT
LIEUTENANT GOVERNOR

WILLIAM D. O'LEARY
SECRETARY

ELMER C. BARTELS
COMMISSIONER

(617) 204-3600
1 (800) 245-6543
Voice/TDD (617) 204-3868
FAX (617) 727-1354

January 6, 2000

Jay Himmelstein MD, MPH
Director, Center for Health Policy and
Health Services Research
UMASS Medical School - Shrewsbury Campus
222 Maple Avenue
Shrewsbury, MA 01545

Dear Dr. Himmelstein:

We at the Rehabilitation Commission, are pleased to write to you in support of your Grant Proposal to the Social Security Administration to be a SSA Disability Research Institute. One of my long held opinions is that the SSA needs to do a much better job in analyzing the Social Security Programs and their relationship to other federally funded initiatives: especially the Public Vocational Rehabilitation program.

In your grant proposal, you are proposing to review the employment service options for persons with severe mental illness as served by both the non-profit providers and by the State Rehabilitation Commission and the Department of Mental Health. You are also proposing, a project relative to the use by the severely mentally ill of Public Vocational Rehabilitation. Both of these projects would be of interest to us.

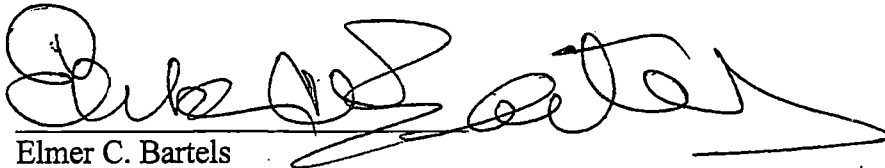
Of even more interest, would be the development of a cost benefit study of the effectiveness of Public Vocational Rehabilitation for Social Security disability recipients. Using available Public Vocational Rehabilitation Data, Social Security Data, and Internal Revenue service data for this purpose is now a distinct possibility. The Public Vocational Rehabilitation Program has a long history of assisting people on Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) in obtaining gainful employment. Up to this point in time, there has been no national effort to document this effectiveness by using available data within the federal domain.



In providing our support for your Institute and our involvement with it, we would, of course need to assure the confidentiality of clients being served by the Rehabilitation Commission.

Thank you for the opportunity to work with you in this important project proposal.

Sincerely yours,

A handwritten signature in black ink, appearing to read 'Elmer C. Bartels', with a long horizontal flourish extending to the right.

Elmer C. Bartels
Commissioner

ECB/mn



***The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Division of Medical Assistance
600 Washington Street
Boston, Massachusetts 02111***

ARCEO PAUL CELLUCCI
Governor

JANE SWIFT
Lieutenant Governor

WILLIAM D. O'LEARY
Secretary

MARK E. REYNOLDS
Acting Commissioner

January 10, 2000

Richard Burkhauser, Ph.D.
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

It is with great pleasure that I write this letter in support of the establishment of the Cornell Disability Research Institute in collaboration with the University of Massachusetts Medical School. As you know, the University of Massachusetts through the Center for MassHealth Evaluation and Research (CMER) has worked closely with the State Division of Medical Assistance for over 3 years.

Over this time we have developed a unique collaboration with the University aimed at improving the evaluation and research capabilities of the Medicaid agency in the interest of improving the health status for the people of Massachusetts. We are delighted with the quality and policy relevance of the work that Dr. Himmelstein and his staff at CMER have completed. In particular, the Center's work in the area of improving our understanding of the needs of people with disabilities and other special populations has been vital to our ability to better understand the population we serve and improve the services they receive.

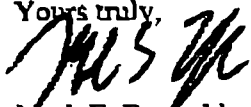
I have encouraged Dr. Himmelstein to seek extramural funding in collaboration with our agency for projects that will further enhance our understanding of the populations we serve. We believe that the proposed Disability Research Institute in collaboration with the Social Security Administration will provide a wonderful opportunity to further the goals of our agency and the understanding of people with disabilities in general.

I look forward to collaborating with you and Dr. Himmelstein to meet the goals of the new Disability Research Institute. It will be important that we work collaboratively with you and the data management staff to develop methods for integrating State administrative data with relevant Federal data and to develop protocols to ensure that all state data is used with appropriate confidentiality and privacy protection for our enrollees.

enrollment and the effect that our services have on preserving functionality and promoting employment for the Commonwealth's most vulnerable citizens.

Thank you for asking us to collaborate in this exciting venture!

Yours truly,

A handwritten signature in dark ink, appearing to read 'MER', is written over the typed name.

Mark E. Reynolds
Acting Commissioner

Cc: Jay Himmelstein, M.D. - University of Massachusetts Medical School



University of
Massachusetts
Medical School

Department of Psychiatry
University of Massachusetts Medical School
55 Lake Avenue North
Worcester, MA 01655
508.856.5498 (office) 508.856.8700 (fax)

January 6, 2000

Center for Mental Health Services Research

Richard Burkhauser, PhD
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser,

Thank you for inviting the Center for Mental Health Services Research (CMHSR) at the University of Massachusetts Medical School to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute (DRI) RFA. Two key faculty members, William Fisher, PhD, and Alexis Henry, ScD, will be spearheading the CMHSR's involvement in the DRI.

The CMHSR is largely funded by the Massachusetts Department of Mental Health; the Center's primary mission is conduct research that informs mental health policy, improves services and advances the treatment of those with serious mental illness. Dr. Fisher, who is the Center's Associate Director for Public Sector Research, has extensive experience in the use of large data sets for analyzing issues in mental health policy and service delivery. Dr. Henry, who directs the Rehabilitation Research Core at the Center, has a long-standing interest in the effectiveness of public-sector employment services for people with mental illness and in the barriers to employment encountered by these individuals. Together, they have proposed DRI projects designed to better understand the disability dynamics of persons with mental illness, and impact of clinical advances on employment status and earning among SSA beneficiaries. This work is consistent with and directly enhances the research mission of the CMHSR.

Thanks you for inviting the CMHSR to participate in this exciting and most worthwhile endeavor.

Sincerely,

A handwritten signature in black ink, appearing to read 'Charles W. Lidz', with a stylized flourish at the end.

Charles Lidz, PhD
Research Professor
Director, Center for Mental Health Services Research



University of
Massachusetts
UMASS Medical School

Disability Evaluation Services
University of Massachusetts Medical School
11 Midstate Drive
Auburn, MA 01501-1863
508.721.7200 (office) 508.721.7283 (fax)

Richard Burkhauser
Department of Policy and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

Thank you for inviting the University of Massachusetts Medical School Disability Evaluation Services Program to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. We will be pleased to participate.

UMass Medical School Disability Evaluation Services (DES) performs disability reviews for Massachusetts residents applying for TANF benefits, Massachusetts EAEDC (emergency aid) benefits, or MassHealth (Massachusetts Medicaid). Our data includes medical, demographic, and vocational information on applicants for these disability-based state programs. We have access to the state database that tracks approval of SSA benefits. We hope to participate in the Institute's research agenda to understand the changing nature of the disabled population and the relationship between applicants for state programs and subsequent SSI eligibility. We will explore the validity of the SSA review process for predicting future disability or employment and identify the factors which best predict employment or disability.

Sincerely,

A handwritten signature in black ink, appearing to read 'Susan Levine'.

Susan Levine
Associate Director

A handwritten signature in black ink, appearing to read 'Charles P. Sweet'.

Charles P. Sweet, MD, MPH
Medical Director, Associate Professor Family Medicine & Community Health

A handwritten signature in black ink, appearing to read 'Cindy Donges'.

Cindy Donges, MA, CAGS
Program Compliance & Quality Assurance Manager

RECEIVED

DEC 17 1999

POPULATION STUDIES CENTER

Institute for Social Research
The University of Michigan

426 Thompson Street, PO Box 1248
Ann Arbor, Michigan 48106-1248

John Bound
Professor of Economics
Tel: (734) 998-8684
Fax: (734) 998-7415
Jbound@umich.edu

December 14, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Rich:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate.

I will be seeking first-year funding in a joint project with Julie Cullen and Tim Waidmann and subsequent funding for a project with Gary Solon. As you know, much of my research dating back to my Ph.D. thesis has focused on the behavioral and welfare effects of the Social Security disability programs. I view the proposed Disability Research Institute as a great opportunity.

Sincerely,



John Bound

JB:mct



GARY SOLON
CHAIR

THE UNIVERSITY OF MICHIGAN
DEPARTMENT OF ECONOMICS

611 TAPPAN STREET
ANN ARBOR, MI 48109-1220
734 763-1306 FAX: 734 764-2769
gsolon@umich.edu

December 16, 1999

Prof. Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Rich:

Thank you for inviting me to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. I am pleased to participate.

Best wishes,

A handwritten signature in cursive script that reads "Gary Solon".

Gary Solon

The W.E. Upjohn Institute for Employment Research

300 South Westnedge Avenue Kalamazoo, MI 49007 phone (616) 343-5541

fax (616) 343-3308

e-mail hollenbeck@we.upjohninst.org

Kevin Hollenbeck, Senior Economist

January 10, 2000

Professor Richard Burkhauser, Chair
Department of Policy Analysis and Management
N 134 MVR Hall
Cornell University
Ithaca, NY 14853-4401

Dear Professor Burkhauser:

The Upjohn Institute publications department would be pleased to serve as the publishing arm of your proposed Disability Research Institute should you be awarded the funds to establish that center. We believe that book-length manuscripts that would be produced by scholars at the Disability Research Institute would be valuable complements to our titles in the areas of worker disability and Worker's Compensation.

As you know, our publication decisions are based solely on a rigorous, anonymous peer review process. So the publishing process that we would institute for Disability Research Institute books is as follows:

- i) You or a scholar would submit a manuscript to me once you are satisfied that it meets your standards of quality and interest;
- ii) I will send out the manuscript to two or more external reviewers, who will be researchers, policymakers, or practitioners;
- iii) As publisher, I will review the recommendations of the reviewers and decide whether to publish the book (of course, the reviewers may suggest revisions so that a favorable decision would be contingent upon revisions);

Professor Richard Burkhauser
January 10, 2000
Page Two

- iv) The Upjohn Institute will hold the copyright and will edit, produce, and market the book at its expense.

We wish you well in your efforts to establish the Disability Research Institute, and we look forward to be your publishing partner for this important endeavor.

Sincerely,



Kevin Hollenbeck
Director of Publications

sab



THE URBAN INSTITUTE

2100 M STREET, N.W. / WASHINGTON, D.C. 20037

STEPHEN H. BELL
PRINCIPAL RESEARCH ASSOCIATE
INCOME & BENEFITS POLICY CENTER

TELEPHONE: (202) 261-5654
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December 16, 1999

Professor Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Rich

Dear Professor Burkhauser,

Thank you for inviting my colleagues and me at the Urban Institute to participate in the consortium Cornell University is proposing to SSA for the new Disability Research Institute. This is an exciting opportunity, and we are pleased to participate.

As an organization dedicated to helping the public and the policy community make better-informed decisions through careful research, expanding the Urban Institute's base of research on disability and employment issues is an attractive proposition. In keeping with our mission, we would expect to channel most of our effort into original research of high policy relevance on issues of concern to SSA, and on making findings available to a wide audience through the Disability Research Institute (DRI). Our expertise in analyzing large national surveys, combined with the opportunity to link survey data with SSA administrative records through DRI, will equip us well to contribute to the ongoing policy debate in several areas of specialty: disability, aging, and employment; welfare reform for people with disabilities; the role of health services and health insurance in supporting work; and the role of states in achieving disability policy objectives. There is also considerable interest in providing expert consulting on research planning and product review to make use of our substantive knowledge of disability and employment issues and our expertise in quantitative policy analysis.

We look forward to a fruitful, rewarding collaboration with you, the rest of the consortium, and SSA's Office of Research, Evaluation, and Statistics, should your proposal be successful.

Sincerely,

Stephen H. Bell
Principal Research Associate

Jan 06 00 02:12p

E&CP Univ of MO Columbia

573-884-5989

P. 2



College of Education

University of Missouri-Columbia

Department of Educational and
Counseling Psychology16 Hill Hall
Columbia, MO 65211PHONE (573) 882-7731
FAX (573) 884-5989

January 6, 2000

Susanne M. Bruyere, Ph.D.
Cornell University
106 ILR Extension Building
Ithaca, NY 14853-3901

Dear Dr. Bruyere:

I am writing this letter to inform you of my interest in serving as a Consultant on the Social Security Administration Disability Research Institute (SSA-DRI). I am particularly interested in dissemination and training activities that result from the analysis, summary, and interpretation of project data. I believe my skills and knowledge as a Rehabilitation Educator and Researcher would be useful in empowering beneficiaries of the resulting SSA-DRI studies.

An important aspect of the SSA-DRI will be to track the evolution and impact of the Ticket to Work and Work Incentives Improvement Act of 1999. This legislation introduces the opportunity for thousands of individuals with disabilities to enter the work of work without systemic disincentives. Based on my background of teaching, writing, and studying in the area of vocational rehabilitation, consumer direction, and empowerment, I believe I have the ability to contribute to effectively disseminating SSA-DRI data and research outcomes to consumers with disabilities, rehabilitation professionals, and policy makers.

I look forward to working with you on this crucial research, training, and dissemination endeavor.

Sincerely,

A handwritten signature in black ink, appearing to read 'John F. Kosciulek'.

John F. Kosciulek, Ph.D., CRC
Director - Rehabilitation Counseling Program

UNIVERSITY OF WASHINGTON

*School of Public Health and Community Medicine
Department of Environmental Health*

*Occupational Epidemiology and Health Outcomes Program, 358772
1914 N. 34th Street, Suite 101
Seattle, Washington 98103-9058
Telephone: (206) 685-7080 Fax: (206) 685-7031*

December 7, 1999

Richard Burkhauser
Department of Policy and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

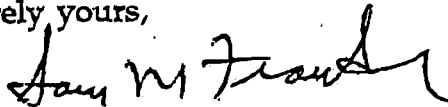
Dear Dr. Burkhauser:

We are interested in participating as a consortium institution in the SSA Disability Research Institute proposed by Cornell University.

We have access to a statewide database relevant to disability in the workers' compensation system, and would be interested in investigating the relationship of workers' compensation disability to disability status in the SSA system. In addition, I would be interested in consulting on appropriate Institute activities and participating in conferences relative to our area of expertise.

I have also included a resume, a biosketch, a completed questionnaire, and a program description.

Sincerely yours,



Gary M. Franklin, MD, MPH
Research Professor

GMF:mkf

Encl

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December 8, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

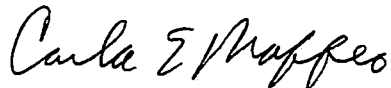
Thank you for inviting Westat to participate in the consortium that Cornell University is proposing in response to SSA's Disability Research Institute RFA. We are pleased to participate.

Westat brings to the Disability Research Institute a broad cross-section of research and analysis in the world of disability. We have assembled a team of investigators with considerable background in several substantive areas of disability (e.g., functional assessment, cognitive and mental disability, and childhood and youth disability), as well as a strong background in and understanding of the Social Security Administration (SSA) disability determination process, work requirements, employment, and occupational classification. In addition, Westat brings to the table a social science and epidemiologic perspective, as well as an intimate knowledge and understanding of the Disability Evaluation Study (DES) instruments, data collection procedures, and analysis. We also add to an already strong team methodological and analytic expertise in analysis of databases with complex survey designs.

These qualifications will enable Westat to propose and direct specific research projects that use multiple research and administrative databases, participate in quick response activities, direct and assist in research projects that require a strong background and understanding of the data collection instruments, procedures, and analysis in the DES, and provide consultation on and the analysis of databases that use a complex survey design methodology.

We look forward to a creative and fruitful collaboration.

Sincerely,



Carla E. Maffeo, Ph.D.
Vice President and Area Director
Health Studies Sector



University of Wisconsin-Stout

Menomonie, Wisconsin 54751-0790

Research and Training Center
Stout Vocational Rehabilitation Institute
College of Human Development

December 10, 1999

Richard Burkhauser
Department of Policy Analysis and Management
Cornell University
N134 MVR Hall
Ithaca, NY 14853-4401

Dear Dr. Burkhauser:

We are pleased to support and accept your invitation to join you in applying to the Social Security Administration (SSA) to establish a Disability Research Institute (DRI). I believe we can bring valuable resources to the effort through our history and capability in vocational rehabilitation research, development, training, and dissemination.

I represent two federally funded multi-year centers that conduct research, development, training, and dissemination on issues related to vocational rehabilitation services provided through community-based rehabilitation programs (CRPs) to persons with disabilities, Social Security recipients, and other populations.

The Research and Training Center (RTC) on Community Rehabilitation Programs to Improve Employment Outcomes is funded by the National Institute on Disability and Rehabilitation Research, Office of Special Education and Rehabilitative Services, U.S. Department of Education. The RTC has been continuously funded since 1972 and is a leader in research on services provided through non-profit rehabilitation programs. The RTC also has supplemental funding from other federal and state sources (e.g., Rehabilitation Services Administration, State of Illinois), has conducted evaluations of large and small scale demonstration programs (including Social Security), has capability to conduct complex studies, and presently has 14 full and part-time staff at the University of Wisconsin-Stout in Menomonie and the University of Missouri engaged in research, development, and dissemination. It has well established linkages, nationally, throughout rehabilitation (public and private sector) and is pursuing an aggressive program to determine and improve the economic and social impact of rehabilitation programs provided through CRPs using specific public funding. It also has a well established capacity for delivering knowledge from research and development to CRPs and to public agencies nationally through its Website, newsletters, conferences, and training and technical assistance, as well as through its publications (i.e., books, journal articles, papers).

The Continuing Education Center (CEC) for Community-Based Rehabilitation Programs is funded by the Rehabilitation Services Administration, Office of Special Education and Rehabilitative Services, U.S. Department of Education. The CEC was established in 1996 as one of ten Regional Continuing Education Programs with core responsibilities for providing training and technical assistance to service and leadership personnel in CRPs in order to improve vocational outcomes for persons with disabilities. The CEC is taking on a leadership role among RCEPs in both providing needs-based training throughout the six states of Region V and in designing Web-based training, in sponsorship of topically driven conferences and seminars, in designing performance-based curricula, and in devising curriculum respective to service delivery (e.g., employment, adaptive technology, leadership identification and development) and to public policy issues (e.g., Social Security, wage and hour certification, relationship between federal-state public law). The CEC has ten staff and six additional affiliate staff at the University of Illinois in Urbana-Champaign and Michigan State University working full and part-time in our efforts to put contemporary knowledge into practice.

We thank you for the invitation to join with Cornell as Consortium Researchers in the proposed consortium in the DRI. We will be pleased to participate in it to the degree appropriate and in forms that will further our common agendas in research and for improving the labor force participation of persons with disabilities and with other needs for services and/or public support. We are in a position to engage in the following activities with the DRI:

- Conduct research (collaboratively; independently) on topics of interest to Social Security, vocational rehabilitation, community-based rehabilitation programs, and/or persons with disabilities or who face barriers that have historically required public supports (e.g., Social Security Disability Insurance, welfare, public aid, Medicare/Medicaid);
- Collaborate with the DRI and consortium members to develop dissemination, training, and information from research that will inform both policy and practice (e.g., through distance learning, existing newsletters, monographs, seminars, co-sponsored conferences and colloquia);
- Explore (through research and consulting) broadest application of Social Security data and supplemental data for informing public policy, for influencing the design and scope of publically supported rehabilitation and employment programs, and for conducting programmatic research; and
- Provide consultation to the DRI and colleagues on the efficacy and utility of DRI research products and related policy proposals (e.g., in health care, in social security reform) as these may affect services provided at the state and community levels (e.g., to social security recipients, in developing waivers, in redesign of public and private sector services).

Our two Centers at the University of Wisconsin-Stout are directed toward improving services and employment outcomes from community-based rehabilitation programs (including Social Security recipients): The RTC, nationally, through research and application of new knowledge to practice; the CEC, in Region V, through providing contemporary knowledge, competency-based training, and technical assistance to personnel and management of CRPs; both through identification, training, and mentoring of future leadership for rehabilitation.

We have an exciting program that will determine better strategies, policies, and funding practices that serve people with disabilities in their goals of employment and self-sufficiency. I readily see how the work we are doing through the RTC on outcome measurement, on demonstrating how best to serve persons through CRPs, on informed choice of persons served in CRPs, and on defining the composition, issues, and directions of the CRP industry can relate to the DRI's goals and complement research conducted with SSA data sources. The RTC has a strong commitment to providing information, solutions, and practical materials that inform both policy and practice.

Please do not hesitate to call upon us for additional assistance as you prepare your application or for operationalizing our collaboration as suggested above.

Sincerely,

A handwritten signature in black ink, appearing to read 'Fredrick E. Menz', is written over the typed name.

Fredrick E. Menz, Ph.D.

Associate Director, Research and Training Center

Director, Continuing Education Center

Professor, Department of Rehabilitation and Counseling



Virginia Commonwealth University

REHABILITATION RESEARCH
AND TRAINING CENTER

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P.O. Box 842011
Richmond, Virginia 23284-2011

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TDD: 1-804 828-2494

January 6, 2000

Dr. Richard Burkhauser
Policy Analysis and Management
Cornell University
N134 MVR
Ithaca, NY 14853

Dear Dr. Burkhauser:

The Rehabilitation Research and Training Center on Workplace Supports at Virginia Commonwealth University (VCU-RRTC) is delighted to have the opportunity to collaborate with Cornell University and colleagues from across the country in the development of the Cornell proposal for the Disability Research Institute.

The VCU-RRTC appreciates the assistance and support of you and your colleagues during the development of our proposed project, "The Long-Term Impact of VR on the Earnings and Benefits Status of Individuals with Disabilities." We believe that this project addresses one of the major goals of the proposed Institute in a comprehensive and efficient manner. Should the proposed Institute be funded, VCU-RRTC is committed to completing the Year 1 activities related to this project for the amount of \$40,000.

Thank you for allowing us to collaborate with you on this important activity. We look forward to working with you closely during the implementation of Institute activities during the coming years.

Sincerely,

A handwritten signature in black ink, appearing to read "John Kregel", is written over a horizontal line.

John Kregel, Ed.D.
Research Director

Washington Business Group on Health
777 North Capitol Street NE, Suite 800
Washington, DC 20002

January 3, 2000

David Stapleton
The Lewin Group
3130 Fairview Park Drive, Suite 800
Falls Church, VA 22042

RE: Disability Research Institute RFA (SSA-ORES-00-1)

Dear Dave,

Thanks for the opportunity to comment on the proposed Disability Research Institute by Cornell University, the University of Massachusetts Medical School, and the Lewin Group. As you know, the Washington Business Group on Health (WBGH) is the only national non-profit organization devoted to analysis of health and disability policy and workplace issues from the perspective of large employers. WBGH members – Fortune 500 and large public sector employers – provide health and disability coverage for more than 39 million U.S. workers, retirees, and their families. Since 1986, when WBGH convened the first National Disability Management Conference and Exhibit, WBGH member companies have been in the forefront of the development of innovative worksite-based disability management (DM) programs devoted to better managing occupational and non-occupational disability among employees. Currently, nearly half of our 150 member companies report that they have implemented integrated DM programs. These programs reduce benefit costs, improve return to work outcomes, and boost productivity for those employers who have implemented them.

However, there is little understanding of how DM programs interact with or affect public disability benefit programs (SSDI or SSI). While DM programs have been shown to improve compliance with the reasonable accommodation provisions of the Americans with Disabilities Act, anticipated increases in employment of people with disabilities (and expected reductions in SSDI recipient status) have not been documented. Further, while DM programs have reduced employer short term and long term disability benefit (STD and LTD) costs by returning recipients to work, some insurers and employers still look to SSDI benefit offsets to further reduce LTD costs despite evidence that returning disabled employees to work is a far less costly and more productive course.

I am most interested in the scope of research outlined under the "Occupational Determinants of Disability" section of your proposal. Both the Social Security Administration and private business will benefit from a better understanding of 1) the structure and scope of employer-based DM programs and 2) the impact of these programs on the "progression of disability benefits" from private to public sources of disability income. The private sector has shown enormous creativity in developing work options for employees with disabilities when the dual payoffs of reduced costs and improved productivity can be demonstrated. The effectiveness of employer DM program efforts to retain and/or reemploy disabled employees also have a direct effect on the number of SSDI (or SSI) applicants entering the public disability pipeline.

Thus, I would like to add my wholehearted support to the cooperative agreement proposal for a Disability Research Institute which will, in part, study and disseminate information about employer best practices in disability management.

Sincerely,

Bruce G. Flynn, Director
Disability Management

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A. The Work Environment

There are not alternate first-year proposals in this category.

A4. Progression of Disability Benefits -- P. Wehman, J. Kregel and B. Flynn

The Progression of Disability Benefits refers to the migration of workers with a work-limiting disability as they move through a system of economic disability benefits resulting in their ultimate placement into DI. The Rehabilitation Research and Training Center at Virginia Commonwealth University, in collaboration with UNUM/Provident Life Insurance Company, has developed a database comprised of 115, 438 consecutive short-term disability (STD) claims filed from January 1, 1994 to December 31, 1996 (the filing period). Every case of STD filed from claimants who were also insured for long-term disability (LTD) by UNUM was included in the extracted data set.

Preliminary analyses have been completed on the database to (1) document the progression of disability benefits phenomenon, and (2) explore selected factors in the database, including claimant and employer characteristics, and describe their relationship to the likelihood of progression. We propose to expand this investigation in two ways. First, we will obtain DOT codes on each of the jobs held by individuals in the database. This will enable us to examine the nature of work/structural change in employment on program participation via this database, specifically by investigating the flows of people from companies, jobs, or industries which experienced major structural changes during the 1994-96 period. Second, we will link these data to the SSA disability and earnings data. This will allow an examination of the long-term impact of STD and LTD status on SSA program participation, from the perspectives of types of jobs or industries, type of disability, and demographic characteristics. Information will also be derived

concerning the types of disability management programs (e.g. early intervention programs) that may slow or reverse the benefits progression, potentially generating savings to SSA.

A5. The Effects of Employers on DI Participation and Employment – J. Abowd, D. Stapleton and LEHD staff at the U.S. Bureau of the Census

Employers can impact DI applications and awards multiple ways -- through lay-off that are responsive to general economic downturns or economic restructuring, health and disability benefit design, disability management policies, etc.. This study will assess the overall importance of the role that employers play in determining DI participation and future employment of their disabled employees impacts of employers on economic restructuring on employment of workers with disabilities and on their participation in DI and, to the extent feasible, provide information on the nature of that role. More specifically, we will assess how layoffs affect subsequent DI participation and employment of disabled workers. We will also assess whether the proximate cause of the layoffs – recession vs. downsizing due to economic restructuring – matters to the outcomes for workers with disabilities.

This project will use the data created as a part of the Census Bureau's new Longitudinal Employer-Household Dynamics (LEHD) project to address a critical issue in projecting disability insurance take-up rates—namely, how important are the employer's product market history and the individual's employment history for predicting individual disability insurance applications. The data permit measurement of: the individual's employment history in great detail including time spent with each employer, the employer's identity and earnings from employment (annually) over the duration of the relation; employer outcomes (sales, employment and payroll) for at least five years surrounding each employment date; and application and award for DI (dates and benefit amount). With these data, analyses can control for individual

heterogeneity in work history, unmeasured individual heterogeneity in earnings, and take-up rates. They also permit controls for observed differences in the history of the firms as well as unobserved employer heterogeneity. The unobserved employer heterogeneity is particularly important because it permits a statistical control for differences in the private benefit packages offered by these employers. The data must be used inside the US Census Bureau; however, the Cornell Restricted Access Data Center, in conjunction with the NSF Social Science Data Infrastructure grant, is developing web-based access tools that permit most of the analysis to be prototyped without accessing the actual confidential data. This analysis will also use the newly developed software for estimating very high dimensional mixed-effects models. This software uses sparse matrix algebra and parallel processing techniques to make the estimation of the models required by this project feasible.

A6. Data Sources to Support the Study of the Relationship Between Employer-Sponsored, Worksite-Based Disability Management Programs and DI/SSI Utilization - J. Himmelstein, A. Dembe, and B. Flynn

There are a variety of work-based disability management programs that can potentially impact the course of disability benefit utilization for SSA beneficiaries. Relevant employer-sponsored programs include accident prevention, health promotion and disease management, transitional return to work and job accommodation programs, first aid and on-site medical clinics, EAP (Employee Assistance Programs) and drug testing, and workplace-based rehabilitation and retraining. Despite the rapid growth of disability management programs over the past five years (employers reporting that they have implemented disability management programs grew from 25% to 43% between 1996 and 2000, according to the annual WBGH/Watson Wyatt survey of large employers), there is little consistency between program

components or program evaluation criteria across employers. In addition, DM efforts are often fragmented within organizations, thus rendering an analysis of program impact on both the direct and indirect costs of disability impossible. Research into the effect of these employment-based programs on the course of disability and use of SSI/DI benefits has been limited due to a dearth of credible, data describing the relationship between private-sponsored disability programs and their ultimate impact on the Social Security system.

This study will help to lay the groundwork for future analyses by 1) conducting a systematic compilation and evaluation of available data sources covering workplace-based disability management programs and 2) analyzing the impact of various workplace disability management practices on the progression from private (i.e. employer-sponsored) sources of disability income to SSDI/SSI. Each data source will be accessed, categorized, and a table of data elements will be compiled. A variety of organizations and agencies will be canvassed for input into this project including industry trade associations, (e.g, the U.S. Chamber of Commerce, National Assn. of Manufacturers, Society for Human Resources Management, and Washington Business Group on Health) labor organizations, government agencies such as the Department of Labor, the Dept. of Commerce, and OSHA, workers' compensation agencies, and disability organizations. The study will be performed with the assistance and involvement of the Washington Business Group on Health.

A7. Substitution Between Workers' Compensation Permanent Disability Benefits and SSA Benefits - J. Biddle, .L. Boden, and R. Reville

Many workers with disabling occupational injuries receive workers' compensation permanent disability (PD) benefits following the injury. In time, they may also receive Social Security Disability Insurance or Supplemental Security Income. The generosity of the workers'

compensation PD benefits may affect the probability or the timing that an injured worker will subsequently apply for Social Security. In this project, we will examine differences in the determinants of the generosity of workers' compensation PD benefits within and across states and the relationship between the PD generosity and claims for Social Security benefits. Three kinds of variation will be examined to identify the effect of permanent disability benefits on SSA claiming. First, in most states, the amount of the benefit is set using a permanent disability rating which varies by the type of injury. This disability rating, in practice, is very poorly related to the actual postinjury earnings loss (Biddle, 1998; Reville, 1999). We will examine differences in SSA benefit claiming for different injuries that lead to different benefit amounts but similar average postinjury losses. Second, we will examine changes in benefits in California for serious injuries that occurred after 1993. Did higher benefits for some injuries decrease the likelihood of SSA claiming for those injuries relative to categories where no change in benefits occurred? Finally, there is significant variation across states in the fraction of WC claims that receive permanent disability benefits. Do fewer injured workers claim SSA benefits in states where a larger fraction receive WC PD benefits? The analysis will use administrative data from the State of California, Washington, Florida, New Mexico, Oregon and Wisconsin on workers' compensation permanent disability claims linked to earnings data before and after injury from the Unemployment Insurance quarterly earnings file. These data will be linked to SSA benefit data from the Master Beneficiary Record and the Supplemental Security Record.

A8. Relationship Between Workers' Compensation and Social Security Disability Programs

- G. Franklin and G. Pransky

Scant information is available to evaluate the extent of transitions from WC to SSA, the amounts of benefits received, and the impact on subsequent rehabilitation. The most recent study

published by SSA is now over 20 years old, and does not reflect the current shift towards more aggressive referral of chronic cases to SSA (Muller, 1980). The relationship between SSA benefits and WC will be studied using two unique databases, in conjunction with the SSA database, available to the DRI. The first of these datasets is Liberty Mutual's files on WC claimants. As Liberty Mutual is the largest WC insurer in the US, these files are extensive. The second is the Washington State Department of Labor and Industries dataset, which covers WC benefits to approximately two thirds of Washington workers (over 1 million FTE's). These datasets include SSN, date of injury, nature of injury, industry, occupation, age, gender, wage, total time loss, employment and demographic factors, dates and amounts of all time loss payments, and all medical bills with information on diagnoses, procedures, providers, and payments. Linking data from these datasets with SSA data will allow the natural history of the transition from WC to DI to be quantified and modeled. The time between initiating a WC claim and receiving DI (potentially right censored) will be examined using duration and hazard models. Important covariates will include the outcome of the WC claim (i.e. rejected, only payment of medical bills, short periods of disability payments, permanent disability payments), and time-dependent covariates regarding medical procedures.

A9. Physical and Cognitive Work Demands and the Onset of Disability – R. W. Johnson

The requirements of work have an important effect on the ability to work and the decision to apply for disability benefits. Certain types of jobs which do not impose high physical demands on their workers can easily accommodate employees with health problems. In other more demanding jobs, however, even small declines in health can substantially reduce job performance and lead to withdrawals from the labor force. Although some workers in physically demanding jobs may be able to move to less demanding jobs if their health declines, these

occupational transitions generally involve the loss of specific human capital and lead to lower earnings. As the nature of work changes, better information on the relationship between labor force behavior and work requirements is critical in order to understand the employment patterns of current and future workers with health problems.

This project will examine the relationship between work requirements and labor supply for a sample of workers in their early fifties. The data will come from the first four waves of the HRS. A particular advantage of the survey for this project is that it collects information on both physical and cognitive work demands. In addition, detailed information on employment history, hours of work, health status, functional impairments, indicators of emotional health, and medical histories are available at each wave. We will relate physical and cognitive work requirements to labor supply for a sample of respondents ages 51 to 55 who were employed at wave 1. We will use maximum likelihood techniques to determine whether workers in demanding jobs are more likely to move from full-time work to part-time work, change jobs, or withdraw from the labor force altogether over the course of the survey than those in less demanding jobs. Our models will be estimated separately for men and women and will control for self-reported health status, functional limitations, medical conditions, indicators of emotional health, education, health insurance, pension wealth, Social Security wealth, non-retirement wealth, demographic characteristics, and other predictors of labor supply. We will also interact job demands with selected variables, such as health status. These interactions will enable us to examine whether workers in jobs with relatively low physical demands are more likely to remain at work when their health declines than those in jobs with higher demands. We will also be able to investigate the impact of cognitive job demands on the effects of physical and emotional health on the ability to work. Finally, we will investigate the impact of work requirements and health status on

the likelihood that individuals report having a health problem that limits their ability to work and on the likelihood that they apply for SSDI benefits.

A10. Race and Gender Differences in Employment, Earnings, and Benefit Utilization after Workplace Injuries -- L. Boden and A. Dembe

Previous studies suggest that racial, ethnic, and gender differences may affect post-injury labor-market outcomes and thereby drive demand for SSA benefit utilization. In this study, we will examine whether post-injury employment and earnings experience of injured workers differ by sociodemographic characteristics, and whether observed racial/ethnic differences in post-injury employment are related to the physical effects of the injury, employer characteristics (for example, industry and employer size), employee characteristics (like age and job tenure), or other factors, including discrimination. We will investigate how the demand for Social Security disability and retirement benefits is affected by these factors, including employment discrimination and the degree to which lost earnings are replaced by worker' compensation benefits. Data sources for these studies will include information from the State of Florida workers' compensation system on all 143,000 compensable occupational injuries in 1990 and 1991. This has been linked with: labor market data on employers, 1988-1994 unemployment insurance quarterly wage data on the injured workers, and data on all uninjured workers who worked at the injured workers' firms in the calendar quarter of the injury. The workers' compensation data include Social Security number, worker, injury, and employer characteristics, and workers' compensation benefit information. Also linked are Florida drivers' license records data, linked by SSN. These records contain self-reported race/ethnicity information. The match rate for the injured worker sample is 85 percent. Information about SSI/DI program utilization will be determined by linking the Florida data to SSA information on disability and retirement

benefit utilization. The analysis will use regression techniques using very short-term injuries as the comparison group, analyzing earnings and losses separately for six racial/ethnic and gender groups. Survival analysis will be used to determine the likelihood of becoming a recipient of SSDI, SSI, or retirement benefits. This would be supplemented with a logistic regression analysis of benefit utilization within 6-8 years after injury.

A11. The Influence of Occupational Injuries and Illnesses and Exposure to Workplace Hazards in Subsequent Applications for SSI/DI Benefits Among Younger Workers - A. Dembe and S. Banks

As a follow-up to our proposed first-year study of older workers using data from the Health and Retirement Study, we will attempt to generalize our findings by conducting analyses in data sets covering a wider range of employees including those between 18-55. Because chronic disability is more common in older populations, less analytical work has previously been performed among younger and middle-aged workers. Our additional analyses will draw from information collected through the Medical Expenditure Panel Survey (MEPS) and the National Health Interview Survey (NHIS). Both surveys collect extensive self-reported information regarding individuals' employment experiences and occupational activities, health status and medical conditions, medical care utilization, occurrence of occupational injuries, work disability, and income support through workers' compensation, SSA, and other sources. The National Health Interview Survey on Disability (supplement to the NHIS) also collects additional information about patients' disability experiences and accommodation strategies, such as the use of assistive devices. NHIS is cross-sectional 12-month retrospective appraisal of employment-based injuries and illnesses. MEPS is a longitudinal assessment of panels (selected annually) that are followed for 2 1/2 years. Since a large proportion of applications for SSI/DI disability

benefits (over 30%) occur within the first two years after the onset of disability, a significant amount of data should be available to analyze the relationship between occupational injuries, job exposures, and subsequent disability

B. The SSA Program and Policy Environment

Projects B3 through B6 are alternate first-year projects, and the remainder are for years two through five.

B3. Analysis of DI Participation by Parents (alternate) -- D. Stapleton and D. Wittenburg

Objectives: The objective of the proposed analysis is to understand better the SSI/DI participation patterns of young DI beneficiaries who are parents of minor children, particularly unmarried women. We propose to produce and analyze trends in DI awards to parents, by sex and marital status, and compare them to trends for non-parents, focusing on those who are under age 40 at the time of application. To the extent feasible, we will also examine trends at the state level and assess variation in the trends across states. Ideally, we would also produce similar trends for SSI participants, but administrative data are not available on the parental status of SSI awardees. The DI data will, however, allow us to examine DI parents who are concurrently awarded SSI. Further, we will conduct additional analysis for SSI parents, using the SIPP/SSA data:

The analysis will address Priority 1, by providing information on the composition of, and changes in the number of, DI recipients; and Priority 2, by informing potential return-to-work strategies. It will provide information on: how many young DI awardees are unmarried parents; how the characteristics of young DI parents compare to other DI recipients in the same age group; how the distribution of DI parents varies across states and over time; whether fluctuations

in DI participation by parents are correlated to federal or state policy changes; and the need for return-to-work strategies to address the special needs of parents (e.g., child care).

Background: From 1990 to 1997, the number of DI beneficiaries who are parents increased by over 50 percent (from 558,000 to 859,000), and the number of unmarried mothers receiving DI increased by 120 percent (from 110,000 to 243,000) (SSA, 1991; and SSA, 1998). These figures are consistent with trends in the SSI program over this same period for young women (Stapleton, et. al, 1999). While some of this growth might be attributable to increases in labor force participation by women, a significant portion might be due to other factors, such as policy changes.

Data: We will use the SIPP/SSA matched data for 1990, 1991, 1992, 1993, and 1996. We also propose to use MBR quarterly data from 1980 forward to analyze trends in DI applications and allowances across states and over time. We will generate state-level quarterly statistics for young parents and non-parents, by sex and marital status.

Methodology: We will first present descriptive statistics on DI participants using the matched SIPP/SSA data. We plan to present statistics on all young DI participants from each SIPP panel to track how the composition of this group has changed from 1990 to 1996. Next, we will present descriptive statistics on specific groups of interest, including young DI parents, female DI parents, and non-DI parents. These statistics will provide background information on DI participants, as well as how the composition of DI participants varies across age, sex, and parental status. In Stapleton, et. al. (1999), we produced similar statistics for SSI recipients. We will then examine trends in SSI/DI participation by parents across states and over time, using quarterly data from the MBR. We will first present descriptive trends in participation across parent groups, focusing on differences in trends by young female parent applicants and

awardees. We will then compute differences in trends for selected pairs of young female applicant and award groups (young unmarried mothers vs. non-parent females; young married mothers vs. non-parent females; and young unmarried mothers vs. young married mothers) that are adjusted for changes in the age distribution of the population over the period, following the approach described in Stapleton et al. (1999). These differences effectively control for factors that affect each group in the same way and reflect only the differing effects of various factors on the two groups. We will assess whether various environmental factors (e.g., the economy or specific policy changes such as TANF) might account for trends in these differences. A future project might examine SSI parents.

B4. The Dynamics of DI Participation by Persons Who are Known to be Medically Eligible -- The Case of Deaf College Graduates (alternate) -- R. Burkhauser and J.S. Butler

Objective: We will use a unique data set -- the Rochester Institute of Technology (RIT), National Technical Institute for the Deaf (NTID) Graduate Data Set -- to analyze the decision to apply for DI benefits by a population of men and women who are known to meet SSA's medical eligibility criteria: deaf college graduates. Almost all of these graduates enter employment immediately following graduation, but many leave work and obtain DI benefits after a few years. This data set provides an excellent opportunity to learn how economic and institutional factors affect the decision to apply for benefits because, unlike in other data sets, we know that these individuals are medically eligible before they apply. We will also be able to examine deaf RIT drop-outs and applicants to RIT who were denied admission. This project will address Priority 3, concerning the characteristics of individuals who are both severely disabled and employed.

Background: The decision to apply for SSI or DI benefits is driven both by health and socio-economic considerations. (See Bound and Burkhauser, 1999, for a review of this

literature.) Burkhauser, Butler, Kim and Weathers (1999) show that the onset of a disability sufficient to affect work does not, on average, result in immediate application for SSDI benefits. Instead, environmental factors (e.g. the characteristics of the job, expected wages, expected disability benefits) as well as health influence the timing of application. Yet in empirical studies of this decision, it is difficult to separate health effects from socio-economic factors. For instance, information on health is usually insufficient *a priori* to know if an applicant can meet SSA's medical eligibility criteria.

Data: In August 1998, NTID forwarded a data file of 7,673 cases to SSA containing information on hearing students at RIT, as well as deaf NTID students who graduated with a BA degree, who graduated with a sub-BA degree, who withdrew prior to receiving a degree, and who were denied admission between 1980 and 1996. These data were then matched by SSA to Social Security annual earnings and beneficiary records. (These matched data have to date only been directly used within the SSA.) We propose to use these individual record data in a secure location (after receiving permission from RIT officials and from SSA).

Preliminary analysis by Walter, Clarcg, and Thompson (1999) using these data found that while few students received DI benefits while attending NTID, 60 percent collected SSI benefits. After graduation the SSI rates declined rapidly and were almost zero within ten years of graduation, but DI participation rose. By age 40 approximately 10 (25) percent of male (female) graduates were receiving DI benefits.

Methodology: We propose to test a model of DI application based on a standard life-cycle wealth maximization framework. In this special case, where eligibility for benefits on health grounds are certain, we expect that application for benefits will be sensitive to the relative expected rewards from work versus DI as well as by macro-economic factors. These data are

particularly useful because they target a difficult to capture but important population: persons who currently meet the medical listings for DI eligibility but who do not apply for benefits. Because we have longitudinal information on this population, we can determine the importance of institutional factors on the timing of their subsequent decision to apply for benefits.

B5. Disability Benefits as Social Insurance: Evaluating the Role of DI Program Parameters (alternate) – J. Bound, J. Cullen, and T. Waidmann

Objectives: This project will integrate and supplement the existing theoretical and empirical literature on how changes in the design of DI affect welfare. We will first consider the willingness of workers, at the margin, to pay for more benefits. We will then consider the validity and reliability of medical screening and whether workers are willing to trade less generous benefits for a less stringent screen (or the reverse). This is relevant to Priority 3, regarding current and future methods of measuring function, because the validity and reliability of function measures have an impact on the optimal program design.

Background: The theoretical literature views DI as a form of mandatory income insurance where benefit generosity is limited by moral hazard. Diamond and Sheshinski (1995) examine optimal program design when both early retirement and disability benefits are available to an individual. The optimal generosity of DI depends on the accuracy of the medical screen -- the less accurate the screen, the less generous the optimal program because of the increased moral hazard of attracting applications from able workers. This project will use existing information on the validity and reliability of the medical screening for DI applicants to calibrate a model that is more representative of current DI policy than the simple models used in the literature. The model will be used to investigate the tradeoff between benefit generosity and

screening stringency in targeting benefits to the truly disabled, where the tradeoff depends on the accuracy of the medical screen.

Data: Matched SIPP/SSA data for several SIPP panels.

Methodology: From an individual worker's perspective, the insurance value of expanding disability insurance is based on the expected change in lifetime utility. This expectation depends on the impact of DI on the path of family income and work effort both in the case where the worker becomes disabled and applies for DI and in the case where the worker never applies, and on the likelihood of each of these outcomes. Whether an able-bodied worker would be willing to pay for higher benefits in the case he/she might someday qualify for DI depends on the price in expected taxes.

We will simulate the likelihood that each non-beneficiary would be induced to apply for DI benefits given individual characteristics and estimates of the elasticity of application with respect to benefit generosity (from the literature). The expected cost of providing benefits to new recipients is then based on the predicted likelihood that each individual in the SIPP applies for and receives DI and on the level of family benefits for which the person would be eligible.

The data also allow us to estimate the additional net tax and transfer costs of encouraging individuals to apply for DI before and after the survey. We will follow cohorts that applied early in the 1980s from the mid-1980s through the mid-1990s to track the expected changes in earnings, tax payments, and other income transfers to SIPP non-beneficiaries surrounding the application for DI benefits, for all applicants.

How the direct and indirect costs are distributed across workers determines the incidence of the policy change and, implicitly, the actuarial fairness of the marginal changes to DI. The allocation of indirect costs can be based on current funding patterns, expected net benefits, or the

worker's age-adjusted position in the earnings distribution and information on the pre-application position of DI applicants from the matched data.

Finally, we will estimate the impact on utility for workers who face differing probabilities of following the various implicit lifecycle paths, based on recent survey evidence regarding individuals' willingness to take risks (Barsky et al., 1997). Sensitivity of results to key parameter assumptions will be examined.

We have developed a way to measure whether the accuracy of the medical screen justifies raising benefits and increasing dependence on the screen or vice versa. It involves calibrating a model like that of Diamond and Sheshinski to study optimal program design, expanding their model to include costs associated with the screening for DI. The information used to calibrate the model will be the matched SIPP and 831 data, available data on the reliability and validity of the medical screening of DI applicants, and empirical estimates of the sensitivity of applicants to screening stringency and benefit levels. Whether higher benefits and denial rates or lower benefits and denial rates provide the greater increased insurance value for the least net cost will determine the desired direction of policy change. Once we have calibrated our model, we will use it to study the welfare implications of balanced budget changes in screening stringency and benefit generosity. Given the uncertainty that surrounds many of the parameters, we will engage in extensive sensitivity analysis.

B6. Longitudinal Analysis of DI Beneficiary Use of DI Work Incentive Programs -- D. Stapleton and G. Livermore

This is a continuation of a first-year project that will examine use of SSI work incentive programs by SSI recipients. This project would be a similar study for DI, examining the use of Trial Work Periods, the Extended Period of Eligibility, and extended Medicare benefits. This

would require construction of longitudinal files for DI award cohorts, based on the Master Beneficiary Record and Social Security earnings records. .

B7. The Impact of the SSI Child Benefits on Labor Force Participation- J. Klerman, and R.Reville

A perennial policy concern in the design of social programs is the extent to which transfers suppress labor supply. The problem is especially salient in means-tested programs such as SSI, including, the Childhood SSI program which can impact parental employment and the transition of child recipients to adult employment. A series of policies shifting the eligibility of sub-groups of children for SSI provides a potentially rich natural experiment for understanding the magnitude of such labor supply effects. In this project, using SSA administrative data, we propose to estimate the effects of several childhood disability and age-18 reforms on the labor force participation of the terminated children and their parents.

While the literature on the labor market disincentives for parents associated with other federal means-tested programs (such as AFDC) is extensive, the size of the labor supply effects of these programs remains the subject of considerable controversy. Much of the problem stems from the difficulty in identifying exogenous differences in program eligibility, and small sample sizes. The combination of the Childhood SSI program and the SSA administrative data should allow us to overcome both of these problems. The most recent of the program changes, induced by PRWORA 1996, narrowed eligibility criteria, but there are several others (including the Zebley decision which had widened eligibility criteria). These changes affected certain identifiable groups, but did not affect other groups. The SSA data allow us to construct large samples. To implement the empirical analysis, we propose to use data on earnings for the child and his/her parents matched to detailed information on SSI program participation. The PI is

currently analyzing SSI administrative data for a related SSA project. Information on employment and earnings is available in the OASDI earnings records, which can be analyzed in grouped form if necessary for confidentiality reasons.

Together these program changes and these data will allow us to construct difference-of-differences (DoD) estimates of the labor supply effects of these changes. Specifically, we will examine the work and earnings of both the children and their parents before and after changes in SSI eligibility status induced by changes in Childhood SSI program rules. We can use similar age transitions from earlier periods to control for maturation effects, and use non-terminated children to control for time-period/business cycle effects. These estimates will be of interest both to SSA in designing the SSI program, and more generally to the larger poverty and disability research community for estimates of the labor supply effects of transfer programs.

B8. Transitions to Adulthood by SSI Children – J. Klerman

With the growth and maturation of the Childhood SSI program, a large and expanding number of children are poised to make a transition from the childhood SSI program to the adult SSI program. PRWORA's SSI reforms should make such transitions less likely both because they shrink the size of the Childhood SSI program and because they include Continuing Disability Reviews (CDRs) both periodically and when children reach majority. Relatively little is known about the number of children poised to make this transition, the frequency with which they make the transition, the prevalence of work (for those who do and do not enter the adult SSI program), and the effects of the PRWORA reforms on these outcomes.

We propose to explore each of these outcomes using SSA administrative data. In particular, we will explore the number and characteristics of children poised to make the transition from the childhood SSI program to the adult SSI program and the frequency with

which they do so using SSA data on SSI payments. As part of RAND's ongoing analyses of the effects of the PRWORA reforms on the childhood disability program, we have developed a file specification (and work with SSA to create the files) that allows us to explore SSI program dynamics of this type. We will explore the outcomes of Continuing Disability Reviews in the late teens and at achieving majority using Office of Disability records on the outcomes of these disability reviews. Finally, we will explore earnings of recipients (and former recipients) as they make the transition to adulthood using SSA earnings data. Each of these data sources span the pre- and post-PRWORA period allowing us to explore changes with the reform legislation.

B9. Lifetime Models of Disability Insurance Applications: Econometric Models and Microsimulation Projections – D. Wolf, R. Burkhauser, J.S. Butler

In their current work on Disability Insurance application (Burkhauser, Butler and Weathers 1999) and in their proposed work funded by the Social Security Administration, Burkhauser, Butler and Wolf assume the onset of a health condition that triggers the decision to apply for Disability Insurance benefits is exogenous. In the proposed project, we extend these models by making the onset and continuation of disability status endogenous. While onset of disability is to a great extent a random event, we anticipate finding systematic differentials in the relative risks of this event according to occupation and industry (proxies for the inherent dangers of the workplace), education, marital and family status, and behavioral risk factors (e.g. smoking, alcohol usage). There are, in addition, substantial unmeasured sources of heterogeneity in the relative risks of disability incidence. Of particular importance in our work is the possibility of correlations between the unmeasured factors influencing the onset of disability and other endogenous variables in the model, including current (and hence future streams of) earnings and nonwage income, and the decision to apply for Disability Insurance benefits. We will produce

reduced-form and structural-form versions of the Disability Insurance benefit-application model with endogenous onset of disability, and use the model as a basis for microsimulations at several levels of detail. These include simulations for “illustrative individuals” (the analytic counterpart to the “representative individual” used to determine, for example, rates of return to contributions to the Social Security program); cohort simulations, and simulations of the residual lifetime experiences of respondents to cross-sectional surveys such as the DES, or panel surveys such as the HRS.

B10. Effect of Benefit Generosity on DI Applications -- J. Bound and G. Solon

The purpose of the proposed research is to estimate the effect of program generosity on applications for Social Security Disability Insurance (DI) benefits. While legislative changes in the formula used to calculate Social Security benefits have had dramatic effects on typical replacement rates, the mandated increases that occurred during the late 1960s and early 1970s were particularly dramatic for those with low earnings, and were virtually non-existent for higher earners. As a result, it should be possible to gauge the impact of benefit levels on application rates by comparing changes in application rates for high versus median versus low earners using the Continuous Work History Sample. This kind of difference-in-differences methodology has previously been used successfully to study the effect of screening stringency and unemployment on applications for DI, but has not been previously used to study the effect of benefit levels on applications. It represents a significant improvement over previous research designs that use either aggregate time series or cross-sectional data.

B11. Analysis of SSI Participation by Parents -- D. Stapleton and D. Wittenburg

We propose to explore the SSI participation of parents of minor children, especially unmarried women, following the same general approach we have proposed for studying DI

participation by parents in year one. We understand from SSA's Mary Barbour and Charles Scott that SSA might link records from the Master SSI Claim System (MSSICS) to the SSR, at least in part to add family background information on SSI claimants that can be used to identify parents. Evidently, the data have been collected since 1994, although complete files might only be available from 1997.

B12. Disability and the Family – M. Favreault, F. Sammartino, and S. Bell

The ability of disabled persons to work and to sustain a maximum level of economic independence is influenced by the extent and type of support provided by families and other social networks. The onset of a disability, however, may strain those support networks, leading to economic hardship for the family and even to family dissolution. Events such as divorce compound the economic hardship of a disability, and cause disabled persons to rely more heavily on public support programs such as SSDI and SSI. A potentially fruitful area of public policy research, therefore, is to investigate the extent to which family support arrangements help the disabled remain economically independent, and whether policies that maintain or strengthen family support networks are an effective complement to rehabilitation and training programs.

The research will use data from the HRS and pooled SIPP panels, in both cases matched to SSA data. Three separate, but related projects are proposed, as described below. Once we have completed these, we will explore whether the results can be integrated into existing dynamic microsimulation models, such as the Urban Institute's DYNASIM model and the Social Security Administration's Model of Income in the Near Term, to produce more realistic projections of life trajectories for members of the DI and SSI-disabled program populations.

(a) Family Support, Social Networks, and Workforce Attachment of the Disabled -- We propose to investigate the impact of family support arrangements and social networks on the probability that a disabled person is able to continue to work. We will use self-reported health status information

and, where possible, diagnostic information from administrative records, to consider whether perceptions of and responses to disability onsets (e.g., time to application for some form of public benefits) vary based on marital status, spouses' characteristics, kin availability, and other measures of social support and social integration.

(b) Disability and Divorce -- We propose to analyze whether the onset of a disability alters family structures through divorce. We will estimate a model of divorce that measures the impact of a disability on the marital status of disabled adults and also on the marital status of caregivers such as parents of disabled children and children of elderly disabled parents.

(c) The Long-Term Effect of Disability on Family Economic Resources -- We will examine the long-term effect of a disability on total family economic resources. While the most important of these is the loss of earnings of the disabled person when that person is a primary wage earner, a disability also can reduce the earnings of non-disabled workers if they spend time caring for a disabled spouse, child, or elderly parent. In some instances family members may instead increase their labor force effort in order to offset another family member's earnings loss. In addition to reduced earnings, the family can also suffer a loss in future earnings related retirement income such as private pension and Social Security retirement benefits, and in income from private saving. We propose to estimate the long-term impact of disability on family income and wealth.

B13. Long-Term Financial Consequences of a Disability Spell – C. Panis

The poor health of workers who receive DI is often associated with reduced earnings prior to the onset of a disability, very low or no earnings during DI receipt, and reduced earnings after recovery. This project will create a comprehensive measure of the long-term financial consequences of a spell of disability receipt, incorporating not just reduced own earnings, but also spousal (caregiver) earnings, out-of-pocket medical expenses, SSI receipt, and the value of

continued Medicare coverage. Special attention will be given to the experiences and selectivity of the 11 percent of DI claimants that terminate DI due to medical or work recovery. We will use 1990-1993 SIPP data, matched to SSA program data on earnings, benefits, and health. The resulting financial impact measure is of interest in its own right and will help understand the effectiveness of SSI/DI work incentives and employer accommodation requirements

B14. Determinants of Exit Rates from DI – G. Jakubson

This project will examine the determinants of the exit rate from the SSDI program. It will ask whether these have changed over time in response to changes in the program, the extent to which they vary by type of disability, and examine the effectiveness of interventions such as Vocational Rehabilitation on the exit rate. Matching the 831 records with the Continuous Work History File will enable one to look at the effects of the patterns of past work experience on both entry into and exit from the DI program. Further matches with the SIPP and/or CPS will allow one to consider the effects of demographics, and matches with EIN based data should allow one to consider regional and industry variation in these responses.

B15. The Implications of Welfare Reform for Child SSI Recipients in Foster Care -- R. J. Avery and J.S. Butler

This study will use the national state-level data from the Adoption and Foster Care Analysis and Reporting System (AFCARS), archived at Cornell University, to examine the impact of welfare reform on the foster care SSI populations by state during the period of welfare reform implementation (1990-2004). The study will examine changes in the number of SSI eligible children, the nature of child disabilities by category, other sources of financial support (Title IV-E, TANF, etc.) received by these children. Data from the multi-year Urban Institute

research project, "Assessing the New Federalism," will be used to monitor changes in state SSI eligibility definitions during the study period.

AFCARS data will be combined with changes in SSI eligibility definitions during the study period. Aggregated state-level data on the number of SSI eligible children, the nature of child disabilities, and other sources of children's financial support (e.g., Title IV-E and TANF) during the period of welfare reform implementation (1990-2004) will be explained using regression analysis with state and time fixed effects, state-level demographic and political characteristics, macroeconomic policy and results, and SSI eligibility policies. The effect of SSI eligibility policy could be small if policy changes follow macroeconomics and existing patterns of state-level variation in welfare policy or large if there are significant changes of direction in policy

B16. State-Based Explanations of SSA Program Operations and Declines in Income among Persons with Disabilities – S. Bell

The role of state-level factors in shaping outcomes for SSA's DI and SSI programs is often overlooked and rarely examined by research. Yet, employment options for people with disabilities and their use of public supports are influenced by several state-level factors:

- non-federal income support programs (e.g., unemployment insurance, general assistance)
- work incentives and disincentives (disability allowance/review, interaction of SSI and welfare programs, availability of Medicaid outside SSI)
- return-to-work services and supports (state VR programs, availability of private sector services, strength of the advocacy community)
- state and local labor market conditions (e.g., unemployment rate, occupational mix).

This paper is envisioned as the first in a series examining state-level differences in income, employment, and benefit dependence for people with disabilities in light of these state-determined factors, with implications for SSA policy and federal-state collaboration.

The current paper focuses on the recently discovered--and quite troubling--national decline in income among people with disabilities during the 1990s. It seeks to discover how state actions influence the economic well-being of Americans with disabilities and, in the process, SSA's disability programs and trust funds. Two robust micro-databases will be used:

- SSA administrative records of DI and SSI receipt and annual earnings, and
- the National Survey of America's Families (NSAF), a series of large state-representative surveys of individuals and families.

The NSAF--developed by the Urban Institute's *Assessing the New Federalism* project--provides more all-in-one-place information on the economic, family, and health circumstances of individuals and families than any other national database of the late 90s. Each wave of interviews ('97, '99, planned for '01) covers over 70,000 adults, 8,000+ of whom report work-limiting disabilities. Large, statistically representative samples are available for each of 13 states --AL, CA, CO, FL, MA, MI, MN, MS, NJ, NY, TX, WA, WI--and the nation. A rich array of analysis variables strongly complements program data from SSA when doing state-level analysis.

The proposed paper will examine previously-reported national declines in income among persons with disabilities in an independent national database, using comprehensive income data and a range of disability measures from the NSAF. Analysis by state will determine if this national pattern varies. Income measures from the survey (e.g., welfare benefits, total income)

and SSA administrative records (e.g., DI and SSI payments, earnings) will then be related to state-level economic and policy variables and individual characteristics to answer four questions:

- To what extent are differences in income trends across states attributable to state policy and economic variables as a group, as opposed to individual and family characteristics?
- Which state-level factors matter most, programmatic practices in the state-influenced policy areas noted above (where measurable) or economic circumstances?
- Do states that appear to do more to help families with disabilities maintain their incomes (through work assistance and/or financial support) show less decline, or even growth?
- What is SSA's stake in these trends, particularly as concerns the state policy and program actions over which it currently has only limited control?

B17. State Program Clients Who Appear to Meet SSA's Medical Eligibility Criteria, but Are Not Receiving SSA Benefits -- Follow up Study – C.Sweet, G. Pransky, and R. Fitzpatrick

In the first year we will have examined a cohort of individuals not receiving SSI/DI benefits but who applied for Massachusetts disability-based benefit programs and were found by UMassMed Disability Evaluation Services to meet SSA's medical eligibility criteria. We will continue to follow this cohort (approximately 3,500 individuals) to determine who is subsequently approved for SSA benefits, who reapplies for state benefits, who continue to meet SSA medical eligibility criteria but do not receive SSA benefits, and who leaves public assistance, by returning to a higher level of function or returning to work. other characteristics of the 3500 individuals. UM-DES has developed cooperative agreements with disability determination programs of two other states. We plan to expand the study to these jurisdictions during follow up years. In addition, a more advanced Oracle-based database is under development and due for implementation at DES in 2001. This will allow analysis of all DES

cases with minimal additional data entry. DES will pursue links with external databases that contain SSA data including utilization of SSA-funded vocational services and data regarding work participation.

C. The Non-SSA Program and Policy Environment

Projects C4 and C5 are alternate first-year projects, and the remainder are for years two through five.

C.4. Changes in SSI/DI Benefits and Employment of Persons Served Through Comparable VR Programs: Cross-Validation of Findings of the National Results Council (alternate) – F. Menz and W. Niederloh

Objectives: The National Results Council (NRC) is a not-for-profit organization established to provide comparative outcome data on the effectiveness and efficiency of vocational programs provided through non-profit community rehabilitation programs (CRPs). The objectives of this study are to use SSA administrative data to validate reported employment data, estimate effects of CRP services on receipt of SSI/DI benefits, and otherwise explore the usefulness of the SSA data in supplementing the NRC data. This study addresses Priority Issue 2, with regard to measuring the effectiveness of VR.

Background: Service programs covered by the NRC system are typical of those provided under various names through CRPs: (a) employment development, (b) job placement, (c) occupational skills training, and (d) supported income (e.g., supported employment). Consumer outcome data are collected through provider follow-ups of completed consumers 120 days following services and through NRC secondary follow-ups, to verify efficacy of agency reports. Using data submitted by CRPs according to NRC specifications, quarterly performance of participating CRPs is reported (a) by provider and vocational program, (b) between providers

by vocational program, and (c) by ranking like programs in terms of effectiveness (placement rates, hourly and average earnings) and efficiency (adjusted cost to obtain successful outcome rates). A regression model is used to adjust effectiveness and efficiency scores by accounting for barriers represented for individuals (e.g., transportation, disability, prior employment) and local economic conditions (e.g., unemployment rate).

Although nearly four million people receive services through CRPs annually, there is no single, national database documenting client outcomes from vocational services. NRC's is the only effort to develop, implement, demonstrate, and market an outcomes system that would permit outcome comparisons among like VR services provided through CRPs. The Research and Training Center (RTC) at the University of Wisconsin-Stout is collaborating with the NRC (under funding from the RSA) to determine the validity and utility of outcome data compiled through the NRC system for program improvement, meaningful program comparison, and informing practitioners, consumers, and various publics about the value and benefits derived through selected vocational programs.

Data: The NRC Excellence Database includes nearly 13,000 individual records from 38 programs (representing more than 2 years of data) and at least 20 additional programs (with approximately 1 year data) distributed across the United States. Data on client reliance upon public sources are not collected through the NRC system or CRPs, and the accuracy of employment outcomes data is dependent on self-reports. We propose to link SSA administrative data and a subset of NRC data to obtain SSI/DI utilization and Social Security earnings.

Analysis: We would use the linked data (a) to validate reported earnings and/or employment participation of recipients of these VR services, (b) to estimate longitudinal changes in receipt of Social Security payments among participants of these vocational programs, and (c)

to explore the applicability of the SSA data for supplementing outcomes measures obtained through the NRC system.

C5. Employment and Use of Vocational Rehabilitation Services Among SSI/DI Recipients with Serious Mental Illnesses (alternate)—A. Henry, and W. Fisher

Objectives: We propose to use SSA and Massachusetts databases to examine employment and the use of public VR services by SSI/DI recipients who have severe mental illnesses (SMIs). This study will address research Priority 3, concerning barriers to employment for persons with SMI and characteristics of those with SMI who work. This study could be replicated in other states in future years.

Background: The labor force participation rate (LFPR) for persons with SMI trails participation by those with other disabilities. While there was an overall increase in the LFPR for all disability groups between 1983 and 1994, the gap between those with SMI and other disabilities remained constant (Trupin, Sebesta, Yelin & LaPlante, 1997). Anthony and Blanch (1987) suggest that 85% of persons with SMI are unemployed at any given time; no recent study has challenged this estimate. SMI is the most prevalent impairment among SSI recipients and the secondmost common among DI beneficiaries. Moreover, people with mental illness are among the most likely to remain on disability (General Accounting Office, 1996; Social Security Bulletin, 1998).

Despite this high unemployment rate, many people with SMI want to work (Rogers, Walsh, Masotta, & Danley, 1991; Henry and Lucca, 1999). The increase in community-based employment services, advances in pharmacological treatments for SMI, and the current low unemployment rates nationwide suggest a positive employment outlook for persons with SMI. However, there is little evidence to suggest that this is occurring.

Clearly, there are other barriers to employment for persons with SMI beyond those presented by the disability. Consumers with SMI and employment service providers have identified a range of social-environmental factors that inhibit employment for this group of individuals (Henry & Lucca, 1999). Among these are the complexity, misinformation and work disincentives associated with the SSI/DI benefits. Persons with SMI on SSI/DI are reluctant to risk their benefits, particularly health benefits, by working. Whether the risks are actual or perceived, it is clear that many persons with SMI choose not to work or to be intentionally underemployed because they fear loss of benefits. In fact, employment service providers acknowledge that they often assist clients with SMI to limit earnings to just below the level which would jeopardize their disability benefits.

Among DI/SSI beneficiaries with SMI, there are three groups of individuals: 1) those receiving disability benefits and not currently working; 2) those receiving disability benefits who are currently working (i.e. the potentially "under-employed"); and 3) those who previously received disability benefits and who are currently working.

Data: We will extract data from two sources: 1) the SSA databases (MBR, SSR and Social Security earnings records) and 2) publicly-funded VR service record in Massachusetts, including the Massachusetts Rehabilitation Commission (MRC) database (RSA-911 [Case Service Reports]) and Department of Mental Health-funded employment service databases (the Clubhouse Coalition Employment Survey [CCES] and Services for Employment and Education Information System [SEEIS]). The PI is currently collaborating with the Clubhouse Coalition and Supported Employment Programs in Massachusetts on other projects that involve accessing the CCES and the SEEIS. The MRC has agreed to participate with UMMS in this endeavor. If SSA earnings data are unavailable, work force involvement and earnings will only be available

for those individuals who participate in VR services, so the earnings analysis will be on this subset only.

Initially, persons with SMI who either are currently or have been SSI/DI recipients in the past five years will be identified using the SSA database. Using SSNs, we will link these individuals to VR databases (MRC and DMH) to determine their use of employment services. We will also retrieve data on participants' employment status and earnings from the SSA database over the five-year time frame. If we are unable to use the SSA data, the study will still be able to examine groups 2 and 3, and transitions between these two groups, although this would obviously diminish the value of the study. Lack of access to the SER only would be less problematic, but we would have to rely on self-reports of earnings for those not captured in the VR database; this is particularly problematic for those who receive DI only.

Analysis Methods: We will follow the three groups of SSI/DI recipients for a period of up to five years to determine their involvement in employment and their use of employment services. Several questions will be answered: How many people are there within each of these three categories? Are there other factors (e.g. age, gender, education level, diagnosis, employment prior to disability) that predict employment or disability status? How much are individuals working/earning? To what extent do individuals move among these three groups? To what extent do persons in each category use publicly-funded employment services such as state VR agencies and state mental health funded services?

We will begin by producing descriptive statistics for each group and movement among groups. We will then use polychotomous logistic regression to predict group membership at one point in time. We will use Markov models to analyze transitions among the three various groups over a period of time. If the number of transitions observed is sufficient, we will use

duration/hazard models (i.e. Cox proportional hazards models) to examine the correlates of transitions.

C6. Evaluating the Long-Term Impact of Vocational Rehabilitation Interventions --

P. Wehman, D. Dean & J. Kregel

This project would build on a first-year project in which we will have developed combined data sets derived from the Virginia Department of Rehabilitative Services (DRS), the Virginia Employment Commission (Unemployment Insurance), and the Social Security Administration (SSA). The matched data sets contain information on consumer demographics, amount (cost) and type of vocational rehabilitation (VR) services provided, earnings (both pre and post-VR services), and SSA benefits status and use of work incentives. The sample consists of all SSI/DI recipients for VR services in Virginia in 1997. A comparison cohort will be developed comprised of individuals who were accepted for services, but who never received services (program dropouts).

There are numerous investigations that can be undertaken with the employer-provided quarterly earnings records available on the state-level Employment Commission records. This file contains more detail that will be contrasted with the annual earnings that are contained on the SSA earnings summary record. There are three extremely important refinements available with these earnings records.

First, the quarterly earnings allow for an examination of an SSI/DI recipient's earnings relative to the SSA annual earnings ceiling. This ceiling leads to the "notch" effect wherein people alter their employment to maintain their DI eligibility. With quarterly earnings it is possible to determine the nature of this behavior. Is the individual working sporadically for the same employer (e.g., two quarters out of four) or continuously on a part-time basis? Another

possibility is that the individual leaves employment, as the ceiling earnings are approached and then moves eventually to new employment.

Second, the quarterly earnings are also much more useful in determining the duration of employment and, conversely, unemployment spells. This information is useful for intervals both prior to and post application for VR services. For example, another benefit of quarterly earnings is that one can more accurately "align" the person's earnings stream around a given date. It is particularly helpful in examining the phenomenon of "pre-program dip" in earnings. An obvious example for investigation is the employment patterns of DI beneficiaries from disability onset to application for DI or VR services. What is the rate of deterioration in earnings? Do these earnings drop off precipitously, as would be expected with a traumatic injury, or is there a gradual decline in earnings as one falls temporarily off their lifetime earnings path?

Third, the Employment Commission earnings in each state have an employer identifier. This allows for examination of job mobility, both pre and post VR intervention for DI beneficiaries. Because earnings are reported for each quarter it is easier to infer whether two jobs are held concurrently or consecutively. This information will aid in determining job retention with a given employer.

Analyses will be conducted based on type of disability (psychiatric disabilities, brain injury, etc.), as well as type of service program (supported employment, transitional employment, etc.). Another potential application is examining WC claimants who ultimately apply for DI benefits. There are several data elements collected for injured workers that are useful. The "first injury" report is mandated to contain the date of injury. Subsequent updates to the claimant file contain the date of "maximum medical improvement". At this time a permanent impairment rating, ranging from 0 to 100% is assigned. Merging this information with the

quarterly earnings file allows for examination of the deterioration in earnings, while controlling for severity of the impairment. In later projects, it might be feasible to replicate the analyses with data from other states.

C7. The Impact of the Massachusetts CommonHealth Program on SSI/DI Recipient Return to Work -- R. E. Glazier, J. Himmelstein

The Work Incentives Improvement Act (WIIA) of 1999 expands States' ability to provide a Medicaid "buy-in" to individuals with disabilities who return to work, as it is a major premise of the WIIA that fear of losing Medicaid coverage is keeping many SSI/SSDI beneficiaries from returning to work. Massachusetts has a mature Medicaid buy-in program, CommonHealth, for working persons with disabilities that can inform implementation of this WIIA provision by the States. Dr. Glazier has gained a special knowledge of the importance of WIIA's Medicaid buy-in provisions through his experience as a DI beneficiary who returned to work, a former VR consumer, and as a beneficiary of the CommonHealth program.

Glazier will collect qualitative data on CommonHealth, using key informant telephone interviews with program administrators and officials in related offices and agencies, as well as focus groups with different types of consumers in different parts of the state. Glazier and Himmelstein will perform statistical analyses, both descriptive and econometric, of available program data (numbers and types of working enrollees; utilization and cost data by key demographic and other variables; mean, median, and total premiums collected; estimated additional income tax revenues; projected estate recoveries, etc.). They will then synthesize the qualitative and quantitative findings and prepare a report that examines the projected consequences for comparable States of implementing a Medicaid buy-in program for persons with diverse disabilities, including chronic mental illness (CMI), who are returning to work.

C8. Transition of Medicaid Adults onto SSI -- B. Burwell, J. Himmelstein

In our year one study, we will have investigated the dynamics of transition from Medicaid to SSI in Massachusetts. This study will build on the Massachusetts analysis by evaluating the experience in four other states, using the MEDSTAT Medicaid data. Each state will be analyzed separately using the Cox Proportional Hazards Techniques described in the year one analyses. Using meta-analytic techniques (Hedges and Olkin, 1985), we will test for the consistency of effects for demographic, disabling diagnosis, and Medicaid resource utilization variables among the various states.

C9. Comparative Impact of Community-based Employment and Training Services: Cross-validation of Outcomes and Benefits -- F. Menz

This study would cross-validate and expand upon findings regarding comparative outcomes from employment and training services funded primarily by vocational rehabilitation (VR), mental health (MH), developmental disabilities (DD), and states' workforce development efforts (WFD). Field derived data (on individuals, services, and impact) for 1800 persons and 90 programs would be combined with Social Security (SSA) data to validate findings respective to (a) changes in need for SSI and SSDI as a function of service and selected funding models; (b) labor force participation subsequent to vocational services and over a period meaningful for program planning purposes (e.g., 9 months post-services); and (c) degree to which self-report of subsidy, earnings, and workforce participation are in agreement with SSA and other earnings data. The results will help to better understand the utility of SSA data and the applicant's outcomes, service, and costing instrumentation for evaluating the comparative impact of service models among targeted recipients of social services. Findings may also better inform recommendations regarding funding and program policies that affect employment, training, and

rehabilitation services provided to working age adults with various disabilities, youth in transition, and others who face barriers to their employment (e.g., intergenerational unemployment, welfare, economic dislocation, public offenders) by approximately 7000 organizations, nationally.

Current research is collecting extensive program, consumer, cost, and outcomes data from a stratified sample of 100 community providers and 1800 individuals across the United States. Sites and subjects are selected based upon reputed quality of employment and training programs; whether services are provided under funding from VR (as a primary treatment) and MH, DD, and/or state's WFD programs (alternate, comparison treatment); and that consumers with characteristics of interest to the study (e.g., ethnicity, disabilities, working age) are available to the research. Instrumentation to guide for selection of sites and subject; profile organizations, services, and service recipients; capture costs and recovered costs for serving; and define models and practices based upon processes, opportunities, for choice, satisfaction, and achieved outcomes of consumers have been developed, tested, and are in use. Reliability and validity studies on the Employment Outcomes Instrument, an interview protocol for assessing immediate and sustained benefits of services (e.g., changes in employment, quality of employment, earnings and economic self-sufficiency, need for subsidies, quality of life) are currently being conducted.

C10. The Effects of Medicare Eligibility on Participation in DI - J. Bhattacharya, M. Schoenbaum, and T. Waidmann

One of the core provisions of DI is that participants are eligible for Medicare after 24 months. Previous research has shown that access to health insurance is a major determinant of labor force decisions such as whether to retire or change jobs, especially among people in poor health. Perhaps surprisingly, however, no research has evaluated the effects of DI's Medicare-eligibility provision on individuals' decisions to apply for DI. Nor do we know of research on the effects of Medicare eligibility

on the probability that individuals exit DI, although the passage of WILA – which extends the period of Medicare eligibility after DI exit – suggests policymakers believe it to be important. The specific aims of this proposal are to assess the marginal effects on DI application and exit rates of the fact that DI recipients are eligible for Medicare.

Access to Medicare is a valuable medical benefit for those on the DI program (for instance, in 1997 the average annual DI benefit was around \$8700, while annual Medicare reimbursements per DI recipient were nearly \$5000). However, the value of the Medicare benefit is not uniform across all potential and actual recipients of DI. In particular, Medicare is most valuable to those who have no other health insurance plan and to those enrolled in plans that are less generous than Medicare. The fact that the value of the Medicare benefit is uneven suggests an empirical strategy that we will exploit to identify the effect of Medicare on DI application rates and exit probabilities. All else equal, those with readily available health insurance from other sources (such as retiree health insurance or health insurance through a spouse) should be less likely to apply for the DI benefits (since the benefits of DI are less while the costs of application are the same), and more likely to exit DI if their health improves.

A second strategy is to take advantage of the recent extension of Medicare eligibility from four to six years after exiting DI. For those near retirement age, this extension is likely to have no effect on marginal benefit of obtaining Medicare through DI, since the elderly automatically qualify for Medicare at age 65. Using this asymmetry in the effect of Medicare for different age groups induced by the new law, we can estimate how much of an effect Medicare has on both DI application and exit probabilities.

We propose to use the HRS as our initial source of data for this research. Other potential data sources include the National Health Interview Survey (NHIS), and the Current Population Survey (CPS), linked to SSA records. NHIS and CPS also assess health insurance and economic status, and both cover large samples across all ages. However, the surveys do not assess the potential availability of health insurance from various sources, which would need to be imputed from other data. In addition, DI application would need to be assessed from SSA records, and we will need to investigate whether matching NHIS and SSA records will be feasible.

C11. Transitions of Disabled Medicaid Children to SSI – B. Burwell

Prior research conducted by MEDSTAT showed that children with severe disabilities on the Medicaid program tend to be younger than children receiving SSI cash assistance (Burwell et al., 1997). For example, in four study states, over half of children identified as having a severe disability enrolled in Medicaid were age five or younger, while in the same states, less than 20 percent of children receiving SSI were under age six. Research conducted by Perrin et al (1998), also found that many children newly enrolled on SSI had prior health insurance coverage under Medicaid. The proposed study would continue this research by examining transitions of children with severe disabilities receiving Medicaid onto SSI. Data sources for the study would include Medicaid administrative data from states using MEDSTAT information systems, matched to SSI administrative data. Using diagnostic and utilization criteria, the study would identify an analytical population of children on Medicaid under the age of 10 in a base year. The study would first compare the characteristics of children in the analytical population receiving both Medicaid and SSI, versus those receiving Medicaid coverage only. Second, the study would analyze transitions of the Medicaid-only group in two follow up years. Outcomes of interest in follow up years include Medicaid and SSI enrollment status, as well as death. The study would identify factors which predict subsequent SSI enrollment of the Medicaid-only group, as well as other outcomes.

D. Clinical Conditions and Treatment

All abstracts in this category are for years two through five.

D2. Replication of Massachusetts Novel Anti-Psychotic Research in Other States -- B. Burwell, A. Henry

In a first year project, we proposed to examine the relationship of the use of novel anti-psychotic medications to use of vocational rehabilitation services and employment outcomes among consumers with schizophrenia-spectrum disorders who are receiving publicly-funded clinical and vocational rehabilitation/employment services in Massachusetts. Novel anti-psychotic medications (e.g. clozapine, olanzapine, risperidone, quetiapine) have been shown to have many advantages over "conventional" medications (e.g. chlorpromazine, thioridazine, haloperidol) that have been used to treat schizophrenia since the mid-1950's (Breier & Hamilton, 1999; Keck & McElroy, 1997). Outcomes for those who have been treated with novel anti-psychotics will be compared to outcomes for those treated with conventional anti-psychotics, using a propensity score to control for differences in severity of the disease. In years 2-5, we will expand this project to four additional states. Individuals on novel and conventional anti-psychotics will be identified using the MEDSTAT database. We will link these individuals to state VR agencies databases (RSA-911 [Case Service Reports]), and, if feasible, matched data from SSA's Master Beneficiary Record, the Supplemental Security Record, and/or the Summary Earnings Record. If SSA earnings data are unavailable, work force involvement and earnings will only be available for those individuals who participate in VR services, so the earnings analysis will be on this subset only.

D3. Novel Anti-psychotics for Mood Disorders: A Multi-State Comparison --A. Henry, B. Burwell

In recent years, the use of novel anti-psychotic medications (e.g. olanzapine, clozapine) has been extended beyond the treatment of schizophrenia-spectrum disorders to the treatment of

psychotic mood disorders, such as bipolar disorder and psychotic depression (Rothschild, Bates, Boehringer, & Syed, 1999; Tohen, Sanger, McElroy, Tollefson, Ghengappa, Daniel, et al., 1999). In the treatment of psychotic mood disorders, novel anti-psychotic may be singly or in combination with conventional medications such as antidepressants or mood stabilizers. While there are reports of the efficacy of novel anti-psychotics in symptom amelioration for psychotic mood disorders (e.g. Ranjan & Meltzer, 1996; Rothschild, et al., 1999; Tohen, et al., 1999), there is virtually no research on the relationship of these medications to functional outcomes or quality of life. In this project, we will continue our line of inquiry into the relationship of the use of novel anti-psychotic medications to use of vocational rehabilitation services and employment outcomes among SSI/DI beneficiaries, focusing on the use of these medications with individuals with mood disorders. Outcomes for individuals with mood disorders who have been treated with novel anti-psychotics will be compared to outcomes for those treated with conventional medications in five states. As in the first year study, we will use a propensity score to control for differences in severity of the disease. Individuals with mood disorders treated with novel anti-psychotics and a comparison group (persons with mood disorders not treated with novel anti-psychotics) will be identified in the MEDSTAT and Massachusetts Medicaid databases. We will link these individuals to state VR agencies databases (RSA-911 [Case Service Reports]), and, if feasible, the matched data from SSA's Master Beneficiary Record, the Supplemental Security Record, and/or the Summary Earnings Record, to examine workforce participation and earnings among the two groups.

D4. Adherence to Mental Health Treatment Guidelines: Impact on Vocational Outcomes for SSI Mental Health Patients -- A. Henry, J. Himmelstein

Major mental disorders are among the most disabling of conditions. Persons with mental disorders are among the largest group of SSI/DI beneficiaries and are the least likely to leave the disability rolls. In recent years, the American Psychiatric Association (APA) has developed practice guidelines for the treatment of most major mental disorders, including schizophrenia, major depression, bipolar disorder, and anxiety disorders. Although the guidelines vary for specific disorders, the guidelines for each disorder suggest that a combination of somatic and psychosocial interventions is the most effective (APA, 1996; APA, 1997). The proposed study would examine the medical utilization and vocational outcomes for SSI/DI beneficiaries with mental disorders who receive treatment according to APA practice guidelines in comparison to those who do not. Using the Massachusetts Medicaid data, we will identify individuals who are receiving a combination of therapies (e.g. clinically appropriate medication and psychotherapy by diagnosis) and those who are receiving only a single intervention (e.g. medication or psychotherapy alone). These individuals will be linked to SSA's Master Beneficiary Record, the Supplemental Security Record, and/or the Summary Earnings Record to examine workforce involvement and earning among the two groups.

D5. Analysis of Health Care Utilization of the Massachusetts SSI population -- J. Himmelstein, B. Burwell

The investigators will perform a detailed analysis of the Massachusetts SSI population focusing on adult and youth beneficiaries with mental and musculoskeletal disorders. The Massachusetts Division of Medical Assistance (DMA) receives weekly data transmissions from SSI's State Data Exchange (SDX) that are used to accrete/maintain information about recipients

who meet SSI's income and other eligibility criteria. (Note: Massachusetts is an "auto-accrete" state). The DMA maintains detailed data on payments to all providers and service types, including pharmacy expenses. The initial study will provide detailed information on the types of services and associated expenses for this population, and establish an approach for evaluation of the appropriateness of services received in relation to the primary disabling diagnoses. We will also be able to perform a longitudinal analysis to evaluate changes in the types of services used given changes in the health care delivery systems offered to Medicaid beneficiaries (e.g. Managed Care and Managed Behavioral Health Services).

D6. Describing the Clinical and Functional Characteristics of SSI Adults Using Linked SSI and Medicaid Administrative Data Sets – B. Burwell, J. Himmelstein

Given the relatively high consumption of public resources by SSI recipients under the age of 65, more detailed information on the characteristics of the SSI adult population is desirable. Independently, SSI administrative data and Medicaid administrative data provide incomplete information on the functional and clinical characteristics of this population. Data sets which link SSA administrative data with Medicaid administrative data, however, would provide a more robust portrait of SSI adults. The proposed study would link SSA administrative data on SSA adults between the ages of 21 and 65, with Medicaid eligibility and claims records for SSI adults in a select number of states. Medicaid administrative data would be obtained from MEDSTAT information systems maintained for various state Medicaid programs. Diagnosis codes extracted from Medicaid claims submitted by hospitals, physicians, mental health clinics, pharmacies and other Medicaid providers would be used to describe the clinical and diagnostic characteristics of adults receiving SSI cash assistance, as well as the frequency of comorbidities associated with primary disabling conditions, as contained on SSA administrative files. The detailed information

that would emerge from this linked data analysis should prove useful in developing more reliable estimates of future public expenditures for the population, as well as contribute to program development efforts for designing more effective service delivery models to meet their functional and medical needs.

D7. Mental Health Disability Dynamics -- S. Banks, W. Fisher, and J. Himmelstein

There has been a tremendous increase in the number of DI and SSI applications and awards for individuals with mental impairments. It is unclear whether these increases represent a correction of a prior policy, which has inappropriately excluded individuals with mental illness from disability awards, or the admission of individuals inappropriately, through misrepresentation, fraud, or abuse by the applicant. There is a general concern about the duration of disability status for many individuals with mental disorders. This is especially true for the affect and anxiety disorders, which are amenable to treatment (Surgeon General's Report on Mental Illness, 1999).

By combining medical and VR services data with SSA data, we will investigate the dynamics of leaving the disability rolls. A number of the projects in the caseload dynamics section focus on the transition onto the disability rolls, this project will focus on the transition off of the disability rolls for individuals with a disabling diagnosis of mental illness. Using hazard and duration models, the duration of time spent with DI and SSI awards will be modeled with a Cox Proportional Hazards Model. Specifically, time dependent covariates, modeling use of medical, psychosocial, and VR services, will be included in the model to examine the impact of treatment and rehabilitation.

E. Disability Determinations

Project E2 is an alternate first-year projects, the remainder are for years two through five.

E2. Evaluation of SSA Classification Errors (alternate) -- M. Buchinsky and J. Rust

Objective: This study will provide an "audit" of the multistage application and appeal process used by SSA to determine eligibility for disability benefits under its DI and SSI programs. We will estimate the magnitude of classification errors in both initial medical decisions and in the ultimate award decision.

Background: Previous internal and external audits of SSA's disability award process have used the decisions of independent experts to measure true disability status. Smith and Lilienfeld (1971) reported the results of an internal audit of DI awards by SSA's Bureau of Disability Insurance (BDI). Nagi (1969) provided an independent external audit of a sample of 2,454 DI cases. To our knowledge, no recent studies have undertaken a similar assessment of classification errors in the current DI award process. However, a recent GAO (1998) report documents major inconsistencies between initial disability determinations at the DDS stage and the ultimate award at the Administrative Law Judge (ALJ) stage, as well as wide variations across states and between levels of decisions making.

Data: In the absence of an expensive, independent audit of the DI award process similar to Nagi's study, we have adopted an alternative approach to measuring disability status. We claim that individuals' self-reported disability status is a valid measure of true disability status. Specifically, we will use the first three waves of the Health and Retirement Survey (HRS) to identify a sample of individuals who applied for DI or SSI benefits during the years 1990-1996. The HRS survey asked each individual: "Do you have any impairment or health problem that limits the amount of paid work you can do? If so, does this limitation keep you from working altogether?" We hypothesize that a health limitation sufficiently severe to keep a person from working altogether is equivalent to the SSA criterion "inability to engage in substantial gainful

activity.” Therefore, we consider the response to this question as the respondent’s report of “true disability” status.

Serious questions about the validity of such self-reported measures have been raised in the economic literature. Many researchers have suggested that such measures are biased and endogenous, and cannot be trusted to provide a valid or reliable measure of “true disability.” In Benítez-Silva, et al. (1999), we formally test these claims. We are unable to reject the hypothesis that this variable is an exogenous explanatory variable in the application and award decisions. Our findings are consistent with a number of other studies that have failed to find evidence of endogeneity in self-reported health measures. However, these results alone do not establish this self-report variable as a reliable measure of “true disability” status. In order to confirm this claim, we need to impose more structure. In our paper, we introduced the hypothesis of *rational unbiased reporting* (RUR) on a bivariate model of disability reporting and award determination using a subsample of DI applicants. We could not reject the RUR hypothesis for the majority of individuals in our sample. We interpret this as evidence that individuals do in fact report their disability status accurately and truthfully, justifying our use of self-reported disability as a measure of “true disability.”

Methodology: Our classification error analysis involves a comparison of two Bernoulli random variables: SSA’s *award decision*, and the individual’s *true disability status*. The latter variable represents the award decision the SSA would make if it had complete information about the applicant, free of “administrative errors.” If SSA had complete information and made no mistakes, it would evaluate the applicant’s impairment and determine whether the applicant could engage in SGA. If the applicant is incapable of engaging in SGA, SSA’s “correct” decision

would be to award benefits; if not, the applicant should be denied. In practice, SSA's decision often differs from the correct one.

It is possible to observe the SSA's actual award decision as well as the correct decision for respondents who apply for DI or SSI benefits in the HRS sample. Using these data, we can estimate the joint distribution for the actual and correct decision and use it to quantify the magnitude of classification errors. We can compute both the award error rate and the rejection error rate.

We use our HRS self-reported health questions to calculate the magnitude of the classification errors in the DI award process. We compare these error rates to the rates implied by a feasible computerized disability screening procedure that uses an alternative index rule to determine disability status. Our initial results (Benítez-Silva, et. al, 1999) indicate that this alternative screening rule significantly reduces the rates of award and rejection error. In the proposed study, we will process the first three waves of HRS data to analyze the award and rejection errors at each state of the disability award process, analyze the computerized disability screening procedure, and compare it to the existing procedure used by SSA. In future work, we want to apply the model to data from the NSHA. Some respondents who will be given medical exams will move eventually through the DI or SSI evaluation system, and we will be able to test our model with a more conventional measure of true disability.

E3. The Validity of Self-reported Health Measures in SSA's National Study of Health and Activity -- R. V. Burkhauser, J. S. Butler, and J. Himmelstein

The validity of self-reported measures of health has theoretical, structural, and practical implications for modeling and estimating health equations. Self-reported health might be a valid measure of health taking into account factors known only to the individual. Self-reported health

could also be a self-serving way of justifying being out of the labor force. Self-reported health could explain or could be explained by economic activity. Practically, the cost of collecting data on self-reported health is much less than the cost of collecting health data from recall of medical conditions which have been diagnosed or from medical exams. Surveys either must collect self-reported data or must sacrifice space from other topics to collect any other health data. If self-reported health data are valid, the collection of health data is much more feasible.

NSHA will collect data on medical conditions, using extensive medical exams, as well as self-reported measures of health status versus others and versus one's own health in the past. The medical exams are intended to establish who is medically eligible for SSI/DI. The exams provide an opportunity to evaluate the validity of self-reported data, however. Using the medical exams as a direct measure of true medical condition will allow one to estimate the objective validity of self-reported health. The evaluation can also be done by specific conditions, demographic groups, and economic and social conditions (such as for employed or single mothers).

Some of the specific techniques by which the validity of self-reported data can be examined include the following. Pearson, tetrachoric, or polychoric correlation coefficients can be computed to show the degree of correlation between self-reported and medically determined health. Pearson coefficients relate to continuous data, while the others relate to discrete indicators of continuous, latent, normally distributed variables such as health. Scales such as poor, fair, good, excellent or much worse, worse, better, much better are examples of such indicators. The presence or absence of a disease such as arthritis is a binomial indicator of an underlying continuous latent variable.

Multivariate tests of validity include estimating standard models of wages or other outcomes with self-reported or medically determined health measures, then comparing the results on the effects of those and other regressors. If the major results are unchanged, at least qualitatively, then the use of self-reported measures in regressions is reasonable, regardless of the correlations found between self-reported and medically determined health.

If the medically determined health status is itself considered to be subject to some error, then a MIMIC model (multiple indicator, multiple cause) can be used to estimate the underlying true health status. The correlation of that inferred health status with the various measures can then be evaluated as suggested above.

In summary, we propose to carry out a large number of analyses to shed light on the validity of self-reported health measures based on the DES data. The results will provide specific guidance concerning the people, medical conditions, and economic and social situations for which self-reported data are more valid.

E4. Sensitivity and Specificity of Medical Determinations: an Assessment of "Close Call" Cases — Follow up studies -- C. P. Sweet, Glenn Pransky, and Robert Fitzpatrick

This is a follow up to our first-year study assessing the sensitivity and specificity of the review process and determining the extent and nature of close call cases. In subsequent years, we would attempt to develop and assess methods to reduce the number of close call cases, directed by the first-year findings. Subsequent re-determinations (with comparison to expert panel findings) will evaluate the success of this program in reducing the number of close call cases. Findings will have direct implications for improvement of the SSA's disability determination process. In addition, the work status and SSI/DI eligibility of reviewed individuals will be

followed over 2-5 years using SSA databases. This will allow determination of medical, demographic, and prior work factors, which predict future disability or work.

E5. Sources of Cross-state Variation in Allowance Rates – S. Banks, C. Sweet, and J. Himmelstein

The 1998 report from SSA Advisory Board indicates that two million applications are filed with SSA for disability approval annually. The final status (approved/denied) occurs at various stages of an administrative process, with approximately two-thirds of initial applications denied. Many individuals do not appeal their initial denial, although an additional 25 percent of all approvals occur during the appeal process. States differ substantially in their final allowance rates. It has not been reported whether this difference is consistent throughout the determination process. While one possible explanation that is of concern to the Advisory Board in non-uniformity in determination process, there are many others, primarily related to differences in the characteristics of those who apply. This study would build on work we have done in the first-year to characterize denied applicants, to investigate the extent to which cross-state differences in allowance rates can be attributed to differences in applicant characteristics.

E6. Risk Prediction and Prognosis - Development and Application of a New Model to Work Disability, with Implications for Social Security Disability Programs – G. Pransky, B. Webster, and E. Volinn

We are proposing a series of three studies designed to develop new information on predictive factors for outcome and chronicity in musculoskeletal conditions. The primary product for each study will be a specific model for risk prediction, and a screening protocol with sensitivity and specificity characteristics appropriate for practical application. Results will have direct implications for future intervention studies designed to mitigate risk factors. The first

study will identify prognostic factors for future chronicity, based on available administrative information and a brief questionnaire collected at the time of the first visit in work-related low back pain. The second study will examine prognostic factors at the transition between acute and subacute disability in lower back pain and other WC diagnoses, based on information collected at the initiation of case management services in a workers' compensation system. A third study will examine prognostic factors for outcomes in group disability data, and will develop a model that can be applied to Social Security data.

(a) Prognosis at the First Visit -- Subjects will be recruited at the time of first visit to an occupational health provider for low back pain. Administrative and questionnaire data will be collected. Questionnaire will be one page, 5th grade reading level, based on risk factors for chronicity suggested from prior studies of acute and subacute predictive factors, especially those that may be amenable to intervention. Follow-up by telephone at 1, 3 and 6 months to determine symptomatic, functional, and work outcome.

(b) Risk Prediction at Initiation of Case Management -- Using IRIS database, cohorts with selected occupational conditions will be selected (low back pain, upper extremity disorder), using a subset who have a consistent mechanism for referral to case management (threshold of time loss). Initial claims information, additional data entered into the IRIS database by nurse case managers - including disability and intensity matrices - will be applied in a multivariate model to predict length of compensated lost time and outcome within the period of follow-up (minimum 6 - 9 months).

(c) Prognosis in group disability -- Parallel study to (b), use group disability data, and similar model can be pursued using Disability Evaluation Service / SSI data.

E7. Follow-Up to the National Study of Health and Activity -- H. A. Hunt, and K. J. DeRango

Dr. Hunt is co-principal investigator for the NSHA, under contract to Westat, Inc. Dr. Hunt is in charge of the analysis of the main survey, which is designed to answer the policy questions of the study. However, the schedule for the project allows only a minimal time for completion of the policy analyses. There will be a great many issues that will not be sufficiently investigated due to lack of time and the priority of other issues. Dr. Hunt proposes to continue the analysis of these data under the auspices of the proposed Institute. The computer resources and data confidentiality procedures offered by Cornell University will provide an ideal environment for continued analysis of these data. This activity would commence after the end of the currently funded project in the fall of 2002. Other Institute investigators, particularly those involved in the conduct of the NSHA (Burkhauser, Maffeo, and several others at Westat), would likely be involved.

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P-4 Release would disclose trade secrets or confidential commercial or financial information [(a)(4) of the PRA]
P-5 Release would disclose confidential advice between the President and his advisors, or between such advisors [(a)(5) of the PRA]
P-6 Release would constitute a clearly unwarranted invasion of personal privacy [(a)(6) of the PRA]

C. Closed in accordance with restrictions contained in donor's deed of gift.

PRM. Removed as a personal record misfile.

(b)(1) National security classified information [(b)(1) of the FOIA]
(b)(2) Release would disclose internal personnel rules and practices of an agency [(b)(2) of the FOIA]
(b)(3) Release would violate a Federal statute [(b)(3) of the FOIA]
(b)(4) Release would disclose trade secrets or confidential or financial information [(b)(4) of the FOIA]
(b)(6) Release would constitute a clearly unwarranted invasion of personal privacy [(b)(6) of the FOIA]
(b)(7) Release would disclose information compiled for law enforcement purposes [(b)(7) of the FOIA]
(b)(8) Release would disclose information concerning the regulation of financial institutions [(b)(8) of the FOIA]
(b)(9) Release would disclose geological or geophysical information

CURRICULUM VITAE

NAME: Leslie I. Boden, Ph.D.
DATE AND PLACE OF BIRTH: [REDACTED]
CITIZENSHIP: United States
MARITAL STATUS: Married

(C)

ACADEMIC TRAINING

Degree	Discipline	Institution	Date
B.A.	Economics and Mathematics	Brandeis University	1966
Ph.D.	Economics	Massachusetts Institute of Technology	1977

CURRENT POSITIONS

Position	Institution
Professor	Boston University School of Public Health (since 1991)
Chair, Doctoral Program	Boston University School of Public Health, Department of Environmental Health (since 1988)
Member, Steering Committee	Boston Environmental Hazards Center

PUBLICATIONS

1. David H. Wegman, Leslie I. Boden, and Charles Levenstein. Health Hazard Surveillance by Industrial Workers. American Journal of Public Health 65:26-30, 1975.
2. David H. Wegman, John M. Peters, Rudolph J. Jaeger, William A. Burgess, and Leslie I. Boden. Vinyl Chloride: Can the Worker Be Protected? New England Journal of Medicine. 294(12):653-657, 1976.
3. Leslie I. Boden. The Economic Impact of Environmental Disease On Health Care Delivery. Journal of Occupational Medicine 18:467-472, 1976.
4. Leslie I. Boden and David H. Wegman. Increasing OSHA's Clout: Sixty Million New Inspectors. Working Papers 7:43-49, 1978.
5. David H. Wegman, John M. Peters, Lawrence J. Fine, Leslie I. Boden, and William A. Burgess. Teaching Occupational Health to Physicians. Journal of Medical Education. 53(9):746-751, 1978.
6. Leslie I. Boden. Cost-Benefit Analysis: Caveat Emptor. American Journal of Public Health 69:1210-1211, 1979.

7. William J. Curran and Leslie I. Boden. Occupational Health Values in the Supreme Court: Cost-Benefit Analysis. American Journal of Public Health 71:1264-1265, 1981.
8. Leslie I. Boden. Presumptive Standards: A Solution to the Problem of Compensating Occupational Disease? In: J.S. Lee and W.N. Rom, eds., Legal and Ethical Dilemmas in Occupational Health. Ann Arbor Sciences Press. 317-330, 1982
9. Leslie I. Boden and Charles Levenstein. Regulating Safety: OSHA's "New Look." American Journal of Forensic Medicine and Pathology. 3:339-342, 1982.
10. Leslie I. Boden. Workers' Compensation. Chapter 31 of Occupational Health: An Introductory Textbook. Barry S. Levy and David H. Wegman, eds., Little Brown, Inc. 1983. Revised, 1986.
11. Charles Levenstein, Leslie I. Boden, and David H. Wegman. COSH: A Grass-Roots Public Health Movement. American Journal of Public Health 74:964-965, 1984.
12. Leslie I. Boden. The Legal and Insurance Dynamics of Mass Tort Litigation: Comment on Epstein. Journal of Legal Studies 13:507-516, 1984.
13. Leslie I. Boden, Judith A. Hall, Charles Levenstein, and Laura Punnett. The Impact of Health and Safety Committees. Journal of Occupational Medicine 26:829-834, 1984.
14. Leslie I. Boden and Morris Gold. The Accuracy of Self-Reported Regulatory Data: The Case of Coal Mine Dust. American Journal of Industrial Medicine 6:427-440, 1984.
15. Leslie I. Boden. Government Regulation of Occupational Safety: Underground Coal Mine Accidents 1973-1975. American Journal of Public Health. 75:497-501, 1985.
16. Leslie I. Boden. Evaluating Coal Dust Exposure Using Operator-Reported Data. Annals of the American Conference of Governmental Industrial Hygienists 14:521-526, 1986.
17. Leslie I. Boden. Problems in Occupational Disease Compensation. In: Current Issues in Workers' Compensation, James S. Chelius, ed., W.E. Upjohn Institute for Employment Research, 313-325, 1986.
18. Leslie I. Boden. The Impact of Workplace Characteristics on the Costs and Benefits of Medical Screening. Journal of Occupational Medicine, 28:751-756, 1986.
19. Leslie I. Boden. Use of Medical Evidence: Low-Back Permanent Partial Disability Claims in Maryland. Workers Compensation Research Institute. Cambridge, Mass. 1986.
20. Charles Levenstein, David Ozonoff, Leslie Boden et al. The Public Health Implications of the Bhopal Disaster. American Journal of Public Health 77:230-236, 1987.
21. Leslie I. Boden and Carol A. Jones. Occupational Disease Remedies: The Asbestos Experience. In: Regulation Today: New Perspectives on Institutions and Policy. Elizabeth Bailey, ed. Cambridge, MA: MIT Press. 321-346. 1987.

22. Leslie I. Boden. Use of Medical Evidence: Low-Back Permanent Partial Disability Claims in New Jersey. Workers Compensation Research Institute. Cambridge, Mass. 1987.
23. David Ozonoff and Leslie I. Boden. Truth and Consequences: Health Agency Responses to Environmental Health Problems. Science, Technology & Human Values. 12(3&4):70-77. 1987.
24. Leslie I. Boden, J. Raymond Miyares, and David Ozonoff. Science and Persuasion: Environmental Disease in the U.S. Courts. Social Science and Medicine 29(10): 1019-1029. 1988.
25. Leslie I. Boden. OSHA Inspection Policy: A Fresh Start. Journal of Public Health Policy. 9(3): 321-326. 1988.
26. Laura Punnett and Leslie I. Boden. Strengthening Occupational Safety and Health Enforcement. Journal of Public Health Policy. 9(3): 327-330. 1988.
27. Leslie I. Boden. Workers' Compensation. Chapter 11 of Occupational Health: Recognizing and Preventing Work-Related Disease. 2nd Edition Barry S. Levy and David H. Wegman, eds., Little Brown, Inc. 1988.
28. Leslie I. Boden. Reducing Litigation: Evidence from Wisconsin. Workers Compensation Research Institute. Cambridge, Mass. 1988.
29. Leslie I. Boden. Unlocking OSHA's Potential: An Inspection Strategy for the 1990's. Occupational Health in the 1990's: Developing a Platform for Disease Prevention. Annals of The New York Academy of Sciences. 1989.
30. Victor, Richard B. and Boden, Leslie I. The Wisconsin Example. Best's Review. 90(3):24+. July 1989.
31. Leslie I. Boden and Fleischman, Charles. Medical Costs in Workers' Compensation: Trends and Interstate Comparisons. Workers Compensation Research Institute. Cambridge, Mass. 1989.
32. Leslie I. Boden and Joan Pierce. Public Health Bankruptcy: Reduced and Abandoned. New Solutions. 1(1):51-59. Spring 1990.
33. Leslie I. Boden, DeFinis, Joan M., and Fleischman, Charles. Medical Cost Containment in Workers' Compensation: A National Inventory. Workers Compensation Research Institute. Cambridge, Mass. 1990.
34. Leslie I. Boden. Genetic Testing in the Workplace: Costs and Benefits. In: J.D. Groopman and P.L. Skipper, eds. Molecular Dosimetry and Human Cancer: Analytical, Epidemiological, and Social Considerations. CRC Press. Boca Raton. pp. 401-415. 1991.
35. Leslie I. Boden, Daniel E. Kern, and John A. Gardner. Reducing Litigation: Using Disability Guidelines and State Evaluators in Oregon. Workers Compensation Research Institute. Cambridge, Mass. 1991.

36. Leslie I. Boden, Susan M. Johnson, and Joseph C. H. Smith. Medical Cost Containment in Workers' Compensation: A National Inventory 1992. Workers Compensation Research Institute. Cambridge, Mass. 1992.
37. Leslie I. Boden. Workers' Compensation Medical Costs: A Special Case. In: J. Greenwood and A. Taricco, eds. Workers' Compensation Health Care Cost-Containment. 27-54. LRP Publications. 1992.
38. Leslie I. Boden. The AMA Guides in Maryland: An Assessment. Workers Compensation Research Institute. Cambridge, Mass. 1992.
39. Leslie I. Boden. Dispute Resolution in Workers' Compensation. Review of Economics and Statistics. 74:493-502. 1992.
40. Leslie I. Boden and Richard A. Victor. Models for Reducing Workers' Compensation Litigation. Journal of Risk and Insurance. 61:457-475. 1994.
41. Leslie I. Boden. Medicolegal Fees in California: An Assessment. Workers Compensation Research Institute. Cambridge, Mass. 1994.
42. Leslie I. Boden. Workers' Compensation. Chapter 11 of Occupational Health: Recognizing and Preventing Work-Related Disease. 3rd Edition. Barry S. Levy and David H. Wegman, eds., Little Brown, Inc. 201-220. 1995.
43. Leslie I. Boden. Creating Economic Incentives: Lessons from Workers' Compensation Systems. Proceedings of the Industrial Relations Research Association. 1995. 282-289.
44. Leslie I. Boden and Howard Cabral. Company Characteristics and Workplace Medical Testing. American Journal of Public Health. 1995. 84: 1070-1075.
45. Leslie I. Boden. Work Disability in an Economic Context. In: Beyond Biomechanics: Psychosocial Aspects of Musculoskeletal Disorders in Office Work. S.D. Moon and S.L. Sauter, eds. 1995.
46. Leslie I. Boden. Workers' Compensation in the United States: High Costs, Low Benefits. Annual Review of Public Health. 1995. 16:189-218
47. Leslie I. Boden. Policy Evaluation: Better Living through Research. American Journal of Industrial Medicine. 1996. 29(4): 346-352.
48. Monica Galizzi and Leslie I. Boden. What are the Most Important Factors Shaping Return to Work? Evidence from Wisconsin. Workers Compensation Research Institute. Cambridge, Mass. 1996.
49. Leslie I. Boden. Permanent Partial Disability in Tennessee: Similar Benefits for Similar Injuries? Workers Compensation Research Institute. Cambridge, Mass. 1997.
50. Monica Galizzi, Leslie I. Boden, and Te-Chun Liu. The Workers' Story: Results of a Survey of Workers Injured in Wisconsin. Workers Compensation Research Institute. Cambridge, Mass. 1998.

51. Leslie I. Boden and Monica Galizzi. Economic Consequences of Workplace Injuries: Lost Earnings And Benefit Adequacy.: American Journal of Industrial Medicine. 36(5):487-503. 1999.
52. Allard E. Dembe and Leslie I. Boden. Moral hazard: A question of morality? New Solutions. In press. 2000.
53. Lee Strunin and Leslie I. Boden. Paths of reentry: Employment experiences of injured workers. In review: American Journal of Industrial Medicine.
54. Leslie I. Boden and Monica Galizzi. Income Losses of Women And Men Injured At Work. In review: Journal of Human Resources.

TEACHING

EH 914 Doctoral Seminar in Environmental Health
 EH 805 Scientific Basis of Environmental and Occupational Health Standards
 EH767 Occupational Health Economics.

GRANTS AND CONTRACTS (Principal Investigator or Co-Principal Investigator):

National Institute for Occupational Safety and Health. Principal Investigator. Employment Impact of Workplace Injuries in 5 States. 1999-2002 \$746,551

National Institute for Occupational Safety and Health. Co-Principal Investigator. Former Employee Effects of Downsizing in the Nuclear Industry. 1995-2000. \$1,090,000

National Institute for Occupational Safety and Health. Principal Investigator. Impact of Workplace Injuries: Human and Economic Costs. 1995-1998 \$428,938

U.S. Department of Energy. Co-Principal Investigator. Medical Surveillance of Former Department of Energy Workers. 1995-1997. \$332,000.

Workers' Compensation Research Institute. Principal Investigator. Employment Impacts of Workplace Injuries. 1995-1997 \$179,200

National Institute for Occupational Safety and Health. Principal Investigator. Company Characteristics and Medical Screening of Workers 1990-1991. \$29,532

National Institute for Environmental Health Sciences. Superfund Hazardous Waste Worker Health and Safety Training. Co-Principal Investigator. 1988-1989. \$29,000

Workers' Compensation Research Institute. Principal Investigator. The Use of Medical Evidence in Workers' Compensation. 1987-1994. \$240,570

PROFESSIONAL SERVICE

U.S. Department of Labor, Consultant on Workers' Compensation. 1977-1979.
 National Academy of Sciences, Committee on Coal Mine Safety: Technical Advisor, 1981-1982.
 American Public Health Association. Committee on Disease Compensation and Prevention: Co-Chair. 1982-1984.
 Massachusetts Public Employee Retirement Administration, Consultant. 1983-1984.
 Chair, Harriet Hardy Institute, 1985-1987.
 American Public Health Association. Occupational Health Section, Committee on Workers' Compensation, Chair 1986-7.
 New England Conference on Health Promotion and Illness Prevention: Occupational and Environmental Health Task Force. 1987-88.
 Consultant, Institute of Medicine Study on Fostering the Application of Environmental-Occupational Medicine in Primary Care, 1987.
 Governing Council, American Public Health Association. 1988-1990
 Mine Health Research Advisory Committee, U.S. Department of Health and Human Services, 1988-1997, Chair, 1991-1997.
 Alice Hamilton Science Award Committee, National Institute for Occupational Safety and Health, 1991-1994.
 Consultant on economics and benefit assessment, U.S. Occupational Safety and Health Administration, 1993-1995
 Co-Chair, National Occupational Research Agenda, Social and Economic Consequences of Occupational Injuries and Illnesses 1996-present
 Consultant on economics and benefit assessment, U.S. Occupational Safety and Health Administration, 1999-present
 Editorial Board. New Solutions. 1989-.
 Reviewer. American Journal of Industrial Medicine, Journal of the American Public Health Association, Journal of Human Resources, Journal of Risk and Insurance, Millbank Quarterly, Review of Economics and Statistics, International Journal of Law and Economics, Journal of Health Economics, Applied Occupational and Environmental Hygiene.

SUSANNE M. BRUYÈRE

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EDUCATION

<u>Degree</u>	<u>Area of Study</u>	<u>Institution</u>
Ph.D.	Rehabilitation Counseling Psychology	University of Wisconsin, 1975 Madison, Wisconsin
M.P.A.	Public Administration	Seattle University, 1979 Seattle Washington
M.A.	Adult Education	Seattle University, 1977 Seattle Washington
M.S. Ed	Rehabilitation Counseling	University of Southern California, 1972 Los Angeles, California
B.A.	Psychology and Special Education	D'Youville College, 1970 Buffalo, New York

CERTIFICATION AND LICENSURES

Senior Human Resource Professional (Society for Human Resource Management)
 Certified Rehabilitation Counselor (#10355)
 National Board Certified Counselor (#16726)
 Certified New York State Special Educator

PROFESSIONAL EXPERIENCE

- 1991-present **Director**, Program on Employment and Disability, Cornell University, School of Industrial and Labor Relations, Extension Division, Ithaca, New York.
- Director of the program in the School of Industrial and Labor Relations at Cornell University which develops and implements training on effective employment strategies for persons with disabilities. In this capacity, also serves as the Project Director of several federally-funded grants including a Research and Demonstration Project funded by the National Institute on Disability and Rehabilitation Research, on improving employment practices covered by the employment provisions of the Americans with Disabilities Act, and a Rehabilitation Research and Training Center for Economic Research on Employment Policy for People with Disabilities.
- 1993-1998 **Director**, Disability Case Management and Employee Assistance Program, Office of Human Resources, Cornell University, Ithaca, New York.
- Manager of Disability Case Management and Employee Assistance Program services for Cornell University's 10,000 employees, including policy development, contract services oversight, program evaluation, campus outreach and promotion of services, and development of program management and human resource management protocols.
- 1987 to 1991 **Associate Director**, Human Services Administration Program, and **Project Director**,

Rehabilitation Workshop and Facility Personnel Grant, Cornell University, School of Industrial and Labor Relations, Extension Division, Ithaca, New York.

Associate director of a program which holds several national and regional (Region II) federally-funded manpower development projects for rehabilitation professionals. Training and technical assistance are provided for personnel in rehabilitation facilities, supported employment programs, independent living centers and community residences. Responsibilities include: state contract negotiation; grant writing; directing grant and contract activities; program evaluation; teaching of extended education courses on a variety of topics (e.g. supervision, personnel motivation, disability management, job placement, etc.); technical assistance to selected rehabilitation and other human services agencies; and writing of final reports and scholarly publications to disseminate results of program activities.

1986 - 1987 **Assistant Director**, Rehabilitation Workshop and Facility Personnel Grant, New York State School of Industrial and Labor Relations, Extension Division, Cornell University.

1981 - 1985 **Associate Professor**, Department of Rehabilitation, and **Assistant Director**, Regional Rehabilitation Continuing Education Program, Seattle University, Seattle, Washington.

Designed and taught courses to both graduate and undergraduate rehabilitation counseling students and to practicing rehabilitation counseling professionals involved in extended education.

Administered, as assistant director, a four-state program to provide educational offerings to personnel of state vocational rehabilitation agencies. Responsibilities included: educational needs assessment; literature review; curriculum design; teaching and program evaluation.

1975 - 1981 **Assistant Professor and Research Specialist**, Department of Rehabilitation, Seattle University, Seattle, Washington.

Taught at the graduate and undergraduate level and in extended education, such as: effective job placement for individuals with disabilities; psychological aspects of disability; and effective supervisory management of rehabilitation services, etc.

1981 - 1984 **Psychology Associate**, Behavioral Medicine, Biofeedback and Psychological Services, Seattle, Washington.

Clinical practice with individuals with anxiety, pain and stress-related disorders; therapeutic intervention using individual counseling, relaxation techniques, biofeedback and other approaches as indicated.

1973 - 1975 **Research and Teaching Assistant**, Regional Rehabilitation Research Institute, University of Wisconsin/Madison.

Research of literature on selected topics related to institute projects; design of methodology and implementation of rehabilitation research projects; developed and taught courses in masters degree program in rehabilitation counseling.

1974 **Research Assistant**, Research Utilization Project, Division of Vocational Rehabilitation, State of Wisconsin, Madison.

1973 **Counselor/House Parent**, Covenant House, Manhattan, New York.

1972 **Rehabilitation Counselor Trainee and Assistant Administrator**, Casa Consuelo Half-Way House, Rancho Los Amigos Hospital, Downey, California.

1971 - 1972 **Psychology Associate and Research Assistant**, Brentwood Veterans Hospital, Psychiatric Unit, Los Angeles, California.

PUBLICATIONS

- Bruyère, S. (1999, September) Civil Rights and Employment Issues of Disability Policy. Paper presented at Mary E. Switzer Memorial Seminar, E. Lansing, MI.
- Bruyère, S. (Accepted for publication 2000). The Americans with Disabilities Act: Where We Stand Ten Years Later. New York: The Hatherleigh Company.
- Bruyère, S. (1999). Working Effectively with Human Resource Professionals Using the Employment Provisions of the Americans with Disabilities Act. New York: The Hatherleigh Company.
- Bruyère, S. (1998). A review of the Employment of People with Disabilities in Small and Medium-Sized Enterprises, by the European Foundation for the Improvement of Living and Working Conditions. Occupational Health Review, Issue 74 (July/August), p. i.
- Bruyère, S., & DeMarinis, R. (1999). Legislation and rehabilitation service delivery. In M. Eisenberg, R. Glueckauf, & H. Zaretsky, Medical Aspects of Disability: A Handbook for the Rehabilitation Professional. New York: Springer Publishing.
- Bruyère, S. (1997). The MBA job applicant with a disability: Minimizing barriers to maximize success. Careers and the Minority MBA, 5(1), 56-57.
- Bruyère, S. (1997). A review of work and disability: Issues and strategies in career development and job placement. Rehabilitation Education, 11(1 & 2), 141-143.
- Bruyère, S. (1997) Work and disability: Issues and strategies in career development and job placement. Rehabilitation Education, 11(1), 145-147.
- Bruyère, S. & James, P. (1997). Disability Management and the Disability Discrimination Act. Human Resource Management Journal, 7(2), 1-13.
- Brown, D., Bruyère, S., Brown, D., & Mank, D. (1997) Quality through equality: total quality management applied to the implementation of Title I of the Americans with Disabilities Act of 1990. Journal of Vocational Rehabilitation, 9, 253-266.
- Bruyère, S. (1996). Disability employment discrimination and the role of the occupational health nurse. Occupational Health Review, Issue 64, November/December, 11-16.
- Bruyère, S., Handelman, G., & Gomez, S. (1996). The reasonable accommodation process in unionized environments. Labor Law Journal, 48 (10), 629-647.
- Bruyère, S. (Ed.) (1996). Working with unions: Obtaining the support of organized labor in the hiring of employees with disabilities. St. Augustine, FL: Training Resource Network.
- Bruyère, S., & Golden, T. (1996). The job developer's guide to the Americans with Disabilities Act: Using the ADA to promote job opportunities for persons with disabilities. St. Augustine, FL: Training Resource Network, Inc.
- Bruyère, S.M. and Hoying, J. (1995). Work, in A.E.D. Orto and R. Marinelli (Eds.), Encyclopedia of disability and rehabilitation. New York, NY: Macmillan Publishing.
- Bruyère, S., & James, P. (1995). Handling disability: Implications of the new law. Occupational Health Review, Issue 58, November/December, 21-24.
- Bruyère, S.M. (1994). Total quality management and implementation of the employment provisions of the Americans with Disabilities Act. TQM Rehab, 2(4).

- Bruyère, S.M. (1994). Comments on employers' level of knowledge of the Americans with Disabilities Act and its impact on their workers' compensation practices by Buys and Fried. Journal of Rehabilitation Administration, 18(4), 255-256.
- Bruyère, S.M. (1994). The ADA and training for employment-related professionals: Implications for rehabilitation education. Rehabilitation Education, 8(1), 79-88.
- Bruyère, S.M. (1994). Special issue on the Americans with Disabilities Act: Editor's overview. Rehabilitation Education, 8(1), 3-8.
- Bruyère, S.M., and O'Keefe, J. (Eds.) (1994). The Americans with Disabilities Act: Implications for psychology. New York: Springer Publishing/Washington, D.C.: American Psychological Association.
- Bruyère, S.M. (1994). Key words and concepts in psycho-social rehabilitation, in M. Eisenberg (Ed.), New York: Springer Publishing.
- Bruyère, S.M. (1994). The ADA and personnel training. Ithaca, N.Y.; Program on Employment and Disability, School of Industrial and Labor Relations, Cornell University.
- Bruyère, S.M. (1993). The Americans with Disabilities Act of 1990 and injured workers. Ithaca, N.Y.; Program on Employment and Disability, School of Industrial and Labor Relations, Cornell University.
- Bruyère, S.M., & Golden, T.P. (1993). Working effectively with persons who have cognitive disabilities. Ithaca, N.Y.; Program on Employment and Disability, School of Industrial and Labor Relations, Cornell University.
- Bruyère, S.M. (1993). The ADA and labor relations: Implications for rehabilitation administration, practice, and training. Journal of Rehabilitation Administration, 17(3), 120-126.
- Bruyère, S.M. (1993). Participatory action research: Its implications for family members of persons with disabilities. Journal of Vocational Rehabilitation, 3(2), 62-68.
- Bruyère, S.M., (Ed.) (1993). The implications of the Americans with Disabilities Act of 1990 for rehabilitation psychologists. Rehabilitation Psychology, 38(2).
- Bruyère, S.M., and Ferrell, C.D. (1993). Workplace supports and accommodations to implement the ADA for persons with developmental disabilities. Impact, Newsletter of the University of Minnesota, Institute of Community Integration, 6(2), 6.
- Bruyère, S.M. (1992). Careers in rehabilitation psychology. American Rehabilitation, 18(2), 10-11, 35.
- Bruyère, S.M. and Shrey, D. (1991). Joint labor-management disability management programs in industry. Rehabilitation Counseling Bulletin, 34(3), 227-242.
- Bruyère, S.M. (1988). Here are tips on handling personnel problems. Hoard's Dairyman, 133 (15), 724.
- Bruyère, S.M. (1989). These guidelines help you avoid personnel problems. Hoard's Dairyman, 134 (1), 28.
- Bruyère, S.M. (1986). An existentialist approach to rehabilitation counseling, in Riggat, T.F., Maki, D.R., and Wolf A.W. (Eds.), Applied Rehabilitation Counseling, 125-134.
- Bruyère, S.M. (1985). An existential perspective in rehabilitation counseling practice. Journal of Applied Rehabilitation Counseling, 16(4), 36-40.
- Bruyère, S.M. and Anderson, D. (1984). Rehabilitation counselor state-of-being, in W. Emener, A. Patrick, and D. Hollingsworth (Eds.), Selected Rehabilitation Counseling Issues. Springfield, Illinois: Charles C. Thomas.

- Bruyère, S.M. (1983). Applications of telecommunications technology in the delivery of services to individuals with disabilities: An annotated review. Prepared for the National Rehabilitation Information Center, Washington, D.C.
- Bruyère, S.M. (1983). The impact of high technology on the rehabilitation professional: A view toward changing roles and skills. In a report on the Eighth Switzer Memorial Seminar, Washington, D.C., November. Alexandria, Virginia: National Rehabilitation Association.
- Bruyère, S.M. (1982). The use of telecommunications technology in the training of rehabilitation personnel. Journal of Rehabilitation, Feb./Mar., 60-64.
- Bruyère, S.M. and Vandergoot, D. (1982). Electronic communication in Rehabilitation: The future is now. Journal of Rehabilitation, Oct./Nov./Dec., 49-53.
- Bruyère, S.M. (1981). Coping with stress in the rehabilitation work environment. In Emener, Luck and Smits (Eds.), Rehabilitation and supervision: Theory, research and practice. Baltimore, Maryland: University Park Press.
- Bruyère, S.M. (1981). Human sexuality in rehabilitation medicine: A state-of-the-art. In A. Shaked (Ed.), Human Sexuality in Rehabilitation Medicine. Baltimore, Maryland: Williams and Wilkins.
- Bruyère, S.M. (1981). Telecommunication in international rehabilitation efforts. Rehabilitation World, Fall/Winter.
- Bruyère, S.M. (1980). Telecommunications technology in the training of rehabilitation personnel. Unpublished final report of Grant #45-P-81379/0-01 funded by the Rehabilitation Services Administration (HEW), February.
- Bruyère, S.M. (1979). The role of staff development and agency administration in more effective job placement. In Vandergoot and Worrall (Eds.), Placement in rehabilitation: A career perspective. Baltimore, Maryland: University Park Press.
- Bruyère, S.M. and Elliott, J.K., (1979). RRCEPs and continuing education for rehabilitation personnel. Rehabilitation Counseling Bulletin, 23(2).
- Bruyère, S.M. (1978). Certification maintenance: The process and the issues. Rehabilitation Counseling Bulletin, 22(1), 2-4.
- Shaked, A., Bruyère, S.M., and Wright, G. (1975). The assessment of human service needs of persons with epilepsy and cerebral palsy. Madison, Wisconsin: University of Wisconsin, Regional Rehabilitation Research Institute, Series 3, Monograph XVIII.

AWARDS, SCHOLARSHIPS, OTHER RECOGNITION

George N. Wright Varsity Award	University of Wisconsin-Madison, School of Education, Department of Rehabilitation Psychology and Special Educ.	1998
Outstanding Educator	Cornell University, Merrill Presidential Scholar	1996
Karl F. Heiser Award for Advocacy	American Psychological Association	1996
Fellow, Division 22	American Psychological Association	1995
Distinguished Contribution to Rehabilitation Psychology	Division of Rehabilitation Psychology	1994
Outstanding Individual of the Year	Projects with Industry of New York State	1991
8th Mary Switzer Scholar - Technology and Rehabilitation of Disabled Persons in the Information Age	National Rehabilitation Association	1984

EDITORSHIPS

Editorial Board Member	Journal of Vocational Rehabilitation	1989 - present
Editorial Advisory Board Member	Rehabilitation Education Journal of the National Council on Rehabilitation Education	1986 - present
Editorial Board Member	Journal of Rehabilitation National Rehabilitation Association	1987 - 1992
Editor	Rehabilitation Psychology News Newsletter of Division 22 American Psychological Association	1984 - 1987
Associate Editorial Board Member	Journal of Rehabilitation National Rehabilitation Association	1985 - 1986
Editor	National Council on Rehabilitation Education Newsletter	1978 - 1980
Consulting Editor	Journal of Sexuality & Disability	1976 - 1979

PROFESSIONAL ORGANIZATION INVOLVEMENT

Board Member	The Rehabilitation Accreditation Commission (CARF)	1999 - 2001
Board Member	Division of Rehabilitation Psychology (22) American Psychological Association	1996 - 1998
Member	Division of Rehabilitation Psychology (22) Strategic Planning Committee American Psychological Association	1996
President	National Council on Rehabilitation Education	1994 - 1995
Member	Committee on Disability Issues in Psychology American Psychological Association	1992 - 1994
President	Rehabilitation Psychology Division American Psychological Association	1990 - 1991
Research Committee Member	Rehabilitation Psychology Division American Psychological Association	1988 - present
Planning Committee Member	Industrial and Labor Relations - Extension Cornell University	1989 - 1991
Personnel Committee Co-Chairperson	Industrial and Labor Relations - Extension Extension, Cornell University	1987 - 1990
Program Committee Member	Society for Industrial and Organizational Psychology Annual Conference, Dallas, 1988 Annual Conference, Atlanta, 1987	1987 - 1988 1986 - 1987

Education Committee Member	Rehabilitation Psychology Division American Psychological Association	1986 - present
Treasurer	American Rehabilitation Counseling Association	1984 - 1988
Awards Committee, Chair	Rehabilitation Psychology Division American Psychological Association	1984 - 1987
Research Committee, Chair Task Force on Women	National Rehabilitation Association	1980 - 1983
Media Task Force Co-Chairperson	Health Education Alliance State of Washington	1982 - 1985
Member	Faculty Senate-Seattle University	1982 - 1985

GRANTS SECURED

<u>Name/Sponsor</u>	<u>Time Frame</u>	<u>Dollar Amount</u>
The Use of Telecommunications in the Training of Rehabilitation Personnel, U.S. Department of Education, Rehabilitation Services Administration (HEW), #45-P-81379/0-01	9/79 to 8/80	\$150,000
Workshop Personnel Administration Training Project - U.S. Department of Education, Office of Special Education and Rehabilitation Services, #G028500023	9/85 to 8/88	\$268,077
Workshop Personnel Administration Training Project - U.S. Department of Education, Office of Special Education and Rehabilitation Services, #H129G90008	9/89 to 8/92	\$339,354
Supported Employment Training for Those Working with the Chronically Mentally Ill, NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	7/88 to 9/88	\$ 31,794
Job Coaching and Supported Employment for Individuals with Traumatic Brain Injury - NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	7/88 to 10/88	\$ 27,600
Job Coaching and Supported Employment for Individuals with Traumatic Brain Injury - NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	7/88 to 10/88	\$ 27,600
Supported Employment Personnel Training - Introduction to Cognitive Retraining for Job Coaches and (Preliminary Diagnostic Questionnaire Training) - NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	11/88 to 3/89	\$ 11,787
Regional Job Coach Training - NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	1/89 to 10/89	\$ 22,039

<u>Name/Sponsor</u>	<u>Time Frame</u>	<u>Dollar Amount</u>
Supported Employment Training for Managers in SED-VESID Sponsored Projects - NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities	10/89 to 10/89	\$25,000
Using Natural Supports to Enhance Supported Employment Outcomes - National Center for Disability Services, prime U.S. Department of Education	10/90 to 12/92	\$ 31,860
National Materials Development Center on the ADA Employment Provisions - U.S. Department of Education, National Institute on Disability and Rehabilitation Research, #H133D10155	10/91 to 9/94	\$550,733
ADA Training Division of the Northeast Disability and Business Technical Assistance Center - United Cerebral Palsy Association of New Jersey, National Institute on Disability and Rehabilitation Research, #H133D10113	10/91 to 9/96	\$429,230
Forum on Innovative Strategies for Enhancing the Employment Outcomes for Persons with Mental Illness - NYS Office of Mental Health	4/92 to 1/93	\$ 10,000
Transition Training and Technical Assistance Center, NYS Department of Education, Office of Vocational and Educational Services for Individuals with Disabilities, contract #C004616	10/92 to 10/96	\$201,947
Development of ADA Informational Materials and Training Resources for Small Business - Rocky Mountain DBTAC, prime is National Institute on Disability and Rehabilitation Research	10/93 to 9/94	\$ 64,939
Developing ADA Core Curriculum's for the DBTAC System - University of Missouri, prime is National Institute on Disability and Rehabilitation Research	10/93 to 9/94	\$ 35,000
An Examination of the Vocational Rehabilitation Needs of American Indians with Behavioral Health Diagnoses in New York State - University of Northern Arizona, U.S. Department of Education	1/94 to 3/96	\$ 17,737
National Training and Materials Dissemination Center on Social Security Work Incentives	12/94 to 9/96	\$220,000
Small Businesses and Title III Requirements of the Americans with Disabilities Act	10/95 to 9/96	\$ 99,999
NYS Developmental Disabilities Planning Council Statewide Training on Social Security Administration Work Incentive Programs	10/95 to 9/96	\$ 40,000
Illinois Planning Council on Developmental Disabilities Training on the ADA and Implications for Persons with Cognitive Disabilities	12/94 to 11/95	\$ 45,000
Region II Training on the ADA and Schools, UCPA of New Jersey and the Northeast Disability and Business Technical Assistance Center, prime is U.S. Department of Education	8/95 to 3/96	\$ 10,000

<u>Name/Sponsor</u>	<u>Time Frame</u>	<u>Dollar Amount</u>
Long Term Training in Independent Living - Rehabilitation Services Administration	9/96 to 8/97 10/97 to 9/2000	\$ 96,831 \$300,000
Community Rehabilitation Personnel Training - Rehabilitation Services Administration	9/96 to 8/97	\$ 99,991
Distinguished Research Fellowship National Institute on Disability and Rehabilitation Research	7/97 to 6/98	\$ 40,000
Improving Employment Practices Covered by Title I of the ADA,	10/97 - 9/2001	\$1,257,388
Presidential Task Force on Employment of Adults with Disabilities Survey of Government Representatives	5/99 to 9/99	\$72,395
Subcontract to Cornell University from President's Committee on Employment of People with Disabilities	10/98 to 3/99	\$29,000
Rehabilitation Research and Training Center on Disability and Employment Policy #H133B980038	12/98 to 11/03	\$3,500,000

SELECTED PRESENTATIONS SINCE 1985

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
Maximizing Effective Implementation of Employment Provisions	1999 TASH Conference, Chicago, IL	December 10, 1999
Disabilities in the Workplace	The 1999-2000 Workplace Colloquium Series, New York, NY	November 18, 1999
Public Policy for the New Millennium: Where will Rehabilitation Be?	National Rehabilitation Association Minneapolis, MN	November 11-14, 1999
Employment for People with Disabilities: The Role of Public Policy and Employer Practice	Association for Public Policy Analysis & Management, Washington, DC	November 6, 1999
Improving ADA Employment Practices	13 th Annual National Disability Management Conference, Washington, DC	October 28, 1999
Disability Discrimination Legislation-Implementation in the UK and US	1999 IPD Ireland and UK/SHRM Exchange Meeting, Harrogate, UK	October 26, 1999
Civil Rights and Employment Issues of Disability Policy	Mary E. Switzer Memorial Seminar Lansing, MI	September, 1999
Disability Nondiscrimination in Employment Practice: The Role of the Psychologist	International Congress of Applied Psychology, San Francisco, CA	August, 1998

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
Understanding Disability Rights Legislation	International Congress of Applied Psychology, San Francisco, CA	August, 1998
Disability Nondiscrimination in the Employment Process: The Role for Psychologists	American Psychological Association Annual Convention, San Francisco, CA	August, 1998
Federal Requirement for Workers with Psychiatric Disabilities	American Arbitration Association, Syracuse, NY	June, 1998
Policy Implications for US Programs	International Symposium and Colloquium on Job Retention and Return to Work - Strategies for Workers with Disabilities, Washington, DC	May, 1998
The Role of Psychologists in the Delivery of Services to Persons with Disabilities	University of Ulster, Magee College, Derry, Northern Ireland	March, 1998
Measuring the Impact of Disability Discrimination Legislation on Employer Practice - the US Experience	Windsor IV Consultation, Employers' Forum on Disability, London, Britain	March, 1998
Promoting and Providing Consultation Services on the Disability Discrimination Act 1995	City University, London, Britain	October, 1997 April, 1998
Vocational Rehabilitation Services and the Psychologist's Role	American Psychological Association Annual Conference; Chicago, IL	August, 1997
The Vecino's Project: Working Together as Neighbors to Impact National Development in Mexico	Regional Congress of Psychology for Professionals in the Americas; Mexico City	July, 1997
Disability Non-Discrimination in Employment Practice: The Role of the Psychologist	Fifth European Congress of Psychology, Dublin, Ireland	July 1997
Disability Discrimination: The Role of Occupational Health Professionals	Industrial Relations Services, London	July 1997 March, 1998
Workplace injury, health and accommodation: Understanding the ADA, FLMA, and Workers' Compensation	State of Washington, Department of Social and Health Services and the Department of Personnel, Lacey, Washington	March 1997
National Leadership Summit Theme Session on Social Security	The Alliance for Rehabilitation Counseling, Tampa, Florida	March 1997

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
A Comparative Analysis of Disability Management Practices in the US and the UK	International Congress of Psychology Montreal	August, 1996
Managing Disability in Your Institution: A Strategic Human Resource Agenda	Cornell University/Columbia University Ithaca, NY	August, 1996
The Interplay Between the ADA and Workplace Safety Initiatives	ILR Corporate Associates Cornell University, Ithaca, New York	May, 1996
Promoting Individual and Organizational Health in the Workplace	Employee Relations - ILR HR667 Cornell University, Ithaca, New York	April, 1996
Americans with Disabilities Act: Interplay with Health and Safety Legislation	American Psychological Association / National Institute on Occupational Safety and Health - Joint Conference on Work and Stress	September, 1995
The Implications of the Americans with Disabilities Act for Psychology	American Psychological Association Annual Conference New York, New York	August, 1995
Participatory Action Research	American Psychological Association Annual Conference New York, New York	August, 1995
Counselors in the 21st Century: New Horizons in Counseling Programs	National Association of Rehabilitation Professionals in the Private Sector Annual Conference San Francisco, California	April, 1995
A Panel of Rehabilitation Leaders Look Back to the Future	National Rehabilitation Counseling Association Professional Symposium Tucson, Arizona	March, 1995
EEO for People with Disabilities	Cornell University, EEO Studies New York, New York	October, 1993 October, 1994 April, 1994
The ADA and Labor Relations	Cornell University, Chemical Hazard Information Program (CHIP) Buffalo, New York	November, 1994
How to Deal with Work-Related Injury and Illness	Cornell University, University Human Resource Services, Ithaca, New York	November, 1994
Overview of the Employment Provisions of the ADA of 1990 and the Reasonable Accommodation Process	Pacific Disability and Business Technical Assistance Center Sacramento, California; Tucson, Arizona	October, 1994
The ADA and the FMLA: Update on Current Case Law	8th Annual National Disability Management Conference and Exhibit Washington, DC	October, 1994

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
ADA - How it will effect Collective Bargaining, Where does it fit in Labor Relations Agencies?	Association of Labor Relations Agencies 43rd Annual Conference Boston, Massachusetts	July 19, 1994
The Impact of the Americans with Disabilities Act on Enhancing Employment Outcomes for Individuals with Disabilities	NCRE/RSA/CSAVR Conference Alexandria, VA	March, 1994
Administrating the Americans with Disabilities Act in a Unionized Workplace	Institute for Collective Bargaining New York State School of Industrial and Labor Relations, New York, NY	February, 1994
The Employment Provisions of the Americans with Disabilities Act of 1990: Overview and Implications for Employers	Biennale Internationale Handi-Insertion, Lyon, France	November, 1993
Labor Relations, Workers Compensation, and the ADA	DePaul University Chicago, Illinois	September, 1993
The Employment Provisions of the Americans with Disabilities Act of 1990 and Related Labor Relations Considerations	NYS AFL-CIO West Point, New York	August, 1993
The Americans with Disabilities Act and Related Canadian Legislation: Implications for Psychologists	1993 APA Annual Convention Toronto, Ontario, Canada	August, 1993
State and National Certification of Supported Employment Personnel: A Crackerbarrel Session	1993 APSE Conference Baltimore, Maryland	July, 1993
ADA: Marketing Technical Assistance to Employers	1993 APSE Conference Baltimore, Maryland	July, 1993
Participatory Action Research: Its Application to Implementation of the Americans with Disabilities Act of 1990 at the Local Level	The Society for Disability Studies Sixth Annual Convention Seattle, Washington	June, 1993
The Training and Education Needs of Personnel in Support of Employment for People with Severe Mental Retardation	NIDRR Consensus Validation Conference, Arlington, Virginia	May, 1993
Reasonable Accommodation for Persons with Mental Illness	President's Committee on Employment of People with Disabilities, 1993 Annual Conference St. Louis, Missouri	May, 1993
The Implications of the ADA for Labor Relations, Collective Bargaining, and Contract Administration	National Association for Rehabilitation Facilities and Journal of Rehabilitation Administration Bloomington, Illinois	May, 1993

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
The Implications of the ADA for Personnel Training	Cornell University EEO Studies New York, New York	December, 1992 February, 1993
The Social Policy Implications of the ADA for Vocational Rehabilitation	National Council on Disability Washington, D.C.	December, 1992
Implications of the ADA for the Retention and Promotion in the Workplace of Persons with Mental Health Concerns	American Psychological Association/ National Institute of Occupational Safety and Health Washington, D.C.	November, 1992
The Implications of the Americans with Disabilities Act of 1990 for Rehabilitation Professionals	American Congress of Rehabilitation Medicine, 1992 Convention San Francisco, California	November, 1992
The Hidden Minority Comes of Age: The Americans with Disabilities Act	ADA Task Force, SUNY at Albany Albany, New York	October, 1992
Reasonable Accommodation: What Is It? How Do You Do It?	Rochester Computer, Business, Assistive Technology Show, Rehabilitation Association of Western New York, Rochester, New York	September, 1992
The Americans with Disabilities Act of 1990: Implications for Psychologists (Invited Address)	Mini-Conference on Psychology at Work, American Psychological Association, Washington, D.C.	August, 1992
The Implications of the ADA for Supported Employment	Association of Supported Employment Personnel Annual Conference, Chicago, Illinois	July, 1992
The ADA and Rehabilitation Technologies: What's Left to Do?	Rehabilitation Association of Western New York, Niagara Falls, New York	June, 1992
The Employment Provisions of the Americans with Disabilities Act of 1990	Associations of Towns of the State of New York and the Cornell University Local Roads Program Ithaca, New York	June, 1992
How Employers and Unions Can Satisfy Both the Americans with Disabilities Act and the NLRA	Institute of Collective Bargaining Cornell University New York, New York	May, 1992
Participatory Action Research	Keynote of the Annual Conference of the National Rehabilitation Research and Training Centers Washington, D.C.	May, 1992
An Overview of the Americans with Disabilities Act	Cornell University Chemical Hazards Information Program, Rochester, New York	May, 1992 February, 1992

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
An Overview of the Employment Provisions of the Americans with Disabilities Act of 1990	Cortland County Human Resource Association and Cortland County Interagency Placement Consortium Cortland, New York	April, 1992
Practical Compliance Checklist on the ADA	Bar Association of Erie County Buffalo, New York	April, 1992
An Overview of the Employment Provisions of the Americans with Disabilities Act of 1990	Radio Talk Show (WKRT) Cortland, New York	January, 1992
An Overview of the Employment Provisions of the Americans with Disabilities Act of 1990	United Cerebral Palsy Associations of New York State, New York, New York	January, 1992
The Americans with Disabilities Act: Implications for Business and Unions	Cornell University: Briefing on Legal Issues Surrounding Employment Rochester and Syracuse, New York	January, March, and November, 1991
Reasonable Accommodation in the Workplace	Minneapolis, Minnesota	November, 1991
Quality and Competency in Rehabilitation: Whose Role is it?	American Psychological Association 1991 Convention San Francisco, California	August, 1991
The Americans with Disabilities Act of 1990: Implication for Psychologists (Program Co-Chair)	American Psychological Association 1991 Convention San Francisco, California	August, 1991
The Americans with Disabilities Act of 1990: Implications for the Marketing of Rehabilitation Services	New York State Rehabilitation Workshop Management Association Cortland, New York	May, 1991
The Americans with Disabilities Act of 1990: Implications for Colleges and Universities	Central New York Association of Colleges, Syracuse, New York	May, 1991
U.S. Policies and Disabilities: Issues, Trends, and Implications	American Psychological Association 1990 Annual Convention Boston, Massachusetts	August, 1990
Disability as a Dimension of Cultural Diversity (Program Co-Chair)	American Psychological Association 1990 Annual Convention Boston, Massachusetts	August, 1990
The Higher Education Experiences of Women with Disabilities (Program Chair)	American Psychology Association 1990 Annual Convention Boston, Massachusetts	August, 1990
Transitional and Supported Employment for Persons with Disabilities	Education Committee of the Cortland County Interagency Placement Consortium, Cortland, New York	May, 1990

<u>Topic/Role</u>	<u>Event/Locations</u>	<u>Date</u>
Supported Employment for Individuals with Disabilities	Job Service Employer Committee Elmira, New York	January, 1990
Supported Employment: A Role for Rehabilitation Psychologists (Program Chair)	American Psychological Association Annual Convention New Orleans, Louisiana	August, 1989
Stress Management for Highway Superintendents	1989 (44 th Annual) School for NYS Highway Superintendents, Ithaca, NY	June, 1989
Considerations for Adulthood: The Work Ethic vs. Getting on With Life's Work (Program Panelist)	Interagency Council of Mental Retardation and Developmental Disabilities Conference, New York, NY	December, 1988
Prevention, Early Intervention, and Disability Management within Business and Industry (Program Chair)	American Psychological Association Annual Convention Atlanta, Georgia	August, 1988
Appropriate Vocational Attitudes and Skills	Tompkins-Seneca-Tioga Board of Cooperative Education Services, Ithaca, New York	March, 1988
Dealing with Motivational Problems in the Job Placement Process	Cortland BOCES Cortland, New York	March, 1988
Dealing with Personnel Problems	Large Dairy Herd Management Conference for Cornell University Cooperative Extension, Syracuse, NY	March, 1988
Supported Employment	Cayuga-Onondaga BOCES Auburn, New York	February, 1988
Supported Employment	New York State Southern Tier Office of Vocational Rehabilitation, Owego, NY	October, 1987

CONSULTANT SERVICES

Grant Development for RTC on Workplace Supports	Virginia Commonwealth University Richmond, VA	May, 1998
Standards Conformance Rating System Task Force	CARF (The Rehabilitation Accreditation Commission)	May, 1997
National Advisory Committee on Employment and Community Standards	CARF	January, 1997
U. S. Legislative and Policy Approaches to Disability Non-Discrimination	Employers' Forum on Disability London, England	1996 to present
Job Accommodation Network Request for Proposal Design	President's Committee on Employment of Persons with Disabilities	1996
Strategic Long Range Planning Committee Member	National Institute on Disability and Rehabilitation Research	1996

Planning Committee for International Summit	National Council on Disability	1995 - 1996
Advisory Board for the National Disability Policy Summit	National Council on Disability Washington, D.C.	1995 - 1996
Committee Member, The ADA and Alternative Dispute Resolution	President's Committee on Employment of People with Disabilities Washington, D.C.	1993 - 1994
Committee Member, ADA and Collective Bargaining Issues	President's Committee on Employment of People with Disabilities Washington, D.C.	1993 - 1994
Advisory Board Member	Rehabilitation Counseling Department Syracuse University, Syracuse, New York	1992 to present
Advisory Board Member	Project on Employability of HIV Positive Persons National Association of Rehabilitation Facilities	1992 to present
Advisory Board Member	Comprehensive Regional Traumatic Brain Injury Rehabilitation and Prevention Center Mt. Sinai Medical Center, New York, NY	1991 to present
Training Consultant	Employer Supports for Persons with Severe Disabilities National Center for Disability Services Albertson, New York	1990 - 1993
Advisory Board Member	International Exchange of Experts and Information, World Rehabilitation Fund, New York City	1988 - present
Advisory Board Member	Supported Employment Degree Program New York University	1987 - 1990
Training Consultant	Rehabilitation Counseling Department Michigan State University	1987
International Field Internship Reviewer	Ithaca College Human Services Internship Program London, England	January, 1986
Grant Peer Reviewer	National Institute on Disability and Rehabilitation Research and Rehabilitation Services Administration	1983, 1984 1985, 1988, 1990, 1991, 1994, 1995
Advisory Board Member	Employment Research and Training Center, New York University	1982 - 1987
Technology Expert Advisor	Employment Research and Training Center, New York University	1984
Advisory Board Member	Job Placement Project Human Resources Center Albertson, Long Island	1978 - 1980

Strategic Planning	Department of Social and Health Services, King County, Washington	1984
Strategic Planning	Health Education Alliance State of Washington	1984
Strategic Planning	Forest Ridge Academy Bellevue, Washington	1984
Strategic Planning	Institute of Public Service Seattle University	1979
Strategic Planning	Seattle First National Bank Seattle, Washington	1979, 1980, 1981
Training Consultant	Washington Criminal Justice Training Commission	1978 - 1980
International Consultant	U.S. Office of Special Education and Rehabilitation Services-Technical Expert in consultation to Marshall Plan-funded programs in Egypt and Pakistan	1976

PROFESSIONAL ORGANIZATION MEMBERSHIPS

American Counseling Association	National Council on Rehabilitation Education
American Rehabilitation Counseling Association	National Rehabilitation Association national
American Psychological Association	Rehabilitation Counseling Association
APA Division of Occupational and Industrial Psychology	NYS Association for Counseling and Development
APA Division of Rehabilitation Psychology	NYS Psychological Association
Association of Persons in Supported Employment	Society for Disability Studies
Association of Policy Management and Analysis	Society for Human Resource Management (SHRM)
British Psychology Society	SHRM Institute for International Human Resources
	The Association for the Severely Handicapped

LOCAL COMMUNITY SERVICE

Board Vice President (1990-92) Chair, Program Committee (1987-92) Board Member (1986-92) Associate Board Member (1992 to 1997) Co-Chair Family Support Group (1989-92)	Challenge Industries, Inc. Ithaca, New York	1986 to 1992
Board Vice President (1992-93) Board Member (1986-93) Chair, Personnel Committee (1990-93)	Community School of Music and Arts Ithaca, New York	1986 - 1993
Vice President, Parents Board	South Hill School Age Child Care Program, Ithaca, New York	1988 - 1990
Advisory Board Member	Southern Tier Office NYS Office of Vocational and Educational Services for Individuals with Disabilities	1987 - 1990
President, Parents Board	Coddington Community Center Child Care, Ithaca, New York	1986 - 1988

December 1999

CURRICULUM VITAE

RICHARD VALENTINE BURKHAUSER

ADDRESS

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EDUCATION

B.A., Economics, St. Vincent College, 1963-1967
M.A., Economics, Rutgers University, 1967-1969
Ph.D., Economics, University of Chicago, 1972-1976

ACADEMIC PUBLICATIONS

A. BOOKS, MONOGRAPHS, AND EDITED VOLUMES

- 1999 Burkhauser, Richard V., F. Thomas Juster, and Jules J.M. Theeuwes (eds.) *The Health, Wealth and Work of Older People*, Special Issue, *Labour Economics*, Vol. 6, (2) (June 1999).
- 1996 Burkhauser, Richard V., Amy D. Crews, Mary C. Daly, and Stephen P. Jenkins. *Income Mobility and the Middle Class*, AEI Studies on Understanding Economic Inequality. Washington, DC: The AEI Press (1996).
- Mashaw, Jerry, Virginia Reno, Monroe Berkowitz, and Richard V. Burkhauser (eds.). *Disability, Work, and Cash Benefits*. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research (1996).
- Aarts, Leo J.M., Richard V. Burkhauser, and Philip R. de Jong (eds.). *Curing the Dutch Disease: An International Perspective on Disability Policy Reform*. Aldershot, Great Britain: Avebury, Ashgate Publishing Ltd. (1996).
- 1995 Burkhauser, Richard V. and Paul J. Gertler (eds.). *The Health and Retirement Survey: Data Quality and Early Results*, Special Issue, *Journal of Human Resources*, 30 (December 1995).

- 1994 Burkhauser, Richard V. and Gert G. Wagner (eds.). Special Issue, *Vierteljahrshefte Zur Wirtschaftsforschung*, No. 2 (1994).
- 1993 Burkhauser, Richard V. and Dallas L. Salisbury (eds.). *Pensions in a Changing Economy*. Washington, DC: Employee Benefit Research Institute (1993).
- 1990 Quinn, Joseph F., Richard V. Burkhauser, and Daniel A. Myers. *Passing the Torch: The Influence of Economic Incentives on Work and Retirement*. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research (1990).
- 1984 Haveman, Robert H., Victor Halberstadt, and Richard V. Burkhauser. *Public Policy Toward Disabled Workers: A Cross-National Analysis of Economic Impacts*. Ithaca, New York: Cornell University Press (1984).
- 1982 Burkhauser, Richard V. and Karen C. Holden (eds.). *A Challenge to Social Security: The Changing Roles of Women and Men in American Society*. New York: Academic Press (1982).
- Burkhauser, Richard V. and Robert H. Haveman. *Disability and Work: The Economics of American Policy*. Baltimore: Johns Hopkins University Press (1982).
- 1977 Tolley, George S. and Richard V. Burkhauser (eds.). *Income Support Policies for the Aged*. Boston, MA: Ballinger (1977).

B. ARTICLES

- forthcoming Burkhauser, Richard V., Kenneth A. Couch and David C. Wittenburg. "A Reassessment of the New Economics of the Minimum Wage Literature Using Monthly Data from the CPS." *Journal of Labor Economics*.
- Burkhauser, Richard V., Kenneth A. Couch and David C. Wittenburg. "Who Minimum Wage Increases Bite: An Analysis Using Monthly Data from the SIPP and CPS." *Southern Economic Journal*.
- 1999 Bound, John and Richard V. Burkhauser. "Economic Analysis of Transfer Programs Targeted on People with Disabilities," In Orley Ashenfelter and David Card (eds.), *Handbook of Labor Economics*. Amsterdam: Elsevier Science (1999), pp. 3417-3528.

Burkhauser, Richard V., J.S. Butler, Yang-Woo Kim, and Robert Weathers. "The Importance of Accommodation on the Timing of Male Disability Insurance Application: Results from the Survey of Disability and Work and the Health and Retirement Study." *Journal of Human Resources*, 34 (3) (Summer 1999): 589-611.

Burkhauser, Richard V., Amy D. Crews, Mary C. Daly, and Stephen P. Jenkins. "Testing the Significance of Income Distribution Changes Over the 1980s Business Cycle: A Cross-National Comparison." *Journal of Applied Econometrics*, 14 (3) (May - June 1999): 253-272.

Burkhauser, Richard V., F. Thomas Juster, and Jules J.M. Theeuwes. Introduction, *The Health, Wealth, and Work of Older People*, Special Issue *Labour Economics*, Vol. 6. No. 2, (June 1999): vii - ix.

Burkhauser, Richard V., Amy Crews-Cutts, and Dean Lillard. "How Older People in the United States and Germany Fared in the Growth Years of the 1980s: A Cross-Sectional versus a Longitudinal View." *Journal of Gerontology: Social Science*, 54B, (5) (September 1999): S279-S290.

Burkhauser, Richard V., Debra Dwyer, Maarten Lindeboom, Jules Theeuwes, and Isolde Woittiez. "Health, Work, and Economic Well-Being of Older Workers, Aged 51 to 61: A Cross-National Comparison Using the United States HRS and The Netherlands CERRA Data Sets." In James Smith and Robert Willis (eds.), *Wealth, Work, and Health: Innovations in Measurement in the Social Sciences*. Ann Arbor, MI: University of Michigan Press, (1999), pp. 233-265.

Burkhauser, Richard V. "The Use of Functional Capacity Measures in Public and Private Programs in the United States and in Other Countries." In Gooloo S. Wunderlich (ed.) *Measuring Functional Capacity and Work Requirements*. Washington, DC: National Academy Press, (1999), pp. 63-68.

Burkhauser, Richard V., Barbara A. Butrica, and Mary C. Daly. "The PSID-GSOEP Equivalent File: A Product of Cross-National Research." In Wolfgang Voges (ed.), *Dynamic Approaches to Comparative Social Research: Recent Developments and Applications*. Aldershot, Great Britain: Ashgate Publishing Ltd., (1999), pp. 53-66.

Burkhauser, Richard V. "Touching the Third Rail: Alternative Solutions for Bringing the Social Security Retirement System into Long Term Balance." In James C. Hickman (ed.), *The 1996 Bowles Symposium*, Society of Actuaries Monograph M-RS99-1, (1999), pp. 23-29.

Burkhauser, Richard V., J.S. Butler, and Andrew J. Houtenville. "Changes in Permanent Income Inequality in the United States and Germany in the 1990s." *Vierteljahrsheft Zur Wirtschaftsforschung*, No. 2 (1999): 284-289.

1998

Burkhauser, Richard V. and Mary C. Daly. "Disability and Work: The Experiences of American and German Men," *Federal Reserve Bank of San Francisco Economic Review*, 2 (1998): 17-29.

Burkhauser, Richard V. "Policies to Make Work Pay for People with Disabilities." In Kalman Rupp and David Stapleton (eds.), *Growth in Disability Benefits*. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research (1998), pp. 365-372.

Burkhauser, Richard V. "Summing Up: Reflections on the Past and Future of Disability Policy." In Kalman Rupp and David Stapleton (eds.), *Growth in Disability Benefits*. Kalamazoo, MI: W.E. Upjohn Institute for Employment Research (1998), pp. 391-412.

Aarts, Leo J.M., Richard V. Burkhauser, and Philip R. de Jong. "Convergence: A Comparison of European and United States Disability Policy." In Terry Thomason, John Burton, and Douglas Hyatt (eds.), *New Approaches to Disability in the Work Place*. IRRA Research Volume, (1998), pp. 299-338.

Aarts, Leo, Richard V. Burkhauser and Philip R. de Jong. "A Cross-National Comparison of Disability Policies: Germany, Sweden, and The Netherlands vs. The United States." In Saskia Klosse, Stella den Uijl, Tineke Bahlman and Joop Schippers (eds.), *Rehabilitation of Partially Disabled People: An International Perspective*. Amsterdam, The Netherlands: Thesis Publishers (1998), pp. 125-150.

Crews, Amy D. and Richard V. Burkhauser. "Changes in Economic Well-Being and Income Distribution in the 1980s: Different Measures, Different Outcomes." In Peter Flora, Philip R. de Jong, Julian LeGrande, and Jun-Young Kim (eds.), *New Issues in Social Security*, Volume 4 International Studies on Social Security. Aldershot, Great Britain: Ashgate Publishing Ltd. (1998), pp. 239-264.

Burkhauser, Richard V., Robert Clark, and Richard Suzman. "Work, Retirement, and Wealth, Current Data and Future Needs: An International Perspective," *Australian Journal of Aging*, 17(1) (Supplement) (1998): 11-13.

1997

Burkhauser, Richard V. and John G. Poupore. "A Cross-National Comparison of Permanent Inequality in the United States and Germany," *Review of Economics and Statistics*, 79(1) (February 1997): 10-17.

Burkhauser, Richard V., Douglas Holtz-Eakin, and Stephen Rhody. "Labor Earnings Mobility and Inequality in the United States and Germany During the 1980s," *International Economic Review*, 38(4) (1997): 775-794.

Burkhauser, Richard V., Joachim R. Frick, and Johannes Schwarze. "A Comparison of Alternative Measures of Economic Well-Being for Germany and the United States," *The Review of Income and Wealth*, 43(2) (June 1997): 153-172.

Burkhauser, Richard V., Amy D. Crews, and Mary C. Daly. "Recounting Winners and Losers in the 1980s: A Critique of Income Distribution Measurement Methodology," *Economic Letters*, 54 (1997): 35-40.

Burkhauser, Richard V., Douglas Holtz-Eakin, and Stephen E. Rhody. "Mobility and Inequality in the 1980s: A Cross-National Comparison of the United States and Germany." In Stephen Jenkins, Arie Kapteyn, and Bernard van Praag (eds.), *The Distribution of Welfare and Household Production: International Perspectives*. Cambridge, MA: Cambridge University Press (1997), pp. 111-175.

Burkhauser, Richard V. "Post-ADA: Are People with Disabilities Expected to Work?," *The Annals of the American Academy of Political and Social Science*, 549 (January 1997): 71-83.

Burkhauser, Richard V., Andrew J. Glenn, and David C. Wittenburg. "The Disabled Worker Tax Credit." In Virginia Reno, Jerry Mashaw, and William Gradison (eds.), *Disability: Challenges for Social Insurance, Health Care Financing and Labor Market Policy*. Washington, DC: National Academy of Social Insurance (1997), pp. 47-65.

Daly, Mary C., Amy D. Crews, and Richard V. Burkhauser. "A New Look at the Distributional Effects of Economic Growth during the 1980s: A Comparative Study of the United States and Germany," *Federal Reserve Bank of San Francisco Economic Review*, 2 (1997): 18-31.

Burkhauser, Richard V., Amy D. Crews, and Mary C. Daly. "How the Fruits of Growth Were Distributed among Working Families in the United States and Germany in the 1980s." In *Labor Markets in the United States*. Mannheim, Germany: German-American Academic Council Foundation (1997), pp. 201-247.

Burkhauser, Richard V., Michaela Kreyenfeld, and Gert G. Wagner. "The German Socio-Economic Panel: A Representative Sample of Reunited Germany and its Parts," *Vierteljahrshefte Zur Wirtschaftsforschung*, 1 (1997): 7-16.

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Burkhauser, Richard V. and Robert H. Haveman. "United States Policy Toward the Disabled and Employment Handicapped." International Institute of Management Wissenschaftszentrum Science Center - Berlin (IIM/LMP 84-4a) 1984.

1982 Burkhauser, Richard V. and Joseph F. Quinn. "The Effect of Pension Systems on Work Effort." In Task Completion Report Financial Retirement Incentives in Private Pension Plans, DOL Contract No.: J-9-P-0-0163, January 1982.

Burkhauser, Richard V. and Joseph F. Quinn. "Do Retirement Dreams Come True? An Empirical Analysis of Planned and Actual Retirement." In Task Completion Report, The Relationship Between Expected and Actual Labor Supply Responses of Older Workers. DOL Contract No: J-9-P-0-0159, August 1982.

1981 Burkhauser, Richard V. and Irene Powell. "A Review and Analysis of Employers' Rationales for Setting Mandatory Retirement Age Limits." Urban Institute Research Paper 1348-01, June 1981.

Burkhauser, Richard V. and Joseph F. Quinn. "The Relationship Between Mandatory Retirement Age Limits and Pension Rules in the Retirement Decision." Urban Institute Research Paper 1348-03, June 1981.

Burkhauser, Richard V. "Retirement Decisions: Incentives and Constraints." In *National Research Plan on Aging*, National Institute on Aging, March 1981.

1979 Burkhauser, Richard V. "An Economic Analysis of Early Social Security Acceptance." In *Policy Analysis with Social Security Research Files*. U.S. Department of Health, Education, and Welfare, SSA/ORS Research Report No. 52 HEW Pub. No. (SSA) 79-11808, 1979.

- 1981 Policymaking for Social Security, Martha Derthick. *Journal of Human Resources*, 16(1) (Winter 1981): 157-160.
- Social Security: The Inherent Contraction, Peter J. Ferrara. *Southern Economic Journal*, 48(2) (October 1981): 520-521.
- 1980 Social Security and Pensions in Transition, Bruno Stein. *Aging and Work*, 3(4) (Fall, 1980): 282-283.
- Report of the 1979 Advisory Council on Social Security. *Generations*, 5(1) (October 1980):47.
- 1978 The Future of Social Security, Alicia H. Munnell. *Journal of Finance*, 2 (May, 1978): 673-674.

GOVERNMENT PUBLICATIONS

- 1999 Burkhauser, Richard V. "Consequences of Returning the Earliest Age of Social Security Retirement Benefits to 65: First Results from the Health and Retirement Study." Hearing before the Committee on Ways and Means, House of Representatives, The Subcommittee on Social Security, First Session, February 1999, 160th Congress, Series 106-8, Washington, DC: pp. 267-278.
- 1997 Burkhauser, Richard V. and Joseph F. Quinn. "Implementing Pro-Work Policies for Older Americans in the Twenty-First Century." Forum before the Special Committee on Aging, United States Senate, 150th Congress (First Session), July 25, 1997, Series No. 105. Washington, DC: U.S. Government Printing Office, pp. 57-84.
- 1996 Burkhauser, Richard V. and David C. Wittenburg. "How Current Disability Transfer Policies Discourage Work." Final Report to the U.S. Department of Education Office of Special Education and Rehabilitation Services, National Institute on Disability and Rehabilitation Research and Social Security Administration, Office of Disability, September 1996.
- 1989 Burkhauser, Richard V. and Joseph F. Quinn. "Labor Force Participation of Older Workers." In *Investing in People: A Strategy to Address America's Workforce Crisis*, Commission on Workforce Quality and Labor Market Efficiency. Washington, DC: U.S. Department of Labor, September 1989.
- Burkhauser, Richard V., Kathryn H. Anderson, and Jennie Raymond. "Whom the Job Training Partnership Act Programs Serve in Tennessee" In *Report to Governor McWherter on the Job Training Partnership Act Program in Tennessee*, edited by Clifford Russell, May W. Shayne, and Timothy M. Smeeding. Final Report to the State of Tennessee 1989.

1976

Tolley, George S. and Richard V. Burkhauser. "Federal Economic Policy Toward the Elderly." In *Social Policy, Social Ethics in an Aging Society*, edited by R.J. Havighurst and B. Neugarten, NSF/RA 76-000247, 1976.

WORKING PAPERS

Burkhauser, Richard V., J.S. Butler, and Robert R. Weathers II. 1999. "How Policy Variables Influence the Timing of Social Security Disability Insurance Applications." Department of Policy Analysis and Management, Cornell University, Ithaca, NY, September.

GRANTS, GOVERNMENT CONTRACTS

- 1999-2002 Investigator, "Disability Evaluation Study" Social Security Administration.
- 1998-2003 Co-Principal Investigator, "Center for Economic Research on Employment Policy for Persons with Disabilities," National Institute on Disability and Rehabilitation Research (\$3,500,000).
- 1997-1998 Principal Investigator, "Cross-National Conference on Health and Retirement Data," National Institute on Aging (\$40,000).
- 1996-1999 Principal Investigator, "The Well-Being of the Elderly in a Comparative Context," Continuation, National Institute on Aging (\$1,636,292).
- 1994-1999 Senior Research Associate, "Center for Demography and Economics of Aging," National Institute on Aging.
- 1993-1998 Principal Investigator, "Economics and Demography of Aging Post-Doctoral Program," National Institute on Aging (\$289,866).
- 1992-1993 Co-Principal Investigator (with Michael Wasylenko), "Changing Needs, Changing Neighborhoods: How Older People Respond When Neighborhoods Change," AARP Andrus Foundation (\$75,000).
- 1992-1993 Investigator, "Americans with Disabilities Act Implementation Project," Milbank Memorial Fund.
- 1992-1995 Principal Investigator, "Geriatric Academic Leadership Award," National Institute on Aging (\$248,773).
- 1991-1996 Principal Investigator, "The Well Being of the Elderly in a Comparative Context," National Institute on Aging (\$2,228,417)
- 1990-1991 Working Group Member (Survey Research Institute, University of Michigan), "Health and Retirement Study," National Institute on Aging
- 1990-1991 Investigator (ICF), "Work After Retirement," ICF Project under contract with the Commonwealth Fund.

- 1988-1989 Principal Investigator, "Commission on Workforce Quality and Labor Market Efficiency," U. S. Department of Labor (\$9,335)
- 1988-1989 Researcher, JTPA Evaluation, State of Tennessee-Governor's Office
- 1988-1989 Co-Principal Investigator (with Timothy Smeeding), "Eligibility for Welfare Programs in Tennessee," Tennessee Department of Human Services (\$12,336)
- 1987-1989 Co-Principal Investigator (with Karen C. Holden), "Economic Changes After Retirement," Department of Health and Human Services, Social Security Administration (\$114,103)
- 1987-1988 Principal Investigator, "Forecasting Models of Welfare Expenditures in Tennessee," Tennessee Department of Human Services (\$11,185)
- 1985-1986 Co-Principal Investigator (with Karen C. Holden), "The Risk and Timing of Poverty After Retirement," AARP Andrus Foundation (\$50,000)
- 1985-1986 Co-Principal Investigator (with Joseph F. Quinn), "Retirement Patterns," W. E. Upjohn Institute (\$25,000)
- 1984 Co-Principal Investigator (with Kathryn H. Anderson and J. S. Butler), "Issues of Poverty: A Life-Cycle View," Poverty Institute Small Grants Award (\$10,000)
- 1984 Consultant (Research Triangle Institute), "Determination of Interests and Concerns of Non-Governmental Groups Regarding the Treatment of Women Under Social Security," Social Security Administration
- 1984-1985 Co-Principal Investigator (with Karen C. Holden), "Women and Pensions: An Investigation of the Determinants of Pension Choice and Its Subsequent Effects on Economic Hardship of Widows," HHS-ASPE (\$82,817)
- 1983 Consultant, "A Study of Critical Poverty in Panama," United Nations
- 1980 Consultant (Urban Institute), "Financial Incentives for Early and Disability Retirement," U.S. Department of Labor
- 1980-1981 Principal Investigator (with Joseph F. Quinn), "The Relationship Between Expected and Actual Labor Supply Responses of Older Workers," U.S. Department of Labor (\$113,846)
- 1979 Consultant (Urban Institute), "A Study of the Labor Market Effects of Alternative Mandatory Retirement Age Limits," U.S. Department of Labor
- 1976 Consultant, "Social Policy, Social Ethics, and the Aging Society," NSF Grant No. GI-39031

- 1976 Project Director, "The Early Pension Decision and Its Effect on Exit From the Labor Market," DHEW-AoA research grant

CONFERENCE PRESENTATIONS AND OTHER ACTIVITIES (1998-1999)

- 1998 Burkhauser, Richard V., Kenneth A. Couch, and David C. Wittenburg. "Who Minimum Wage Increases Bite: An Analysis Using Monthly Data from the SIPP and CPS." American Economic Association Annual Meetings, Chicago, January 1998.

Aarts, Leo J.M., Richard V. Burkhauser, and Philip R. de Jong. "Convergence: A Comparison of European and United States Disability Policy." American Economic Association Annual Meeting, Chicago, January 1998.

Burkhauser, Richard V., Kenneth A. Couch, and David C. Wittenburg. "Does the Minimum Wage Affect Employment?" American Enterprise Institute, Washington, D.C., May 1998.

Burkhauser, Richard V., J.S. Butler, and Andrew Houtenville. "A Cross-National Comparison of Permanent Inequality in the United States and Germany in the 1990s." PSID-GSOEP Users Conference, Berlin, Germany, July 1998.

Burkhauser, Richard V. and Robert W. Weathers. "Access to Wealth Among the New-Old and How it is Distributed: Data From the Health and Retirement Study" Ford Foundation Conference on the Benefits and Mechanisms for Spreading Asset Ownership, New York City, December 1998.

- 1999 Burkhauser, Richard V., J.S. Butler, and Andrew Houtenville. "A Cross-National Comparison of Permanent Inequality in the United States and Germany in the 1990s." American Economic Association Annual Meeting, New York City, January 1999.

Burkhauser, Richard V. "An Economists Prospective on Backlash Against The Americans With Disabilities Act of 1990." Symposium on The Americans With Disabilities Act: Backlash Against the Americans With Disabilities Act of 1990: Interdisiplinary Perspectives and Implications for Social Justice Strategies, Berkeley, CA March, 1999.

Burkhauser, Richard V. and Timothy M. Smeeding. "Panel Data and Public Policy: National and Cross-National Perspectives." Institute for Social and Economic Research/BHPS 10th Anniversary Conference, May, 1999.

Burkhauser, Richard V. "Issues in Disability Policy." Conference on Causes and Consequences of Early Retirement, Rockefeller Center, Bellagio, Italy, July, 1999.

Burkhauser, Richard V. Mary C. Daly and Andrew J. Houtenville. "How Working Age People with Disabilities Fared over the 1990s Business Cycle." Annual APPAM Meetings, Washington, DC, November, 1999.

PEER EVALUATION EXPERIENCE

Editorial Positions

Associate Editor, *Journal of Human Resources* (1984-1994)
Editorial Board Member, *Journal of Gerontology* (1984-89)
Editorial Board Member, *The Gerontologist* (1987-)
Editorial Board Member, *Journal of Disability Policy Studies* (1989-)
Editorial Board Member, *Review of Income and Wealth* (1989-)
Editorial Board Member, *Labour Economics* (1991-)
Editorial Board Member, *Canadian Public Policy* (1995-)
Editorial Board Member, *Research on Aging* (1998-)

Academic Commissions and Study Sections

Member of the Social Sciences and Population Study Section, Division of Research Grants, National Institute of Health (1986-1990)
Member of the Panel on Employer Policies and Working Families, National Academy of Science Commission on Behavioral and Social Science and Education (1988-1990)
Member of the Panel Study on Income Dynamics Board of Overseers (1996-)
Member of the Panel on New Data for an Aging World, National Research Council Commission on Behavioral and Social Sciences and Education (1998-)

Others

Member of Vanderbilt University Promotion and Tenure Review Committee (1987-1989)
Member of the Nominating Committee, Southern Economic Association (1989)
Board of Governors, Foundation for International Studies of Social Security (1989-95)
Chair, APPAM Dissertation Award Committee (1992-94)

REFEREE

American Economic Review	Growth and Change
American Sociological Review	Industrial and Labor Relations Review
Canadian Journal of Economics	Industrial Relations
Canadian Public Policy	Journal of Applied Econometrics
Journal of Gerontology	
Journal of Labor Economics	
Journal of Political Economy	
Journal of Public Finance	
Demography	
Econometrica	
Economic Development and Cultural Change	
Economic Inquiry	
Empirical Economics	
The Gerontologist	

Journal of Developing Areas
Journal of Disability Policy Studies
Journal of Health Economics
Journal of Human Resources
Journal of Public Policy and
Management
Konjunkturpolitik (Applied
Economics Quarterly)
Labour Economics
Policy Studies Journal
Public Finance Quarterly
Quarterly Journal of Economics
National Science Foundation
National Tax Journal
Research Council of Canada
Research on Aging
Review of Economics and Statistics
Review of Income and Wealth
Social Science Quarterly

AFFILIATIONS

Member of the American Economic Association; Southern Economic Association; The Association of Public Policy Analysis and Management; The Population Association of America; Southwestern Social Science Association; Member and Fellow of The Gerontology Society of America; Member of the Conference on Research in Income and Wealth, National Bureau of Economic Research; Founding Member of the National Academy of Social Insurance

PUBLIC TESTIMONY

Witness for the U.S. House of Representatives Education and Workforce Committee, "Minimum Wage: Reviewing Recent Evidence of its Impact on Poverty," Washington, DC, April 27, 1999.

Witness for the U.S. House of Representatives Ways and Means Committee, "Consequences of Returning the Earliest Age of Social Security Retirement Benefits to 65: First Results from the Health and Retirement Study," Washington, DC, February 10, 1999.

Witness for U.S. Senate Special Committee on Aging, "Preparing for the Babyboomers' Retirement: The Role of Employment," Washington, DC, July 25, 1997.

Witness for the Social Security Advisory Board, "Future Research Issues," Washington, DC, June 24, 1997.

Witness for the Commission on the Social Security 'Notch' Issue, Kansas City, Missouri, November 15, 1994.

Witness for the Advisory Commission on Social Security, Washington, DC, November 18, 1994.

Panelist for U.S. Senate Select Committee on Aging, Subcommittee on Retirement Income and Employment, Washington, DC, September 11, 1992.

Speaker for Consortium of Social Science Associations congressional seminar, Rayburn House Office Building, Washington, D.C., May 26, 1988.

Witness for Select Committee on Aging, U.S. House of Representatives, Washington, D.C., June 3, 1981.

Witness for Committee on Ways and Means, U.S. House of Representatives, Washington, D.C., September 10, 1980.

Witness for the Advisory Council on Social Security at the Washington, D.C. Public Hearing, January 5, 1979.

SERVICE ON PUBLIC PANELS

- | | |
|-----------|---|
| 1994-1996 | Member of the National Academy of Social Insurance Panel on "Rethinking Disability Policy: The Role of Income, Health Care, Rehabilitation and Related Supports in Fostering Independence." |
| 1994-1995 | Member of the Trends and Issues in Retirement Savings Technical Panel of the 1994 Advisory Council on Social Security. |
| 1993-1994 | Member of the Advisory Panel of the "Access to Over-the-Road Buses for Persons with Disability," project of the Office of Technology Assessment, Congress of the United States. |

TEACHING, RESEARCH, AND OTHER EXPERIENCE

- 1998- Sarah Gibson Blanding Professor of Policy Analysis and Chair of the Department of Policy Analysis and Management, Cornell University, Ithaca, New York.
- 1996 Visiting Professor, The European University Viadrina, Frankurt on the Oder, Federal Republic of Germany (summer).
- 1990-1998 Professor, Department of Economics, The Maxwell School, Syracuse University, Syracuse, New York
- 1990-1991 Fellow - Netherlands Institute for Advanced Study in the Humanities and Social Sciences, Institute of the Royal Netherlands Academy of Arts and Sciences, Wassenaar, The Netherlands
- 1990 Resource Person (July) - Summer Seminar on Population - East-West Center, Honolulu
- 1988 Visiting Scholar (July) - Johann Wolfgang Goethe Universitat, Frankfurt an Main, Federal Republic of Germany
- 1988 United States Information Agency - American Participants Program in The Netherlands and the Federal Republic of Germany
- 1985-1990 Professor - Department of Economics, Vanderbilt University, Nashville, Tennessee
- 1984-1985 Visiting Scholar - Department of Economics, University of Wisconsin, Madison, Wisconsin
- 1984-1985 Consultant - Research Triangle Institute, Research Triangle Park, North Carolina
- 1983-1984 Consultant (in Panama) - United Nations, New York, New York
- 1982-1985 Associate Professor - Department of Economics, Vanderbilt University, Nashville, Tennessee
- 1979-1982 Assistant Professor - Department of Economics, Vanderbilt University, Nashville, Tennessee
- 1978-1981 Consultant - Urban Institute, Washington, D.C.
- 1977-1979 Research Associate - Institute for Research on Poverty, University of Wisconsin, Madison, Wisconsin

1976-1977 Economist - HEW/OS/ASPE/ISP-R, Washington, D.C.

1973-1976 Research Assistant - University of Chicago, Chicago, Illinois

1970-1972 Mathematics Teacher Trainer - Peace Corps, Kingston, Jamaica

1969-1970 Mathematics Teacher - Trenton High School, Trenton, New Jersey

CURRICULUM VITAE
JAY S. HIMMELSTEIN, M.D., M.P.H.
20 Berwick Street
Worcester, MA 01602

Office Address: Center for Health Policy and Health Services Research
University of Massachusetts Medical School
222 Maple Avenue/Higgins Building
Shrewsbury, MA 01545

Current Positions:

1996-present	Director UMass Center for Health Policy and Health Services Research University of Massachusetts Medical Center
1995-present	National Program Director Robert Wood Johnson Foundation Workers' Compensation Health Care Initiative University of Massachusetts Medical Center
1992-present	Assistant Chancellor for Health Policy University of Massachusetts Medical Center
1997-present	Professor Department of Family and Community Medicine University of Massachusetts Medical Center

Previous Positions:

1988-1997	Director Occupational and Environmental Health Program Department of Family and Community Medicine University of Massachusetts Medical Center
1988-1997	Associate Professor Department of Family and Community Medicine University of Massachusetts Medical Center
1983-1988	Assistant Professor Department of Family and Community Medicine University of Massachusetts Medical Center
1990-1995	Director New England Center for Occupational Musculoskeletal Disorders University of Massachusetts Medical Center
1991-1992	Robert Wood Johnson Health Policy Fellow Senate Labor and Human Resources Committee Washington, DC

Previous Positions (continued):

1985-1989	Co-Director Joint Harvard School of Public Health-University of Massachusetts Medical Center Residency in Occupational Medicine
1983-1986	Chief of Clinical Services Occupational and Environmental Health Program University of Massachusetts Medical Center

Education:

1974 B.A.	Johns Hopkins University
1978 M.D.	University of Maryland Medical School
1980 M.P.H.	Harvard School of Public Health (Occupational Health)
1982 M.S.	Harvard School of Public Health (Physiology)

Postdoctoral Training:Internship and Residencies:

1978-1979	Rotating Internship, Eastern Maine Medical Center, Bangor, ME
1979-1981	Residency in Occupational Medicine, Harvard School of Public Health and Peter Bent Brigham Hospital, Boston, MA
1981-1982	Junior Assistant Resident in Primary Care Internal Medicine Mount Auburn Hospital Cambridge, MA
1982-1983	Senior Assistant Resident in Primary Care Internal Medicine, Mount Auburn Hospital Cambridge, MA

Licensure and Certification:

1978-1983	Maryland License Registration
1979-1984	Maine License Registration
1980-Present	Massachusetts License Registration
1983	Certification by American Board of Internal Medicine
1984	Certification by American Board of Preventive Medicine (Occupational Medicine)

Academic Appointments:

1979-1981	Clinical Research Fellow in Medicine, Harvard Medical School (Peter Bent Brigham Hospital)
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Academic Appointments (continued):

1981-1983	Clinical Fellow in Medicine, Harvard Medical School (Mount Auburn Hospital)
1983-1988	Assistant Professor, Department of Family and Community Medicine, University of Massachusetts Medical School
1983-1988	Senior Research Associate, Center for Energy, Technology and Development (CENTED), Clark University
1985-1993	Lecturer in Occupational Medicine, Harvard School of Public Health
1988-1997	Associate Professor, Department of Family and Community Medicine, and Department of Medicine, University of Massachusetts Medical School
1997-present	Professor, Department of Family Medicine and Community Health, and Department of Medicine, University of Massachusetts Medical School

Hospital Privileges:

1983-Present	University of Massachusetts Medical Center
1987-Present	Holyoke Hospital - Consulting Privileges in Internal Medicine/Occupational Health

Committee Participation:

1988-1992	Member, Public Health Council of the Massachusetts Department of Public Health.
1998-present	Member, Agency for Health Care Policy and Research, Health Care Training Study Section

University of Massachusetts Medical Center:

1984-1986	Ambulatory Care Service Committee
1986-1989	Departmental Personnel Action Committee (elected) Chair, 1988-1989

Other Committees:

1986-1991	Co-director, Steering Committee, Central Massachusetts Physicians for Social Responsibility
1986-1987	Scientific Review Committee, Worcester Department of Public Health
1994-1995	Chair of Faculty Task Force on Health Policy and Health Services Research, University of Massachusetts Medical Center
1994-Present	Corporator, Worcester County Foundation

Memberships:

1983-Present	Member, American Public Health Association
1983-Present	Member, Physicians for Social Responsibility
1984-Present	Member, American College of Physicians
1987-Present	Fellow, American College of Occupational and Environmental Medicine
1994-Present	Member, International Commission on Occupational Health
1998-present	Member, National Academy of Social Insurance

Current & Recent Extramural Funding:

1. W.K. Kellogg Foundation "Model Occupational Health Training Program"
Award Amount: \$396,136 over a five year period beginning in 1985
Role: Principal Investigator
2. National Institute for Occupational Safety and Health "Occupational Health and Safety Training"
Award amount: \$88,900 over a two year period beginning July, 1988.
Role: Principal Investigator
3. National Cancer Institute RFA89CA05 - "Worksite Cancer Prevention Project"
Award amount: \$2,225,456 over five years beginning 1989
Role: Co-Principal Investigator
4. Massachusetts Department of Industrial Accidents "Worker Training for the Prevention of Cumulative Trauma Disorders"
Award Amount: \$33,631 over a one year period beginning July, 1990
Role: Principal Investigator
5. National Institute for Occupational Safety and Health U60/CCU106156-01 - New England Center for Occupational Musculoskeletal Disorders"
Award amount: \$1,225,000 over five years beginning 1990
Role: Principal Investigator and Director
6. The Robert Wood Johnson Foundation Health Policy Fellowship Program
Award amount: \$57,111 over one year sabbatical period, 1991-1992
Role: Health Policy Fellow
7. The Robert Wood Johnson Foundation "Integrating Workers' Compensation and Health Care System Reform"
Award Amount: \$98,010 over a one year period, 1993-1994.
Role: Principal Investigator
8. The Robert Wood Johnson Foundation "Medical Care Delivery under the Federal Workers' Compensation Program: Are there opportunities for improving quality and controlling costs?"
Award Amount: \$71,163 over eighteen months beginning March, 1995.
Role: Principal Investigator
9. National Institute for Occupational Safety and Health Cooperative Agreement "Evaluation of Rehabilitation Programs for Work-Related Musculoskeletal Disorders"
Award Amount: \$1,250,000 over a five year period beginning October, 1995.
Role: Co-Principal Investigator

Current & Recent Extramural Funding (continued):

10. The Robert Wood Johnson Foundation: Grant to establish the National Program Office for the Workers' Compensation Health Initiative
Award Amount: \$1.8 million over a six year period beginning October, 1995.
Role: Principal Investigator and Director, National Program Office
11. Massachusetts Division of Medical Assistance: Intergovernmental Service Agreement (ISA) to establish the Center for MassHealth Evaluation and Research (CMER)
Award Amount: \$500,000 for fiscal year 1997, anticipated renewal for three years
Role: Principal Investigator and Director, Center for MassHealth Evaluation and Research
12. Massachusetts Division of Medical Assistance: Intergovernmental Service Agreement (ISA) to establish the Center for MassHealth Evaluation and Research (CMER)
Award Amount: \$1.5 million for fiscal year 1998, anticipated renewal for three years
Role: Principal Investigator and Director, Center for MassHealth Evaluation and Research
13. Massachusetts Division of Medical Assistance: Intergovernmental Service Agreement (ISA) to establish the Center for MassHealth Evaluation and Research (CMER)
Award Amount: \$1.5 million for fiscal year 1999, anticipated renewal for three years
Role: Principal Investigator and Director, Center for MassHealth Evaluation and Research
14. Massachusetts Division of Medical Assistance: Intergovernmental Service Agreement (ISA) to establish the Center for MassHealth Evaluation and Research (CMER)
Award Amount: \$1.5 million for fiscal year 2000, anticipated renewal for three years
Role: Principal Investigator and Director, Center for MassHealth Evaluation and Research
15. National Institute for Occupational Safety and Health Cooperative Agreement "Evaluation of Rehabilitation Programs for Work-Related Musculoskeletal Disorders"
Award Amount: \$ 212, 929 over a one year period beginning October, 1999.
Role: Principal Investigator

Publications:

Articles in Peer-Reviewed Journals:

1. Guarnari M, Himmelstein JS, McCann GM. Isolated myelin quantitatively absorbs antibody to basic protein. *Brain Research*. 1974; 173-176.
2. Landrigan PH, Baker EL, Himmelstein JS, Stein GF, Weddig J, Straub W. Exposure to lead from the Mystic River Bridge: The dilemma of deleading. *N Engl J Med*. 1982; 306:673-676.
3. Himmelstein JS, and Frumkin HF. The right to know about toxic exposures: Implications for physicians. *N Engl J Med*. March 7, 1985; 312:687-690.
4. Paul MP, and Himmelstein JS. Reproductive hazards in the workplace: What the practitioner needs to know. *Obstetrics and Gynecology*. 1988; 71:921.
5. Paul M, Himmelstein JS, Weinstein S, Pransky G, McDougal C, Brogie B, Legendre S. Ocular infections and the industrial use of microscopes. *Journal of Occupational Medicine*. 1989; 31(9).
6. Jederlinic PJ, Abraham JL, Churg A, Epler G, Gaensler EA, Himmelstein JS. Pulmonary fibrosis in aluminum oxide workers. *Am Rev Res Dis*. 1990; 142:1179-1184.
7. Barter T, Irwin R, Abraham J, Dascal A, Nash G, Himmelstein JS, Jederlinic P. Zirconium-induced pulmonary fibrosis. *Arch Int Med*. 1991; 151:1197-1201.
8. Snyder TB, Himmelstein J, Pransky GS, Beavers JD. Business analysis in occupational health and safety consultations. *JOM*. 1991; 33(10).
9. Himmelstein JS, Pransky GS. The ADA and you: Implications for the occupational health professional. *JOM*. 1992; 34(5).
10. Himmelstein JS, Droney T, Pransky G, Morgan W, Feuerstein M. Development of a multidisciplinary research clinic for patients with work-related upper extremity disorders. *Journal of Ambulatory Care Management*. 1994; 17(2):34-43.
11. Sorenson G, Himmelstein JS, Hunt MK, Youngstrom R, Hebert JR, Hammond SK, Palombo R, Stoddard A, Ockene JK. A model for worksite cancer prevention: Integration of health promotion in the WellWorks project. *American Journal of Health Promotion*. September/October 1995, Vol. 10(1):55-62, 1995.
12. Himmelstein JS, Koyamatsu K, Feuerstein M, Morgan W, Stanek E, Anderson K, Pransky GS. Work-related upper extremity disorders and work disability - Clinical and Psychosocial Presentation, *Journal of Occupational and Environmental Medicine*, November 1995, Vol. 37, No. 11.

Publications (Continued):

13. Himmelstein JS, Rest K. How Workers' Compensation Medical Care is Affected by Health Care Reform. *Public Health Reports*, January/February 1996, Vol. 111. No. 1.
14. Beavers D, Himmelstein JS, Hammond SK, Smith T, Kenyon E, Sweet C. Exposure in Household Using Gasoline-Contaminated Water. *Journal of Occupational and Environmental Medicine*, January 1996, Vol. 38. No. 1.
15. Pransky GS, Himmelstein JS. Outcomes Research: Implications for Occupational Health. *American Journal of Industrial Medicine*, June 1996, Vol. 29. No. 6.
16. Dembe A, Himmelstein JS, Stevens B, Beachler M. Improving Workers' Compensation Health Care. *Health Affairs*, July/August 1997.
17. Pransky GS, Hammer K, Long R, Schulz L, Himmelstein JS, Fowke J. Screening for carpal tunnel syndrome in the workplace: analysis of portable nerve conduction devices, *Journal of Occupational and Environmental Medicine*, August 1997, Vol. 39. No.8.
18. Pransky, GS, Feurestein M, Himmelstein JS, Katz JN. Measuring functional outcomes in work-related upper extremity disorders: development and validation of the upper extremity functional scale, *Journal of Occupational and Environmental Medicine*, December 1997, Vol. 39. No. 12.
19. Pransky G, Snyder T, Dembe A, Himmelstein J. Under-reporting of work-related conditions in the workplace; causes and the role of safety incentive programs, *Ergonomics*, 1999, Vol. 42. No. 1.
20. Dembe A, Himmelstein J. Contract Provisions to Ensure Quality in Workers' Compensation Managed Care Arrangements, *Journal of Insurance Regulation*, Spring 1999: 288-326.
21. Himmelstein J, Buchanan J, Dembe A, Stevens B. Health Services Research in Workers' Compensation Medical Care: Policy Issues and Research Opportunities, *Health Services Research*, April 1999, Vol. 34. No. 1:427-437.
22. Spieler EA, Barth PS, Burton JF, Himmelstein JS, Rudolph L. Recommendations for Revisions of the AMA's *Guidelines to the Evaluation of Permanent Impairment*, *JAMA* 2000 (in press)
23. Pransky G, Benjamin K, Himmelstein J, Mundt K, Morgan W, Feuerstein M, Koyamatsu K, Hill-Fatouhi C. Work-Related Upper-Extremity Disorders: Prospective Evaluation of Clinical and Functional Outcomes, *Journal of Occupational and Environmental Medicine*, (in press).

Publications (Continued):

24. Pransky G, Benjamin K, Hill-Fatouhi C, Himmelstein J, Fletcher K, Katz J. Outcomes in Work-Related Upper Extremity and Low Back Injuries: Results of a Retrospective Study, (in review).

Abstracts and Presentations at National or International Scientific Meetings:

1. Himmelstein JS, Golding D, Kasperon R, Derr P; "Managing Low Back Pain in Industry". American Public Health Association Convention, Anaheim, CA, November 11, 1984.
2. Himmelstein JS, and Frumkin HF; "The Right to Know about Toxic Exposures: Implications for Physicians". American Public Health Association Convention, Anaheim, CA, November 11, 1984.
3. Pransky G, and Himmelstein JS; "Standards in Occupational Medicine Residencies". American Public Health Association Convention, Las Vegas, Nevada, September, 1986.
4. Pransky G, and Himmelstein JS; "Pleural Plaques in Asbestos Exposed Workers: Implications". American Public Health Association Convention, Las Vegas, Nevada, September, 1986.
5. Himmelstein JS; "Differential Susceptibility to Reproductive Toxins: Ethical Implications", Regional Conference of the Occupational Health Section, American Public Health Association Convention, April 1987.
6. Jederlinic PJ, Abraham JL, Chury A, Epler G, Gaensler EA, Himmelstein JS: "Pulmonary Fibrosis in Aluminum Oxide Workers", American Thoracic Society 1988,
7. Barter T, Irwin R, Abraham J, Dascal A, Nash G, Himmelstein JS, Jederlinic P; "Zirconium-Induced Pulmonary Fibrosis", American Thoracic Society, 1989.
8. Himmelstein JS, Pransky GS; "Administrative Barriers to Improved Health and Safety: Cumulative Trauma Disorders": International Symposium on New Trends and Development in Occupational Health Services, Espoo, Finland, 1989.
9. Pransky GS, Himmelstein JS, Gaudette P; "Job Analysis Methods in Worker Rehabilitation": International Scientific Conference on Prevention of Work-Related Musculoskeletal Disorders, PREMUS, Stockholm Sweden, May 1992.
10. Himmelstein JS; "Technical Aspects of Determining Fitness to Work: Example - Low Back Syndromes, American College of Occupational and Environmental Medicine, American Occupational Health Conference, Washington, DC, May 1992.

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11. Sorenson G, Himmelstein J, Hebert J, Hunt MK, Palombo R, Hammond K, Ockene J. "Promoting Smoking Cessation, Dietary Change, and Occupational Health: An Integrated Intervention Model for Worksites", American Public Health Association Convention, 1991.
12. Sorenson G, Himmelstein J, Hebert J, Hunt MK, Palombo R, Hammond K, Ockene J. "Health Protection Versus Health Promotion - Can the Two be Integrated?" American Public Health Association Convention, 1991.
13. Himmelstein JS, Pransky GS, Fram D. "The Americans With Disabilities Act: Equal Opportunity for Employment for People with Disabilities", International Congress on Occupational Health, Nice, France, September, 1993.
14. Pransky GS, Snyder TB, Himmelstein JS. "The Organizational Response: Influence on Cumulative Trauma Disorders in the Workplace", NIOSH/Center for Office Technology - sponsored conference, "Psychosocial Issues and Office-Related CTDs", Durham, NC, November 11-12, 1993.
15. Pransky GS, Himmelstein JS. "Overview of complete patient management - assessment, treatment, and the interface between rehabilitation and return to work in repetitive motion disorders of the upper extremity", NIH Workshop on Repetitive Motion Disorders of the Upper Extremity, June 1994, Bethesda, MD
16. Pransky GS, Himmelstein JS, Morgan W. "Ergonomic issues in rehabilitation and return to work in occupational upper extremity cumulative trauma disorders: Observations from the New England Center for Occupational Musculoskeletal Disorders (NECOMD)", 12th Triennial Congress of the International Ergonomics Association, August, 1994.
17. Himmelstein JS, Rest KM. "Public Policy Analysis of Alternative Designs for Integration of Workers Compensation Medical Care with Health Insurance", American Public Health Association's 122nd Annual Meeting, October 31-November 3, 1994, Washington, DC.
18. Himmelstein JS. "Disability and Unemployment in Work-Related Occupational Upper Extremity Disorders: A Cross-Sectional Analysis", American Public Health Association's 122nd Annual Meeting, October 31-November 3, 1994, Washington, DC.
19. Himmelstein JS. "The Impact on Healthcare Reform on Occupational and Environmental Medicine", Prevention in Practice: Workplace Health in the 21st Century, American College of Occupational and Environmental Medicine, 10/25/94, Denver, CO.
20. Himmelstein JS. "The American with Disabilities Act: Innovations for Workplace Rehabilitation", 25th International Congress on Occupational Health, September 15-20, 1996, Stockholm, Sweden.

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21. Pransky GS, Himmelstein JS, Morgan W. "Outcomes in a Follow-up Study of Treatment for the Carpal Tunnel Syndrome", 25th International Congress on Occupational Health, September 15-20, 1996, Stockholm, Sweden
22. Himmelstein, JS. "Measuring the Quality of Workers' Compensation Medical Care", American Public Health Association's 124th Annual Meeting, November 17-November 21, 1996, New York, NY.
23. Himmelstein JS, Pransky GS, Morgan W. "Outcomes Related to Work in the Carpal Tunnel Syndrome: Results of a Follow-up Study", American Public Health Association's 124th Annual Meeting, November 17-November 21, 1996.
24. Himmelstein JS. "Measuring Health Outcomes: Implications for Occupational Medicine", New England College of Occupational and Environmental Medicine Annual Conference, December 4, 1997, Boston, MA.
25. Himmelstein J, Dembe A, Buchanan J. "Application of Health Services Research Techniques to Workers' Compensation Medical Care: Policy and Methodological Considerations", Association for Health Services Research 15th Annual Meeting, June 21-June 23, 1998.

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1. Himmelstein JH, and Pransky GS, guest editors, "Worker Fitness and Risk Evaluations", State of the Art Reviews: Occupational Medicine, Vol. 3-No.1, April-June 1988.
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7. Himmelstein JS. Prevention of Industrial Low Back Pain. In: American Public Health Association, Occupational Injury and Disease Control, Little and Brown, 1992.
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9. Sorenson G, Himmelstein JS. Worksite Intervention. In: Ira and Judith Ockene Prevention of Coronary Heart Disease. Little and Brown, 1992.
10. Himmelstein JS. Low back pain syndrome In: Weeks JL, Levy BS, Wagner GR eds Preventing Occupational Disease and Injury. American Public Health Association, 396-403, 1991.
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13. Pransky GS, Himmelstein J. Overview of Complete Patient Management in Upper Extremity Repetitive Motion Disorders, In: Green S (ed), Repetitive Motion Disorders, Taylor and Francis 1995.
14. Pransky GS, Himmelstein JS. Evaluating Outcomes of Workers Compensation Medical Care. In: Kimpan K (ed), Workers' Compensation Medical Care: Effective Measurement of Outcomes, Workers Compensation Research Institute, 1996, 11-32.
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1. Journal of Occupational Rehabilitation

Ad Hoc Reviewer:

1. Journal of the American Public Health Association
2. Archives of Internal Medicine
3. Journal of Occupational and Environmental Medicine
4. Health Services Research
5. American Journal of Industrial Medicine

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1. National Institute for Occupational Safety and Health Grant Review Committees 1990, 1992, 1993
2. National Institute for Occupational Safety and Health, Health Services Research, Research Agenda Setting Committee, 1997.
3. Agency for Health Care Policy and Research, Invited Expert Panelist on Musculoskeletal Outcomes Research, 1997.

Recent Scholarly Service of National Scope (continued):

4. National Academy of Social Insurance, Academy's Steering Committee on Workers' Compensation, 1997.
5. American Medical Association, Steering Committee, Revision of AMA Guidelines to Permanent Impairment, 1997
6. Member, Agency for Health Care Policy and Research, Health Care Training Study Section, 1998

Selected Recent National and Regional Educational Presentations:

1. Himmelstein JS. "Unlinking Medical and Disability Benefits", Health Care Reform and Workers' Compensation Conference, Washington Health Services Commission, October 7, 1994, Seattle, WA.
2. Himmelstein JS. "Workers' Compensation and Health Care Reform: What's Next?", Federal Occupational Health Fall Conference, November 2, 1994.
3. Himmelstein JS. "National Health Care-Where Are We Now & How Will it Impact Worker's Compensation", Managing Work-Related Injuries, New England Baptist Hospital, Boston, MA, November 10, 1994.
4. Himmelstein JS. "Managed Care in Workers' Compensation: Opportunities and Challenges", Controlling Workers' Compensation Medical Costs, Boston, MA, August 2, 1995.
5. Himmelstein JS. "Expanding Managed Care Techniques to Control Costs", Mass Worker's Compensation Update 1995, Council on Education in Management, Boston, MA September 7, 1995.
6. Himmelstein JS. "Concepts & Challenges: Managed Care or Mangled Care", Moderator, Eastern Association of Workers' Compensation Boards & Commissions, Boston, MA, November 14, 1995.
7. Himmelstein JS. "Workers' Compensation and Managed Care: What Makes A Difference?", Workers' Comp Connection Network, BC/BS, Natick, MA, November 15, 1995.
8. Himmelstein JS. "Measures of Quality of Medical Services in Workers' Compensation", Advances in the Evaluation, Treatment, and Prevention of Work Injuries, Work Injury Management News & Digest, February 26, 1996, Dallas, TX.

Selected Recent National and Regional Educational Presentations (continued):

9. Himmelstein JS. "Managed Care to Coordinated Care: Opportunities & Challenges", Commission on Health and Safety and Workers' Compensation, April 19, 1996, San Francisco, CA.
10. Himmelstein JS. "Perspectives on Managed Care in Workers' Compensation", Global Management of Work-Related Musculoskeletal Injuries, June 14, 1996, Naples, FL.
11. Himmelstein JS. "New Perspectives on Managed Care", 20th Annual National Symposium on Workers' Compensation, July 15, 1996, East Lansing, MI.
12. Himmelstein JS. "Outcome Analysis: Defining and Measuring Quality in Occupational Health", 10th Annual National Conference, September 30, 1996, Boston, MA.
13. Himmelstein JS. "Managed Care and Corporate Consolidation in Workers' Compensation", The New England College of Occupational and Environmental Medicine Meeting, October 3, 1996, Waltham, MA.
14. Himmelstein JS. "Outcomes Research: Implications for Workers' Compensation and Occupational Health", National Workers' Compensation and Occupational Medicine Seminar: March 5-7, 1997
15. Himmelstein JS. "The Health Insurance Portability and Accountability Act of 1996", Matthew Thornton Health Plan, July 25, 1997
16. Himmelstein JS. "Managed Care and Workers' Compensation: Issues, Models, and Challenges", Agency for Health Care Policy and Research Workshop for Senior State and Local Health Officials, July 30-August 1, 1997, Chicago, IL.
17. Himmelstein JS. "Workers' Compensation Managed Care and 24 Hour Coverage: Promises and Pitfalls, Health Plans, Inc. Conference by the Sea, September 29, 1997, Newport, RI.
18. Himmelstein JS. "New Models for Delivering Medical Care in Workers' Compensation", Workers' Compensation Managed Care Reform: Evaluating the Outcomes Conference, March 19-March 20, 1998, Tampa, FL.
19. Himmelstein JS. "National Perspective on Managed Workers' Compensation", Fourth Annual Lewis H. Millender Occupational Medicine Conference, March 27, 1998. Burlington, MA.
20. Himmelstein JS. "Managed Care comes to Workers' Compensation: Implications for Workers", National Labor Relations Board, Industrial Relations Research Association Boston Chapter. April 14, 1998, Boston, MA.

Selected Recent National and Regional Educational Presentations (continued):

21. Himmelstein, JS. "As Good As It Gets? Opportunities for Improving Workers' Compensation Care", National Managed Workers' Compensation Institute Conference. December 2, 1998, Washington, DC.
22. Himmelstein, JS. "Rehabilitation Policy in the United States", 4th International Congress on Medical-Legal Aspects of Work Injuries. June 6, 1999, Toronto, Ontario, Canada.
23. Himmelstein, JS. "As Good As It Gets? Opportunities for Improving Workers' Compensation Medical Care", IAIABC 85th Annual Convention, September 27, 1999, Washington, DC.

CURRICULUM VITA

**John Kregel, Ed.D.
Professor of Special Education
Virginia Commonwealth University**

EDUCATION

Ed.D.	1983	University of Georgia
M.S.Ed.	1977	University of Kansas
B.S.	1974	Coe College

ACADEMIC APPOINTMENTS AND OTHER SIGNIFICANT WORK EXPERIENCE

1992 - Present	Professor of Special Education, School of Education, Virginia Commonwealth University.
1986 - Present	Research Director, Rehabilitation Research and Training Center, Virginia Commonwealth University
1996 - Present	Track Coordinator - VCU School of Education Doctoral Program.
Currently	Principal Investigator - State Partnership Initiative Evaluation Project
Currently	Project Director, VCU SSI Information Project
Currently	Project Director, Part C Data Collection Project, a eight year project designed to collect child count data on infants and toddlers served through Virginia's Part H program.
Currently	Research Director, Supported Employment Evaluation Consortium

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GINA A. LIVERMORE
SENIOR MANAGER

EDUCATION

1994	Ph.D. in Economics, University of Wisconsin-Madison
1990	M.S. in Economics, University of Wisconsin-Madison
1988	M.P.H. in Epidemiology, Tulane University School of Public Health
1985	B.S. in Public Administration - Health Services Administration emphasis, and B.A. in French, University of Arizona

EXPERIENCE

Gina Livermore, a Senior Manager, joined The Lewin Group in August 1994. Dr. Livermore has experience in a wide range of health and welfare policy issues including topics in disability, Medicaid, welfare, mental health, and substance abuse. Her work at Lewin has focused on the economic aspects of disability and the analysis of policies related to the Social Security disability programs. Her work also includes the design and conduct of numerous evaluations of health and welfare policy interventions.

EXPERIENCE AT THE LEWIN GROUP

Research on Disability Program and Policy Issues

- SSA Demonstration to Provide Treatment to DI Beneficiaries with Affective Disorders. Dr. Livermore is currently directing a project to develop a research plan for a demonstration project to be implemented by SSA whereby reimbursement for treatment is provided to Social Security Disability Insurance beneficiaries with affective disorders. The Lewin Group will develop the study protocol, which will include designs for: an oversight committee; soliciting study participants and the characteristics of beneficiaries that will be permitted to participate; establishing the acceptable treatment modalities and treating sources; payment mechanisms for treatment; and the measures of progress and success that will be evaluated under the demonstration.
- Research on Employment Supports for People with Disabilities. Dr. Livermore is currently managing a project for ASPE designed to provide information to develop and inform policies that will promote the employment of people with significant disabilities. This project involves: (1) an extensive review of the recent literature on issues related to the employment of people with disabilities, and a review of current federal, state, and local policies affecting employment; (2) development of an inventory of public and private programs at the national, state, and local level that support, promote, or otherwise affect the employment of people with disabilities, and the selection of a subset of programs in specific states for more intensive case study; and (3) the design and implementation of an extensive qualitative data collection (interviews and focus groups) and analysis effort intended to yield new and rich information on the employment experiences of people with disabilities.
- The Economic Costs of Mental Illness. Dr. Livermore completed a project for the National Institute of Mental Health (NIMH) to estimate the costs associated with mental disorders in the United States. Dr. Livermore's role in the project is to estimate the impact of mental disorders on earnings and labor force participation, and to estimate the costs of welfare program participation among persons with severe mental disorders.

- NIDRR Rehabilitation Research and Training Center for Economic Research on Employment Policy for Persons with Disabilities. Dr. Livermore is currently working on a project under a five-year grant from the US Department of Education, National Institute on Disability and Rehabilitation Research (NIDRR). The Lewin Group and Cornell University are conducting a series of economic research projects designed to inform policies related to the employment of people with disabilities. As part of the project, Lewin and Cornell will develop and convene two summer training institutes on disability issues and convene a national conference on disability policy. Lewin and Cornell will also develop monographs and publications of the findings from six research projects conducted under the grant.
- Design for an Evaluation of the Effect of SSA and Non-SSA Welfare Reforms on SSA Programs Dr. Livermore recently completed a project for SSA to evaluate the impacts of reforms in the AFDC/TANF, Food Stamp and other non-SSA programs on disability program caseloads and expenditures. This project includes development of models to examine program interactions; an assessment of the usefulness of state and local databases; review of ongoing welfare reform evaluations in selected states; and site visits and case studies of welfare reforms and program interactions in five states.
- Exploratory Study of the Health Care Coverage and Employment of People with Disabilities. Dr. Livermore completed a project for the Assistant Secretary of Planning and Evaluation (ASPE) that examined the relationship among health insurance, employment, and program participation of persons with disabilities. The project involved: in-depth review of studies of the relationship between access to health insurance, employment, and program participation; descriptive analysis of SIPP and NHIS-D data of the health insurance and employment status of people with disabilities; and an analysis of 1619b Medicaid expansions and their effect on the employment and program participation of persons with disabilities.
- Policy Evaluation of the Effect of Legislation Prohibiting SSA Disability Benefits to Drug Addicts and Alcoholics. Dr. Livermore worked on a project for the Social Security Administration to evaluate the impact of the recent welfare reform legislation prohibiting DI and SSI benefits to individuals whose disability is based on drug addiction or alcoholism. The project involved: 1) descriptive analysis of the March 1996 cohort of affected beneficiaries using SSA administrative data; and 2) case studies of the impact of the legislation on state and local welfare systems in four states.
- Current and Proposed Tax Benefits for People with Disabilities. Dr. Livermore completed a report for the Disability Policy Leaders Group that summarized current and proposed tax benefits that are targeted at taxpayers with disabilities and taxpayers with disabled dependents. The report also highlighted some proposed tax benefits not designed specifically for people with disabilities but that might be modified for that purpose.
- The Impact of Changes in the Social Security Retirement Age and the Medicare Eligibility Age on Employment and Social Security Benefit Receipt. Dr. Livermore worked on a project for the American Association of Retired Persons (AARP) that examines the impact of Social Security policy changes on older workers. A focus of the study is on the impact of increasing the retirement age on the employment and DI benefit receipt of older workers with impairments.
- The Impact of Substance Abuse on Productivity. Dr. Livermore worked on a project for the National Institute on Drug Abuse (NIDA) that estimated the costs associated with alcohol and drug abuse in the United States. Dr. Livermore's role in the project was to investigate the impact of substance abuse on earnings and labor force participation, focusing on disaggregating the impacts of alcohol abuse, drug abuse, and mental illness among persons with comorbid diagnoses of substance abuse and mental illness.

- An Exploratory Study of Barriers and Incentives to Improving Labor Force Participation Among Persons with Significant Disabilities. Dr. Livermore completed a project for the Office of the Assistant Secretary for Planning and Evaluation, Office of Disability, Aging, and Long-Term Care Policy that investigated factors that inhibit or encourage employment of persons with disabilities. Dr. Livermore's roles in the project were to conduct a review of the literature on factors related to labor force participation among persons with disabilities and to conduct a study of the interactions between disability and welfare reform strategies.
- Studies and Conference on SSDI and SSI Disability Program Growth. Dr. Livermore was involved in the preparation and presentation of a series of studies on Social Security Disability Insurance and Supplemental Security Income disability program sponsored by ASPE and SSA. The studies were conducted by Lewin staff, as well as other academic and government researchers in the field of disability policy. The research papers were presented at a two-day conference in Washington, DC organized by Lewin, which also featured panel discussions of disability policy by experts in the field. The research papers and conference proceedings were subsequently published in a volume by the Upjohn Institute.
- Case Studies and Design of Public Use Data File Related to State Level Factors Affecting DI and SSI Disability Caseload Growth. Dr. Livermore worked on a project for the Social Security Administration and the Office of the Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services to more closely examine factors affecting the growth in applications for Social Security Disability Insurance and Supplemental Security Income disability benefits. In-depth case studies, which include site visits and analysis of relevant quantitative data, were conducted to investigate disability application growth factors in five states. Dr. Livermore's roles were to develop and conduct the site visits in several of the states chosen for study and to assist in the development of the micro data component of the public use data set.
- Impairment Trends in the Growth of Applications and Awards for SSA Disability Benefits. Dr. Livermore was involved in a project for ASPE and the Social Security Administration that examined the trends in SSI and DI applications and awards, focusing on the causes of the rapid growth in applications and awards for individuals with mental and musculoskeletal impairments. The purpose of this study was to develop specific hypotheses about the causes of growth, assess the relative importance of the various hypotheses, and review micro data sources that may be used to research the issue. The project involved a comprehensive review of the published and unpublished literature on subject; interviews of academic and government experts in the field; and a review of the history of SSA regulations concerning the medical criteria for eligibility.

Evaluation Research and Design

- Evaluation of the Sacramento Managed Care Consumers Ombudsman Program. Dr. Livermore is currently working on a project for three health care foundations in California that is evaluating the effectiveness of a community-based Ombudsman program for managed care consumers in the Sacramento area. Dr. Livermore is responsible for: the development of a baseline survey to determine the incidence and nature of difficulties experienced by managed care consumers, the actions they took to remedy those difficulties, and their satisfaction with the outcome of that process; the development of a survey of clients who have used the program to assess the effectiveness of the program; and the analysis of both surveys.
- Assessment of SSA's Full Process Model (FPM) Pilot. Dr. Livermore completed a project for the Social Security Administration which assessed the completeness, adequacy, and statistical soundness of the proposed plans for conducting and evaluating the Full Process Model Pilot, a pilot study of several important changes in the Social Security disability determination process.

- Evaluation of the New York State ONECARD Rx Program. Dr. Livermore is currently working on a project of the State of New York which will evaluate a program designed to integrate the health insurance and workers' compensation (WC) prescription drug benefits for New York State employees. The evaluation will consider the impact of the program WC drug costs, utilization, and quality, as well as the incidence of drug cost-shifting from the WC to health insurance benefit and vice versa.
- Monitoring and Assessment Plan for SSA's Disability Claims Manager (DCM) Test. Dr. Livermore completed a previous project for the Social Security Administration, assisting them in the development of a monitoring and assessment plan for implementing a test of the Disability Claims Manager (DCM) model, one of the innovations to the disability determination process being considered by SSA. Dr. Livermore is currently working on a second project for SSA to conduct the Phase I evaluation of the DCM test.
- Evaluation of Maryland's Primary Prevention Initiative (PPI). Dr. Livermore completed a project for the State of Maryland which involved the evaluation of PPI, a welfare reform instituted by the state of Maryland that imposes benefit sanctions and incentives on AFDC recipients who do not meet standards for pre-natal care and whose children do not meet standards for school attendance, well-child visits, and immunizations. Dr. Livermore's role was to conduct a cost-benefit analysis of the pre-natal and well-child care components of the program.
- Evaluability Assessment of Responsible Fatherhood Programs. Dr. Livermore completed a project for the Assistant Secretary for Planning and Evaluation that involved the development of three alternative evaluation designs to be used to conduct impact analyses of responsible fatherhood programs. In addition to developing the three designs, the project involved site visits to several fatherhood programs nationwide to determine the readiness of these programs for impact evaluation, and to identify potential obstacles to conducting such evaluations.
- Evaluation of the Texas Medicaid Selective Contracting Demonstration. Dr. Livermore worked on an evaluation of a Medicaid demonstration in the state of Texas where selective contracting for inpatient acute care and psychiatric care services was implemented. Evaluations were conducted for the State of Texas in 1996, and again in 1998 and 1999.

Other Health and Welfare Research and Technical Assistance

- Determinants of AFDC Caseload Growth. Dr. Livermore worked on a project for ASPE that analyzed the relationship between state AFDC caseload growth and the strength and structure of the economy, demographic trends, and changes in the structure of AFDC and other public programs over the 1980 to 1995 period. The project involved using quarterly state-level data to estimate a model of caseload growth as a function of the above factors.
- Medicaid Spenddown among Persons Residing in the Community. Dr. Livermore completed a project for the Health Care Financing Administration that analyzed the likelihood and determinants of impoverishment due to health care expenditures among the non-institutionalized population. This study examined the rate of Medicaid use among disabled and non-disabled individuals, including the likelihood of spenddown, and the characteristics of those with disabilities who use Medicaid.
- Development of Strategies Relating to Contracting for Administrative Functions Performed for the Texas Medicaid Program. Dr. Livermore was involved in a project where The Lewin Group provided assistance to the State of Texas with the procurement of MIS and other administrative services for the state's Medicaid program.

EXPERIENCE PRIOR TO JOINING THE LEWIN GROUP

Disability, Health, and Welfare Policy

- Analyzed the effects of illness experienced prior to disability on the past earnings and subsequent Social Security Disability Insurance benefits for individuals disabled by mental health, heart and circulatory, musculoskeletal, and respiratory conditions. The study found significant differences across health conditions, illustrating inequities that may arise when public disability insurance benefits are based on past labor market earnings.
- Investigated alternative methods for structuring Social Security Disability Insurance benefits. Benefit computation methods were designed to minimize the inequities of the program across persons with different disabling health conditions. The effects on disability benefits, total family income, and risks of poverty were estimated for each method.
- Conducted an analysis of the propensity for homeless individuals to utilize social programs for which they are potentially eligible. The study concentrated on measuring the effects of mental illness and alcohol and drug abuse on the likelihood of participation in the AFDC, SSI/DI, Food Stamp, and General Assistance programs.
- Assisted in a study of the impact of insurance coverage on the health care utilization patterns of homeless individuals. The study also analyzed the effects of health status and health care utilization on the duration of homeless spells and the duration of exits from homelessness.
- Examined the inpatient utilization patterns of Medicare beneficiaries diagnosed with depressive neurosis. The study compared utilization in facilities reimbursed under DRG prospective payment with utilization in facilities reimbursed under TEFRA. Comparisons were also made between Medicare beneficiaries and similar patients treated in the Veterans Administration system.

Epidemiologic Studies

- Analyzed the incidence of salmonellosis in Louisiana by serotype and geographic region, and evaluated the feasibility of implementing a computerized reporting database to assist in the identification of outbreaks.
- Assisted in a study of pregnancy outcomes in East Iberville Parish, LA. The study focused on assessing the rate of spontaneous abortion in the community in response to concerns about chemical industry air emissions.
- Assisted in the data collection phase (survey and medical record abstraction) of a study that sought to find a genetic marker indicating a predisposition for lung cancer.

Teaching Experience

- Instructor of microeconomics and macroeconomics at Upper Iowa University, Madison, WI center (1988 - 1994).
- Instructor of introductory economics course and investments course at Madison Junior College of Business, Madison, WI (1991 -1992).
- Teaching Assistant for macroeconomics at the University of Wisconsin, Madison, WI (1989).

PAPERS AND PRESENTATIONS

- "Transitions from AFDC to SSI Prior to Welfare Reform," with D. Stapleton, D. Wittenburg, and M. Fishman. Presentation at the Association for Public Policy Analysis and Management Conference, Washington, DC, November, 1999.
- "The Impact of Substance Abuse Morbidity on Productivity," Presentation at the American Public Health Association Meetings, New York, NY, November, 1996.
- "Impairment Trends in Applications and Awards for SSA's Disability Programs," with D. Stapleton. Paper presented at the SSA/ASPE conference on the Social Security Administration's Disability Programs: Explanations of Recent Growth and Implications for Disability Policy, Washington, DC, July, 1995.
- "Lessons from Case Studies of Recent Program Growth in Five States," with D. Stapleton and A. Zeuschner. Paper presented at the SSA/ASPE conference on the Social Security Administration's Disability Programs: Explanations of Recent Growth and Implications for Disability Policy, Washington, DC, July, 1995.
- "Explaining the Growth in Disability Applications and Awards for Persons with Mental Impairments," with D. Stapleton, J. Furman, and A. Zeuschner. Paper presented at the American Economics Association Meetings, Washington, DC, January, 1995.
- "The Effect of Pre-Disability Poor Health on the Earnings and Relative Economic Well-Being of Men with Disabilities: An Evaluation of the Social Security Disability Insurance Structure." Unpublished Dissertation, University of Wisconsin-Madison, December, 1994.
- "Improving the Lives of the Homeless: Health and Income" with S. Hill, S. Nicholson, S. Zuvekas, and B. Kreider. Paper presented at the Association for Public Policy Analysis and Management Conference, Chicago, IL, October, 1994.
- "Equal Treatment Under Social Security Disability Insurance: Does Health Condition Matter?" University of Wisconsin-Madison, 1993. Poster session presented at the Seventh Biennial Research Conference on the Economics of Mental Health, Bethesda, MD, September, 1994.
- "Provider Response to Medicare Prospective Payment: A Look at Psychiatric Transfers," with Barbara Wolfe, University of Wisconsin-Madison, 1993.
- "Examining the Trend in Mental Disability, 1977-1990", presentation at the Sixth Biennial Conference on the Economics of Mental Health, Bethesda, MD, September, 1992.
- "The Effects of DRGs on the Inpatient Treatment of Depressive Neurosis Among Older Men," with Barbara Wolfe, Mental Health Research Center paper series no. 17, University of Wisconsin-Madison, 1992.

PUBLICATIONS

- Livermore, G., D. Stapleton, P. Lee, and L. Levitt (forthcoming). The Health Rights Hotline: The Role of a Model Independent Assistance Program. *Health Affairs* (Jan/Feb 2000).
- Harwood, H., D. Fountain, and G. Livermore (1998). The Economic Costs of Alcohol and Drug Abuse in the United States, 1992. Rockville, MD: National Institute on Drug Abuse. NIH Publication Number 98-4327.

- Livermore, G., D. Stapleton, and A. Zeuschner. (1998). "Lessons from Case Studies of Recent Program Growth in Five States," Chapter 8 in *Growth in Income Entitlement Benefits for Disability: Explanations and Policy Implications*. Rupp and Stapleton (eds.) Michigan: The Upjohn Institute.
- Stapleton, D., K. Coleman, K. Dietrich, and G. Livermore. (1998). "Econometric Analyses of DI and SSI Application and Award Growth," Chapter 2 in *Growth in Income Entitlement Benefits for Disability: Explanations and Policy Implications*. Rupp and Stapleton (eds.) Michigan: The Upjohn Institute.
- Livermore, G. and P. Sevak. (1997). Raising the Social Security Retirement Age: Implications for Employers. *Journal of Benefits and Compensation*, vol. 13(1), pp. 552-55.
- Stapleton, D. and G. Livermore. (1996). Impairment Trends in Applications and Awards for SSA's Disability Programs. *Journal of Vocational Rehabilitation*, vol. 7, 93-115.

LEWIN GROUP REPORTS

- "The Labor Market for Persons with Disabilities," Chapter Two in *An Exploratory Study of Barriers and Incentives to Improving Labor Force Participation Among Persons with Significant Disabilities*. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 1995.
- "The Impact of Welfare Reform Strategies on Persons with Disabilities," Chapter Five in *An Exploratory Study of Barriers and Incentives to Improving Labor Force Participation Among Persons with Significant Disabilities*. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 1995.
- Impairment Trends in the Growth of Applications and Awards for SSA Disability Benefits*. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation and the Social Security Administration, 1995.
- Case Studies of State-Level Factors Contributing to DI and SSI Disability Application and Award Growth*. Washington, DC: The Office of the Assistant Secretary for Planning and Evaluation and the Social Security Administration, 1995.
- Catastrophic Health Care Expenditures and Medicaid Coverage among Community Residents*. Washington, DC: The Health Care Financing Administration, 1995.
- Determinants of AFDC Caseload Growth: Literature Review*. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 1995.
- "The Impact of Substance Abuse Morbidity on Productivity" in *The Economic Cost of Alcohol and Drugs in the United States: 1992*. Washington, DC: The National Institute on Drug Abuse and The National Institute on Alcohol Abuse and Alcoholism, 1995.
- The Impact of Changes in the Social Security Retirement Age and the Medicare Eligibility Age on Employment and Social Security Benefit Receipt*. Concept Paper. Washington, DC: American Association of Retired Persons, 1996.
- Evaluation of LoneSTAR Select I: State of Texas Medicaid Selective Contracting for Acute Care Inpatient Hospital Services*. Austin, TX: The Texas Department of Health, 1996.

Evaluation of LoneSTAR Select II: State of Texas Medicaid Selective Contracting for Inpatient Psychiatric Services. Austin, TX: The Texas Department of Health, 1996.

An Evaluability Assessment of Responsible Fatherhood Programs. Draft Final Report. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 1996.

The Texas Medicaid Administrative System: Activities, Pricing Structure, and Incentives. Austin, TX: The Texas Department of Health, 1996.

Medicaid Program Administration and Managed Care Activities: A Look at Other States. Austin, TX: The Texas Department of Health, 1996.

Current and Proposed Tax Benefits for People with Disabilities. Washington, DC: The Disability Policy Leaders Group, 1996.

An Independent Assessment of the Proposed Structure, Operation, and Evaluation Plans of the Full Process Model Pilot. Baltimore, MD: The Social Security Administration, 1997.

Exploratory Study of Health Care Coverage and Employment of People with Disabilities: Literature Review. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, 1997.

Policy Evaluation of the Effect of Legislation Prohibiting the Payment of Disability Benefits to Individuals Whose Disability is Based on Drug Addition and Alcohol: Background and Study Design Report. Washington, DC: The Social Security Administration, 1997.

An Independent Assessment of the Proposed Structure and Operation of the Disability Claims Manager Test and Development of an Effective Monitoring Plan for the 19-Month Preparation Phase of the Test. Washington, DC: The Social Security Administration, 1997.

ONECARD Rx: Evaluation Design. Albany, NY: State of New York Department of Civil Service, March 1998.

Estimation of the Economic Burden Of Mental Disorders: Analytic Approach. Rockville, MD: The National Institute of Mental Health, March 1998.

Policy Evaluation of the Overall Effects of Welfare Reform on SSA Programs: Literature Review and Design Report. Washington, DC: The Social Security Administration, April 1998.

Analysis of the Survey of Consumer Experiences in Managed Care: Summary of the Findings. Prepared for the Kaiser Family Foundation, the Sierra Health Foundation, and The California Wellness Foundation, May 1998 (revised February, 1999).

Exploratory Study of Health Care Coverage and Employment of People with Disabilities: Final Report. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, May 1998.

Evaluation of LoneSTAR Select I: State of Texas Medicaid Selective Contracting for Acute Care Inpatient Hospital Services. Austin, TX: The Texas Department of Health, May 1998.

The Economic Costs Of Mental Illness, 1992. Draft. Rockville, MD: The National Institute of Mental Health, September 1998.

Survey of Consumer Experiences in Managed Care: Summary of the Findings. Prepared for the Kaiser Family Foundation, the Sierra Health Foundation, and The California Wellness Foundation, February 1999.

Policy Evaluation of the Overall Effects of Welfare Reform on SSA Programs: Final Report. Washington, DC: The Social Security Administration, February 1999.

Research on Employment Supports for People with Disabilities: Draft Literature Review. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, February 1999.

Independent Assessment of the Phase I Monitoring of the Disability Claims Manager (DCM) Test and the DCM Learning Curve; and Recommendations for the Conduct and Evaluation of a Phase II Test: Final Report. Baltimore, MD: The Social Security Administration, August 1999.

Evaluation of the First 18 Months of Operation of the Health Rights Hotline: Draft Final Report. Prepared for the Kaiser Family Foundation, the Sierra Health Foundation, and The California Wellness Foundation, August 1999.

Research on Employment Supports for People with Disabilities: Data Collection Methodology Report. Washington, DC: US Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, October, 1999.

Evaluation of LoneSTAR Select II: State of Texas Medicaid Selective Contracting for Inpatient Psychiatric Services. Austin, TX: The Texas Department of Health, October 1999.

Evaluation Plan for Phase II of the Disability Claims Manager Test. Baltimore, MD: The Social Security Administration, November 1999.

EMPLOYMENT HISTORY

<u>Date</u>	<u>Employer</u>	<u>Position</u>
4/97 to present	The Lewin Group, Falls Church, VA	Senior Manager
4/95 to 4/97		Senior Associate
8/94 to 4/95		Associate
8/90 to 8/94	University of Wisconsin - Madison Department of Economics	National Institute of Mental Health, Research Trainee
8/88 to 12/93	Upper Iowa University, Madison, WI Extension	Instructor of Intro Micro and Macroeconomics courses
5/91 to 6/92	Madison Junior College of Business, Madison, WI	Instructor of Intro Economics and Investments courses
8/89 to 12/89	University of Wisconsin - Madison Department of Economics	Teaching Assistant, Introductory Macroeconomics
8/87 to 7/88	Tulane University School of Public Health, New Orleans, LA	Research Assistant, Pregnancy Outcomes Study
5/87 to 1/88	Louisiana State University Medical School, Department of Medicine, New Orleans, LA	Research Assistant, Lung Cancer Study

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Santa Monica, CA 90407
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EDUCATION

Ph.D., Economics, 1996, Brown University, Providence, RI
M.A., Economics, 1990, Brown University, Providence, RI
B.A. (Summa Cum Laude), Economics and Political Science, 1988, State University of
New York at Buffalo, Buffalo, NY

PROFESSIONAL EXPERIENCE

1995-present -- Associate Economist, RAND, Santa Monica, California
1991-1994 -- Research Assistant to Professor Robert Moffitt, Brown University,
Providence, RI
1992-1993 -- Consultant, World Bank, Women in Development Division, Washington,
D.C.
1990-1991 -- Teaching Fellow, Department of Economics, Brown University,
Providence, RI
1988-1990 -- Teaching Assistant, Department of Economics, Brown University,
Providence, RI

PROFESSIONAL SERVICE, HONORS AND AWARDS

Referee, *Demography*, *Industrial Relations*, *Journal of Human Resources*, *Journal of
Labor Economics*, *Review of Economics and Statistics*
Teaching Fellowship (two semesters), Brown University
Phi Beta Kappa
University Honors Program, SUNY Buffalo

PROFESSIONAL ASSOCIATIONS

American Economic Association, Population Association of America, Society of Labor
Economists

PUBLICATIONS

- Moffitt, Robert A., Robert T. Reville, and Anne E. Winkler, "Beyond Single Mothers: Cohabitation, Marriage and the U.S. Welfare System," *Demography* 35(3), August 1998
- Moffitt, Robert A., Robert T. Reville and Anne E. Winkler, "State AFDC Rules Regarding the Treatment of Cohabiters: 1993," *Social Security Bulletin*, Volume 57, Number 4, Winter 1994
- Peterson, Mark A., Robert T. Reville and Rachel Kaganoff Stern, "Compensating Permanent Workplace Injuries: A Study of California's System," RAND MR-920, November 1997
- Reville, Robert T. "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," in Haltiwanger, Haltiwanger, John and Julia Lane, ed. "The Creation and Analysis of Linked Employer-Employee Data," *Contributions to Economic Analysis*, Amsterdam; London and New York: Elsevier Science, North-Holland, 1999
- Reville, Robert T., "Two Essays on Intergenerational Earnings and Wage Mobility," Ph.D. dissertation, Brown University, May 1996.
- Reville, Robert T. and Jose J. Escarce, "Managed Care and the Workers' Compensation Bargain," *Medical Care*, Volume 37, Number 10, 1999
- Reville, Robert T., Moira Inkelas, Jeannette Rogowski and Lynn Karoly, "Data Sources to Evaluate the Effect of the Welfare Reform Legislation on Disabled Children," RAND DRR-1815-SSA, February 1998
- Reville, Robert T. and Jacob Alex Klerman, "Job Training: The Impact on California of Further Consolidation and Devolution," in Hosek, James and Robert Levine, ed. "The New Fiscal Federalism and the Social Safety Net," RAND, Santa Monica, CA 1996
- Rogowski, Jeannette, Lynn Karoly, Jacob Klerman, Robert Reville, Moira Inkelas, Jill Hoube, Melissa Rowe, Narayan Sastry, and Jennifer Hawes-Dawson, "Background and Study Design Report for Policy Evaluation of the Effect of the 1996 Welfare Reform Legislation on SSI Benefits for Disabled Children," RAND DRU-1808-SSA, April 1998

WORKING PAPERS

Haider, Steven J., Robert T. Reville, and George Tita, "Geographic Variation in Social Services in Los Angeles County on the Eve of Welfare Reform," March, 1999

Lillard, Lee A. and Robert T. Reville, "Random Growth or Random Walk: New Testable Implications of the Life Cycle Human Capital Investment Model," February 1998

Lillard, Lee A. and Robert T. Reville, "Intergenerational Mobility in Earnings and Occupational Status," prepared for presentation at the annual meetings of the Population Association of America, May, 1996, revised March 1997

Reville, Robert T., Jayanta Bhattacharya and Lauren Sager, "Measuring the Economic Consequences of Workplace Injuries," May, 1999

SELECTED RECENT PRESENTATIONS

November 1999, San Francisco, CA, "Wage Loss and the Adequacy and Equity of Permanent Disability Benefits in California" presented to the Annual Meetings of the American Actuarial Society

July 1999, Naples, FL, "Wage Loss and the Adequacy and Equity of Permanent Disability Benefits" presented to the Southern Association of Workers' Compensation Administrators Annual Meeting

July 1999, Burlington, VT, "Wage Loss and the Adequacy and Equity of Permanent Disability Benefits," presented to the National Association of Government Labor Organizations Annual Meeting

June 1999, Denver, CO, "Measuring the Consequences of Workplace Injuries," presented to the National Institute for Occupational Safety and Health conference entitled Functional, Economic and Social Outcomes of Occupational Injuries and Illnesses: Integrating Social, Economic, and Health Services Research

June 1999, Toronto, Ontario, "Workplace Injuries: Wage Losses and Benefits in Five Jurisdictions," presented at the 23rd Annual Workers' Compensation Symposium (with Les Boden and Jeff Biddle).

May 1999, Chicago, IL, "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," presented at the University of Chicago Public Economics Workshop, Department of Economics

- March 1999, College Park, MD, "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," presented at the University of Maryland, College Park, Department of Economics
- March 1999, Sacramento, CA, "Compensating Permanent Workplace Injuries: A Study of California's System," presented to the State of California Assembly Committee on Insurance
- March 1999, Boston, MA, "Compensating Permanent Workplace Injuries: A Study of California's System," presented to the Workers' Compensation Research Institute Annual Research Meetings
- January 1999, New York, NY, "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," presented at the Allied Social Sciences Association Annual Meetings
- November 1998, Bakersfield, CA, "Implications of the RAND Study: What Is It? What Does the Future Hold?," Keynote Address, California State University Bakersfield 1998 Workers' Compensation Law Symposium
- September 1998, St. Louis, MO, "Building Consensus Through Research: Reforming PD in California," presented to the International Association of Injury and Accident Boards and Commissions (IAIABC) Annual Meetings
- July 1998, Dearborn, MI, "Compensating Permanent Workplace Injuries: A Study of California's System," presented to the 22nd Annual National Symposium on Workers' Compensation
- July 1998, Dearborn, MI, "Estimating Wage Loss Using Linked Administrative Data and Matched Controls," presented to the Workers' Compensation Research Group meetings at the 22nd Annual National Symposium on Workers' Compensation
- May 1998, Arlington, VA, "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," presented to the U.S. Census Bureau International Symposium on Linked Employee-Employer Data
- May 1998, San Francisco, CA, "The Impact of a Permanently Disabling Workplace Injury on Labor Force Participation and Earnings," presented to the annual meetings of the Society of Labor Economists
- May 1998, Sacramento, CA, "Compensating Permanent Workplace Injuries: A Study of California's System," presented to California State Assembly staff

March 1998, San Diego, CA, "Compensating Permanent Workplace Injuries: A Study of California's System," presented to the California Self-Insurers Association Annual Workers' Compensation Conference

January 1998, Chicago, IL, "Random Growth or Random Walk: New Testable Implications of the Life Cycle Human Capital Investment Model," presented at the Allied Social Sciences Annual Meeting, Econometric Society session

DAVID C. WITTENBURG
SENIOR ASSOCIATE

EDUCATION

- 1997 Ph.D., Economics, Syracuse University
- 1994 M.A., Economics, Syracuse University
Outstanding Teaching Assistant, Department of Economics, 1993/94
- 1991 B.A., Economics, Hobart College
Omicron Delta Epsilon, International Honor Society in Economics

EXPERIENCE

Dr. Wittenburg joined The Lewin Group in August 1997 as a Senior Associate. Dr. Wittenburg is a labor economist who specializes in quantitative public policy evaluation. While at the Lewin Group, Dr. Wittenburg has worked on several empirical reports related to the employment of people with disabilities, welfare reform, changes in the normal age of retirement and Medicare eligibility age, Unemployment Insurance, and job training. The clients for these reports include the Social Security Administration (SSA), Department of Labor (DOL), American Association of Retired Persons (AARP), National Governors' Association, Rutgers University, Department of Education National Institute on Disability and Rehabilitation Research (NIDRR) and The Office of the Assistant Secretary for Planning and Evaluation. Dr. Wittenburg received his Ph.D. in Economics from Syracuse University in October 1997. Dr. Wittenburg's experience includes:

Current Projects

- NIDRR Rehabilitation Research and Training Center for Economic Research on Employment Policy for Persons with Disabilities. Dr. Wittenburg is currently working on a project under a five-year grant from the US Department of Education, National Institute on Disability and Rehabilitation Research (NIDRR). The Lewin Group and Cornell University are conducting a series of economic research projects designed to inform policies related to the employment of people with disabilities. As part of the project, Lewin and Cornell will develop and convene two summer training institutes on disability issues and convene a national conference on disability policy. Lewin and Cornell will also develop monographs and publications of the findings from six research projects conducted under the grant.
- The Impact of Increases in the Social Security Retirement Age and the Medicare Eligibility Age on the Social Security Disability Insurance Program. Dr. Wittenburg is working on a series of projects for the American Association of Retired Persons that use a microsimulation model to develop projections of SSDI enrollment, Medicare enrollment and employment for persons aged 65 and over in the presence of an increase in the "normal" Social Security retirement age and Medicare eligibility age to 67. The projections for this report are based on econometric estimates using data from the *Survey of Income and Program Participation* (SIPP). In addition, data from the *Medicare Current Beneficiary Survey* were used to develop Medicare cost estimates for those who would remain eligible under a higher Medicare eligibility age.

Completed Projects

- Analysis of the Declining Unemployment Insurance Reciprocity Ratio Dr. Wittenburg completed work on a project for the Department of Labor that analyzes the declining trend in the standard measure of the Unemployment Insurance (UI) Reciprocity Ratio. This project includes empirical analyses of factors that influence trends in the standard and alternative measures of the UI reciprocity ratio over the past twenty years.
- Design for an Evaluation of the Effect of SSA and Non-SSA Welfare Reforms on SSA Programs Dr. Wittenburg completed work on a project for the Social Security Administration to develop evaluation options for the impacts of reforms in the AFDC/TANF, Food Stamp and other non-SSA programs on SSA program caseloads and expenditures. This project includes development of models to examine program interactions, using both pooled time-series data for states and Survey of Income and Program Participation data that have been matched to SSA administrative data. The project also involves: an assessment of the usefulness of state and local databases, review of ongoing welfare reform evaluations in selected states, and conducting site visits in five states.
- Temporary Assistance for "Low-Wage" Workers: Evolving Relationships Among Work, Welfare, and Unemployment Insurance Dr. Wittenburg completed work on a project for the National Governors' Association that analyzed the roles of TANF and state UI programs, as TANF becomes a work-based program of temporary financial assistance. The project included an analysis of typical participation patterns across UI, AFDC, and low-wage employment before the enactment of TANF; a description of the flexibility states have under TANF and UI programs; and a review of both current and past innovations in public assistance, UI, and workforce development that have emerged in recent years to strengthen labor market attachment of low-income individuals, especially those in entry-level or low-skill jobs. The review of recent innovations could be very important in helping states develop policies to provide a safety net to assist former TANF recipients who become unemployed.
- Analysis of Vendor Outcome Adjustments for New Jersey Workforce Readiness Programs Dr. Wittenburg has completed work on a project for Rutgers University to develop econometric models that will adjust outcomes for the New Jersey Workforce Readiness training programs. This project includes a design option for econometric models that use survey and administrative data.
- Evaluation of the Effect of Legislation Prohibiting Disability Benefits to Drug Addicts and Alcoholics. Dr. Wittenburg worked on a project for the Social Security Administration to evaluate the impact of the recent welfare reform legislation prohibiting DI and SSI benefits to individuals whose disability was based on drug addiction or alcoholism. The project had four components: 1) descriptive analysis of the March 1996 cohort of affected beneficiaries using SSA administrative data; 2) case studies of the impact of the legislation on state and local welfare systems in four states; 3) analysis of two non-SSA data sources on persons disabled by drug addiction and alcoholism to determine the impact of the legislation on the lives and well-being of the persons affected; and 4) the development of an econometric model to estimate the cost and caseload impacts of the legislation using SSA administrative data.
- Disability Program Work Incentives. Dr. Wittenburg assisted in an evaluation of the impact of the "1619" work incentive program for Supplemental Security Income recipients on recipient employment and earnings, that was recently completed for the Assistant Secretary of Planning and Evaluation in the Department of Health and Human Services and the Social Security Administration. Specifically, the study examined the impact of changes in the income levels Social Security

Administration's Section 1619 work incentive programs and changes in the Qualified Medicare Beneficiary Program on the employment of SSI recipients aged 18 to 49.

Completed consulting projects prior to joining the Lewin Group

- Evaluation of the Current Disability Transfer Policies on Work Incentives for People with Disabilities. Dr. Wittenburg worked as a consultant to analyze labor force activity, economic status and program participation of persons with disabilities for the Social Security Administration Office of Disability and Department of Education National Institute of Disability Rehabilitation Research. The project focused on the tax rates on work faced by the large percentage of persons with disabilities who are enrolled in multiple disability-related transfer programs.
- Simulation of a Disability Workers' Tax Credit. Dr. Wittenburg performed analysis for the National Academy of Social Insurance using the 1992 Current Population Survey (CPS) to estimate the costs of expanding a specialized tax credit for persons with disabilities using several different tax rate proposals. These costs were later updated using the 1995 CPS in his dissertation.

PUBLICATIONS

- "A Reassessment of the New Economics of the Minimum Wage Literature Using Monthly Data from the SIPP and CPS" with Richard V. Burkhauser and Kenneth A. Couch. *Forthcoming in the Journal of Labor Economics*.
- "Who Minimum Wage Increases Bite: Results from the Current Population Survey and Survey of Income and Program Participation" with Richard V. Burkhauser and Kenneth A. Couch. *Forthcoming in the Southern Economics Journal*.
- "Temporary Assistance for Low-Wage Workers: Evolving Relationships among Work, Welfare, and Unemployment Insurance" in "Rethinking Income Support for the Working Poor: Perspectives on Unemployment Insurance, Welfare and Work" National Governors' Association Center for Best Practices, Washington, DC, 1999 edited by Evelyn Ganzglass and Karen Glass, with Richard Hobbie and Michael Fishman
- "Building a Work-Based Disability Policy: The Disabled Worker Tax Credit," in Disability: Challenges for Social Insurance, Health Care Financing and Labor Market Policy, Washington, DC: National Academy of Social Insurance, with Richard V. Burkhauser and Andrew J. Glenn, 1997
- "How Current Disability Transfer Policies Discourage Work: Analysis from the 1990 SIPP," Journal of Vocational Rehabilitation, 7(1/2)(August): 9-27, with Richard V. Burkhauser 1996.
- "Who Gets What from Minimum Wage Hikes: A Replication and Re-estimation of Card and Krueger's Distributional Analysis in *Myth and Measurement: The New Economics of the Minimum Wage*," Industrial and Labor Relations Review, 49(3)(April): 547-552, with Richard V. Burkhauser and Kenneth A. Couch, 1996.
- "Expanding the Earned Income Tax Credit for Persons with Disabilities," Proceedings from the Maxwell Colloquium, The Maxwell School, Syracuse University (October 1-11), 1996

REPORTS

Literature Review and Empirical Analysis of Unemployment Insurance Reciprocity Rates, Final Report to the U.S. Department of Labor, Unemployment Insurance Service Division of Research and Policy (1999).

The Impacts of an Increase in the Social Security Retirement Age and the Medicare Eligibility on Social Security Disability Insurance, Medicare, and Employment, Report to the American Association of Retired Persons Public Policy Institute, August 1999 (paper #9911).

Policy Evaluation of the Overall Effects of Welfare Reform on Social Security Programs, Final Report to the Social Security Administration, 1999.

Policy Evaluation of the Overall Effects of Welfare Reform on Social Security Programs, Literature Review and Design Report to the Social Security Administration, 1998.

Policy Evaluation of the Effect of Legislation Prohibiting the Payment of Disability Benefits to Individuals Whose Disability is Based on Drug Addiction and Alcoholism, Interim Report to the Social Security Administration, 1998.

Data Assessment of Non-SSA Data for the Evaluation of Drug Addiction and Alcoholism Beneficiaries, Report to the Social Security Administration, 1998.

Exploratory Study of Health Care Coverage and Employment of People with Disabilities, Final Report to the Assistant Secretary for Planning and Evaluation in the Department of Health and Human Services, 1998.

Evolving Relationships Among Work, Welfare, and Unemployment Insurance, Final Report to the National Governors' Association, 1998.

Evaluation of the Current Disability Transfer Policies on Work Incentives for Men and Women with Disabilities, Report to Social Security Administration Office of Disability and Department of Education National Institute of Disability Rehabilitation Research, 1997.

WORKING PAPERS AND DRAFT REPORTS

"Transitions from AFDC to SSI Prior to Welfare Reform," submitted to the Social Security Bulletin with David Stapleton, Michael Fishman, and Gina Livermore

Review of Longitudinal Data on the School to Work Transition for Youth with Disabilities, Draft Report submitted to the Department of Education, National Institute on Disability and Rehabilitation Research.

Projected Impacts of an Increase in the Social Security Retirement Age and the Medicare Eligibility Age on Social Security Disability Insurance and Medicare from 2000 to 2040, Draft Final Report for the American Association of Retired Persons Public Policy Institute.

SELECTED PRESENTATIONS

- "Employment for People with Disabilities: The Role of Public Policy and Employer Practice," Discussant for the 1999 Association for Public Policy Analysis and Management Meetings.
- "Transitions from AFDC to SSI Prior to Welfare Reform," Paper Presented at the 1999 Association for Public Policy Analysis and Management Meetings.
- "Temporary Assistance for Low-Wage Workers: Evolving Relationships among Work, Welfare, and Unemployment Insurance." Paper Presented at the 1998 Association for Public Policy Analysis and Management Meetings.
- "The Employment Effects of the 1990 Minimum Wage Increase on Selected Groups: A Re-analysis Using Data from the 1990 SIPP." Paper presented at the Sixty-Sixth Annual Conference of the Southern Economic Association, Washington, D.C., 1996
- "Social Security Policy and the Well-Being of Widows," Paper presented at the 48th Annual Scientific Meeting of the Gerontological Society of America, November 1995
- "How Current Disability Transfer Policies Discourage Work," Paper presented at the 49th Annual Conference of the President's Committee on Employment of People with Disabilities, 1996
- "Disability Worker's Tax Credit," Paper presented at the 1995 Annual Meetings of the National Academy of Social Insurance.

TEACHING EXPERIENCE

- Developed and supervised Master's level independent study at Syracuse University, Syracuse, NY (1995).
- Instructor of microeconomic theory and macroeconomic principles at Syracuse University, Syracuse, NY (1993-1995).
- Teaching Assistant for introductory macroeconomics at Syracuse University, Syracuse, NY (1992-1993).

EMPLOYMENT HISTORY

The Lewin Group	Senior Associate	August 1997 - present
Center for Policy Research	Research Associate	1994- August 1997
Community Service Corps	Counselor	1991 - 1992