



## MAXIMUS

MAXIMUS  
Request for Important Information

**MAXIMUS Ticket to Work**  
P.O. Box 1433  
Alexandria, Virginia 22313  
<Insert Date>  
Claim Account Number: <Insert #>

<Beneficiary Name>  
<Address>  
<Address>  
<City, State, Zip Code>

We wrote to you about your progress with work and education from <INSERT MONTH AND YEAR> through <INSERT MONTH AND YEAR>. You either did not respond or your response did not show that you made the expected progress. If we do not hear from you in writing within 30 days of the date of this notice, you will no longer be excused from medical reviews as of <date of this notice +30>.

### **Why Progress Reviews are Important**

As long as you are working with an EN or a State VR agency and making the expected progress toward your work-related goals, Social Security will not conduct a medical review to see if you are still disabled under their rules. A Progress Review is the way Social Security decides if you are making enough progress with work and education to continue to be excused from a medical review.

If you aren't meeting the progress review requirements you are not making the expected progress, and you will not be excused from a medical review. However, you may continue to work with your EN or State VR agency toward your goals.

### **What You Should Do**

You have three options at this time:

#### **1. To Continue Making Progress**

If you have met the requirements for your <X> 12-month Progress Review, please complete the attached Progress Review Form, sign and date it, and return it to us within 30 days. If you have not met the requirements for this period, you may contact < INSERT name of EN/state VR agency> to help you continue making progress toward your goals.

EIN: <#>  
SSN: <Beneficiary SSN>

Notice Code: F0001000



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### **2. To Request Inactive Status**

At any time that you believe you are not able to make the expected progress, you may request Inactive Status. To do this, you may write MAXIMUS a letter asking for Inactive Status. MAXIMUS will notify your EN or State VR agency of this. However, you may continue to work with your EN or State VR agency toward your work goals.

The months that you are in Inactive Status do not count against the time limit for making progress toward self-supporting employment so we will not review your progress during this period. However, while you are in Inactive Status, you are not excused from medical reviews.

### **3. To Ask Social Security to Review Our Decision**

If you would like Social Security to review our decision, you must send a written request within 30 days and explain why you disagree with our decision. Please provide evidence to show how you met the requirements for this Progress Review period. You must include evidence of your work and education. We require an original pay slip or school transcript, or statement from an employer or school. In place of this, we accept two pieces of evidence, such as photocopies of pay slips or transcripts, and a signed statement from you certifying that you met the required work or education or training. You may keep a copy of what you send us for your records. You may complete the enclosed Progress Review Form, sign it and return it to us in place of a signed statement. Please write your ticket number on each document you send us. The evidence must be clear and legible.

We will send your written request to Social Security. Once they review your evidence, they will send you a letter to tell you about their final decision.

### **If You Have Questions**

If you have any questions regarding the Ticket to Work Program, please contact us at 1-866-968-7842 or TDD 1-866-833-2967. All written requests should be sent to the following address:

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

EIN: <Insert #>  
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For help with general questions, you may call SSA at 1-800-772-1213, or you may write or visit any Social Security office. SSA can also give you more information about other employment support policies that help people with disabilities go to work. If you visit a Social Security office, please bring this letter with you.

Sincerely,

MAXIMUS Ticket to Work Program

EIN: <Insert #>  
SSN: <Insert Beneficiary SSN>

Notice Code: F0001000