

Benefits Summary & Analysis

Beneficiary Name:

Date:

Summary of your Current Benefits Situation

What I have verified about your current benefits with Social Security and other agencies (as needed):

What you told me about your current employment situation and/or your future employment plans or goals:

Analysis of How Employment May Affect Your Benefits

How your employment situation and/or plans may affect your Social Security cash benefits:

How your employment situation and/or plans may affect your health insurance (Medicare and/or Medicaid):

How your employment situation and/or plans may affect other benefits you receive (Food Stamps, HUD rental subsidies, etc.):

Benefits Issues Not Related to Employment

Employment Services and Supports You May Need

Important Things for You to Remember

Important dates or deadlines:

Things you need to report to SSA or other agencies:

Recordkeeping reminders:

Remember that it is your responsibility to promptly report all relevant changes to the Social Security Administration and any other federal, state, or local entity administering benefits you receive!

Using this Report

You should keep this report and refer back to it when you have questions about how your employment plans may affect your Social Security benefits, associated health insurance, and any other federal, state or local benefits. It is also important for you to share this report with other people who are helping you achieve your employment goals.

The information contained in this report is intended to help you make informed choices about important life issues that may affect your Social Security and/or other public assistance benefits.

The accuracy of the information and advice contained in this report is dependent upon:

1. The accuracy and completeness of the information you provided about your current and past benefits status;
2. The accuracy and completeness of information you provided about relevant factors such as current and past earnings, unearned income, resources, disability status/medical condition, marital status, and living arrangements;
3. Current laws and regulations governing the effect of employment and other factors on Social Security disability benefits and other federal benefits; and
4. Current Social Security Administration (SSA) policies and procedures regarding the use of applicable work incentives.

Changes in the factors described above may seriously affect the accuracy of the information provided in this correspondence. Please contact your CWIC immediately to discuss any changes in your benefits situation or employment plans or to answer any additional questions you have about how employment may affect your benefits!

CWIC Signature: _____ **Date:** _____

NOTE: By signing this Benefits Summary & Analysis report, the CWIC is verifying that a copy of this report has been provided to and reviewed with the beneficiary.