



Strategic Goal 3: Serve the Public through a Stronger, More Responsive Disability Program

Strategic Objective 3.1: Improve the Quality, Consistency, and Timeliness of Our Disability Decisions

Vision 2025 Priority: Innovative Organization

We continuously strive to improve the timeliness, quality, and consistency of our disability processing times and decisions. We need to make sure our decisions are accurate and made at the earliest possible point in our process. We also need to ensure our policies are applied consistently across the country.

Strategies

- Expand use of management information to identify training needs and areas for improvement;
- Broaden use of case-analysis tools;
- Expand use of predictive modeling;
- Simplify policies;
- Collaborate with Bureau of Labor Statistics to collect updated occupational information; and
- Formalize our pre-decisional quality review processes to increase national uniformity.

Progress Update

The Social Security Administration, in consultation with the Office of Management and Budget, has highlighted this objective as **a focus area for improvement**. We took the following steps in FY 2015 to improve the quality, consistency, and timeliness of our disability decisions (see Key Initiatives and Performance Measures for more details):

- Completed Administrative Law Judge (ALJ) focus reviews to provide ALJs with feedback and training resources to improve the quality of decisions;
- Added the ability for all sites to process electronic adult initial continuing disability review in the electronic case analysis tool;
- Released the Electronic Bench Book version 5.0;
- Established a medical experts committee to advise on advancements relevant to making disability decisions;
- Made the inline quality review process more comprehensive;
- Increased hearing capacity by adding additional video hearing sites;
- Completed deliverables on the Bureau of Labor Statistics project; and
- Prepared for the receipt of data collected by the Bureau of Labor Statistics in September 2015.

Next Steps

- Examine opportunities to develop new applications to address existing and emerging management information needs;
- Continue leveraging management information to identify training needs;
- Add functionality to the Electronic Case Analysis Tool to support additional claim types;
- Develop more functionality in the Electronic Bench Book;
- Continue development and testing of predictive modeling projects in the Office of Disability Adjudication and Review;
- Update research base for the vocational factors considered in disability evaluations; and



- Develop and submit at least three rules for public comment, five final rules, and three Social Security Rulings to update the medical listing of impairments.

Risks and External Factors

The following risks or external factors may affect our efforts to improve the quality, consistency, and timeliness of our disability decisions:

- Hiring sufficient ALJs;
- Sufficient resources to add new functionality to our electronic tools;
- Ability to recruit and retain qualified data analytics staff to fill predictive modeling and data analysis gaps;
- Balancing high workload demands and quality assurance activities with staffing resources; and
- Ability to recruit and retain a skilled staff to process workloads.

Key Initiatives

Enhancing the Electronic Claims Analysis Tool

We continue to enhance our web-based Electronic Claims Analysis Tool, which guides adjudicators through the sequential evaluation process for determining disability. Throughout the application, there are links to the policy that support each step of the process. The tool produces a detailed, policy-compliant explanation of the determination and stores the supporting documentation. A subsequent reviewer can then review the explanation to understand the decision maker's analysis and conclusions throughout the adjudication processes.

All disability determination services sites use the tool for initial and reconsideration level disability claims. In FY 2015, we enhanced functionality for processing electronic adult initial level continuing disability reviews. In FY 2016, we plan to add functionality to process childhood continuing disability reviews, as well as add enhancements in response to policy changes and input from its users. In FY 2017, we plan to add functionality to process adult reconsideration continuing disability reviews.

Expanding Use of Electronic Bench Book

The Electronic Bench Book is a policy compliant, web-based application that aids in documenting, analyzing, and adjudicating disability hearing cases consistently with our regulations. The Electronic Bench Book allows users to perform file reviews, capture hearing notes, and document decisional instructions. The Electronic Bench Book guides users through each step of the sequential evaluation process. We expect the systematic process will reduce errors, improve consistency, and reduce remands to the Appeals Council while helping enhance and execute agency plans to modernize our systems.

Approximately 2,200 unique hearing office users are accessing the Electronic Bench Book each week and administrative law judges are using it to process decisional instructions on approximately 1,500 cases per week. Enhancements released in April 2015 enabled users to generate a case information summary with a single click. Additional backend and performance enhancements were implemented in June 2015.

In FY 2016, we plan to deliver a decision writing feature that fully integrates with MS Word giving decision writers both pre-population of some of the decision language as well as full word processing and editing capabilities. We also plan to streamline the application for ease of use and work on adding more templates.

In FY 2017, we plan on adding more templates and implementing instruction refinements.



Developing an Occupational Information System

Currently, we rely on occupational information found in the Department of Labor’s Dictionary of Occupational Titles to determine whether adult disability applicants can do their past work or any other work. The Department of Labor no longer updates its Dictionary of Occupational Titles because a new job placement tool called the Occupational Information Network has replaced it.

We have been working with the Bureau of Labor Statistics to develop a new web-based occupational information system. Our new web-based system will be easier to use and will increase the quality of disability decisions by providing current information about specific job requirements. Unlike the old system, which was a job placement tool, the new system will contain information needed to help us determine disability.

The new system will contain information about occupations’ specific vocational preparations, physical demands, and environmental conditions. Unlike the prior system, the new system will contain the mental and cognitive requirements of occupations, enabling more standardized decisions for claimants with mental impairments.

Our policy experts worked with the Bureau of Labor Statistics in 2013 to define current mental and cognitive work demands. In 2014, the Bureau of Labor Statistics started testing the collection of the mental and cognitive work demands.

In early FY 2015, we conducted a large-scale preproduction test that included all data elements. In the summer of 2015, testing included direct observation of several occupations to help determine if the data collection methodology is valid. In September 2015, we used production data in disability adjudication. Fully populating the new system with occupational data will take about three years.

In FY 2016, we will continue analyzing the data from the FY 2015 preproduction test. We will use the data to develop a new information technology platform. We are planning a limited implementation in FY 2017. Testing and further reviews will continue into FY 2019. Full implementation is scheduled for late FY 2019.

Updating the Medical Listing of Impairments

The medical Listing of Impairments (Listings) is one of the most effective tools used to make disability decisions. The Listings allow us to find a claimant disabled when his or her impairment meets specified medical criteria, without the need to consider age, education, or work experience. The Listings improve the consistency and accuracy of our decisions throughout all levels of the disability process.

We update the Listings on a three-to-five year cycle. During each cycle, we seek input from medical experts and other stakeholders to ensure the Listings reflect current approaches in medicine, science, technology, and the work environment.

In FY 2014, we published four rules for public comment, one final rule, and three Social Security Rulings in an effort to update and revise medical policy. In FY 2015, we developed and submitted four final rules and one Social Security Rulings for the medical listings for publication in the Federal Register. In both FY 2016 and FY 2017, we plan to develop and submit four final rules, two Social Security Rulings, and targeted updates for the medical listings for publication in the Federal Register.

Conducting Inline Quality Reviews

The inline quality review of hearing level claims promotes consistency and continuous improvement in case processing by ensuring that:

- Case files are properly prepared and scheduled;
- Records are adequately developed; and
- Draft decisions are legally sufficient.



We initially conducted inline quality reviews on cases where senior attorney adjudicators drafted fully favorable decisions and on cases where files were prepared and ready to be scheduled for a hearing. We began the review in 2010, and in November 2013, we expanded the reviews to include cases drafted by decision writers. We increased the number of inline quality reviews from 2,590 in FY 2013 (0.4 percent of all hearing decisions) to 13,258 in FY 2014 (2.4 percent of all hearing decisions).

In FY 2015, we expanded the list of questions reviewers must answer when deciding if errors exist. There are now more than 100 questions. Because the reviews are more comprehensive than before, we are able to address more issues proactively. In FY 2015, we conducted almost 13,000 reviews (2.4 percent of all hearing decisions). Additionally, analyzing the findings from the reviews enables us to identify trends and areas for targeted training.

In FY 2016 and FY 2017, we will continue to review support staff work for quality and policy compliance. We also plan to explore adding more quality review specialists, as budgets permit.

Reducing the Pending at the Appeals Council

As we decide more cases at the hearing level, the Appeals Council receives more requests for review of hearing decisions. Historically, we received approximately 100,000 requests for review annually. However, from FY 2011 until FY 2013, requests for reviews grew to 175,000 annually. While we saw a reduction in requests to 155,000 in FY 2014 and 149,000 for FY 2015, we finished FY 2015 with more than 150,000 cases waiting for review.

The Appeals Council replaced staff losses in FY 2015, and we continue to seek resources to expand the Appeals Council to address customer wait times.

We are focusing on decreasing the percentage of pending Appeals Council requests for review over 365 days old. In FY 2014, we completed about 162,000 Appeals Council requests for review, and in FY 2015, we completed over 150,000 cases. We will continue to adjust Appeals Council staff levels to reduce the Appeals Council backlog and meet any changes in capacity at the DDS and the hearings levels.

Hire Sufficient Administrative Law Judges to Ensure Public Access to Agency Services

From FY 2008 to FY 2010, the Office of Disability Adjudication and Review made significant progress in reducing the pending of claimants waiting for an Administrative Law Judge (ALJ) hearing. However, our inability to hire ALJs in sufficient numbers due to the Office of Personnel Management (OPM) delays coupled with the Federal Government shutdown and budget constraints caused a public service crisis. Now more than one million claimants are waiting for a hearing, more than any other time in history.

We received a new list of ALJ candidates from the OPM in March 2014, but the lengthy hiring process resulted in us beginning FY 2015 with 35 fewer judges than we had at the beginning of FY 2014. We hired more ALJs as FY 2015 progressed, though not as many as we had budgeted for due to hiring setbacks. We ended the year with nearly 1,530 ALJs on duty, about 85 more than we had at the beginning of the year.

We expect to bring our pending cases below one million by the end of FY 2017.



Performance Measures that support Strategic Objective 3.1

We identify our budgeted workload measures as BWM. We identify our Agency Priority Goals as APG.

Performance Measure		FY 2015 Performance	FY 2015 Target	FY 2016 Target	FY 2017 Target
3.1a	Ensure the quality of our decisions by achieving the disability determination services (DDS) net accuracy rate for initial disability decisions	98% net accuracy	97% net accuracy	97% net accuracy	97% net accuracy
		Met			
3.1b	Increase our ability to provide timely decisions by reducing the percentage of pending Appeals Council requests for review 365 days old or older	82%	80% of cases pending less than 365 days	81% of cases pending less than 365 days	82% of cases pending less than 365 days
		Met			
3.1c APG NEW	Improve customer service by reducing the wait time for a hearing decision			Decide 99% of the cases that begin the fiscal year at 430 days old or older	Decide 99% of the cases that begin the fiscal year at 365 days old or older
3.1d BWM	Complete the budgeted number of initial disability claims	2,759,432	2,767,000	2,695,000	2,810,000
		Not Met			
3.1e BWM	Complete the budgeted number of disability reconsideration claims	723,485	739,000	702,000	715,000
		Not Met			
3.1f BWM	Complete the budgeted number of hearing requests	663,129	727,000	703,000	784,000
		Not Met			
3.1g BWM	Achieve the target number of initial disability claims pending	621,315	621,000		
		Not Met			
3.1h BWM	Achieve the target number of disability reconsiderations pending	143,540	143,000		
		Not Met			
3.1i BWM	Average processing time for initial disability claims	114 days	109 days	113 days	113 days
		Not Met			



Performance Measure		FY 2015 Performance	FY 2015 Target	FY 2016 Target	FY 2017 Target
3.1j BWM	Average processing time for reconsiderations ¹	113 days			109 days
3.1k BWM	Average processing time for hearings decisions	480 days	470 days	540 days	555 days
		Not Met			
3.1l BWM	Achieve the budgeted goal for disability determination services (DDS) case production per workyear	307	313		
		Not Met			
3.1m BWM	Achieve the budgeted goal for hearing case production per workyear	95	104		
		Not Met			

References

For additional information please see our [Annual Performance Plan for Fiscal Year 2017, Revised Performance Plan for Fiscal Year 2016, and Annual Performance Report for Fiscal Year 2015 \(www.socialsecurity.gov/performance/\)](#).

¹We developed management information for Average Processing Time for Disability Reconsiderations in FY 2013. FY 2014 was the first full fiscal year for which data was available for this measure. Now that we have had the opportunity to analyze at least two years of actual data, this year we developed a performance target for FY 2017.