

OIG Office of the Inspector General SOCIAL SECURITY ADMINISTRATION

March 21, 2018

The Honorable Sam Johnson Chairman, Subcommittee on Social Security Committee on Ways and Means House of Representatives Washington, DC 20515

Dear Mr. Chairman:

As you requested, we are providing regular reports to keep the Subcommittee informed on the Social Security Administration's efforts related to its Disability Case Processing System project. We evaluated the Agency's progress in developing and implementing the System as of February 2018. To ensure the Agency is aware of the information provided to your office, we are forwarding it a copy of this report.

If you have any questions concerning this matter, please call me or have your staff contact Walter Bayer, Congressional and Intragovernmental Liaison, at (202) 358-6319.

Sincerely,

Wale Stallworth Stone

Gale Stallworth Stone Acting Inspector General

Enclosure

cc: Commissioner of Social Security General Counsel

Progress in Developing the Disability Case Processing System as of February 2018 A-14-17-50291

March 2018

Objective

To evaluate the Social Security Administration's (SSA) progress in developing and implementing its Disability Case Processing System (DCPS) as of February 2018.

Background

SSA is developing DCPS as a common system for all State disability determination services (DDS). The Agency expects DCPS will simplify system support and maintenance, improve the speed and quality of the disability process, and reduce the overall growth rate of infrastructure costs.

SSA is using an Agile approach to develop DCPS. The Agency continually identifies functional requirements, which are expressed as user stories. Each user story is assigned a level of effort, called a story point. Velocity refers to the number of story points completed during an iteration, or "sprint." User stories that need to be addressed are considered the backlog.

In December 2016, SSA released its first working software to three DDSs, enabling them to process certain types of disability claims. Since the December 2016 DCPS release, SSA has deployed four more major releases that provided additional functionality.

Results

In September 2017, we reported that SSA planned to deliver functionality to support all workloads—including continuing disability reviews and DDS disability hearings—by April 2018. Since then, SSA has discontinued rolling out DCPS to additional DDSs and re-prioritized its resources to focus on development. The Agency's new strategy concentrates on increasing the number of DCPS users at participating DDSs and the number of cases the system processes.

On January 27, 2018, SSA deployed another major release into production. The Agency reported this release added functionality to support most adult and child initial and reconsideration claims. As of February 28, 2018, 10 DDSs had processed 6,477 disability cases using DCPS. Based on SSA's cost estimates, as of February 2018, cumulative costs for the new DCPS project were about \$80 million. This does not include SSA's costs to develop the prior version of DCPS.

As of February 2018, the Agency expected development would continue beyond October 2018. In addition, SSA had not determined when it would resume deploying DCPS to additional DDSs.

As of February 2018, SSA estimated its DCPS costs through Fiscal Year 2022 would be about \$140 million. However, given the uncertainty of when SSA will finish developing DCPS and rolling it out to all DDSs, we could not determine whether the Agency's cost estimate was reasonable. Furthermore, until SSA completes DCPS development and implementation, DDSs will continue incurring costs to operate and maintain their existing systems.

As Chairman Johnson requested, we will continue monitoring the project and issue periodic reports on SSA's DCPS-related efforts. In our next review, we will gather feedback about the system from users in the participating DDSs.

Office of Audit Report Summary

TABLE OF CONTENTS

Objective1
Background1
Results of Review2
DCPS Releases and Functionality2
Cases Processed in DCPS
SSA's Plan for Future Releases and Estimated Costs4
Development Progress
DCPS Project Risks
Fiscal Functionality
Infrastructure Team Resources9
Conclusion9
Appendix A – Scope and MethodologyA-1
Appendix B – Related Office of the Inspector General Reports
Appendix C – Disability Case Processing System Road MapC-1
Appendix D – Disability Case Processing System Risk Management PlanD-1

ABBREVIATIONS

DCPS	Disability Case Processing System
DDS	Disability Determination Services
FY	Fiscal Year
OIG	Office of the Inspector General
OMB	Office of Management and Budget
PI	Product Increment
SSA	Social Security Administration
U.S.C.	United States Code

OBJECTIVE

Our objective was to evaluate the Social Security Administration's (SSA) progress in developing and implementing its Disability Case Processing System (DCPS) as of February 2018.

BACKGROUND

SSA partners with State disability determination services (DDS) to evaluate disability claims and make disability determinations.¹ The DDSs use various customized systems to process disability cases. According to SSA, these systems cost about \$31 million annually to operate and maintain.

SSA is developing DCPS as a common case processing system for all DDSs. The Agency expects DCPS to simplify system support and maintenance, improve the speed and quality of the disability process, and reduce the overall growth rate of infrastructure costs.

In December 2010, SSA awarded a contract to develop DCPS. In June 2014, a consulting firm contracted by SSA reported that, despite significant investment over several years, the system—referred to as DCPS Beta—delivered limited functionality and faced schedule delays and increasing stakeholder concerns.² The Agency decided to discontinue developing and using DCPS Beta in May 2015, and, in July 2015, it began working on a new system.

The Agency is using an incremental approach to develop and deploy the new DCPS. In December 2016, SSA released its first working software to the Delaware, Maine, and Ohio DDSs. The software enabled them to process adult initial disability claims that involved only physical allegations and met the criteria for fully favorable decisions under the Quick Disability Determination and Compassionate Allowance programs.³ Since 2016, SSA has continued developing and implementing new releases that have provided additional functionality.

In a February 13, 2015 letter to the Inspector General, Chairman Johnson, Subcommittee on Social Security, Committee on Ways and Means, expressed concerns regarding DCPS' development and requested that we provide regular reports to keep the Subcommittee informed of SSA's DCPS-related efforts. This report is one in a series in which we examine SSA's DCPS project.⁴

¹ Social Security Act, 42 U.S.C. § 421 and 42 U.S.C. § 1383b (2017).

² "Beta" refers to software that is undergoing testing and has not been officially released. Three DDSs—Missouri, Illinois, and Idaho—processed nearly 2,000 cases using DCPS Beta and used their existing systems to process all other cases.

³ SSA, *POMS*, *DI Disability Insurance*, ch. DI 230, subch. DI 23023.001 (May 10, 2017). Quick Disability Determinations and Compassionate Allowances allow expedited decisions for claimants who have the most severe disabilities.

⁴ For information about our other related DCPS reports, see Appendix B.

To accomplish our objective, we reviewed SSA's documentation and interviewed staff to understand the key processes and controls the Agency uses to manage the DCPS project. See Appendix A for additional information about our scope and methodology.

RESULTS OF REVIEW

In November 2017, after releasing DCPS to the Washington, D.C., DDS, SSA discontinued rolling out DCPS to additional DDSs and re-prioritized its resources to focus on development. The Agency's new strategy concentrates on increasing the number of DCPS users at participating DDSs and the number of cases they process in the system.

On January 27, 2018, SSA deployed another major release into production. The Agency reported this release added functionality to support most adult and child initial and reconsideration claims. As of February 28, 2018, 10 DDSs had processed 6,477 disability cases using DCPS.

DCPS Releases and Functionality

In October 2017, SSA deployed its fourth major DCPS release. This release added functionality to process reconsiderations on initial adult claims and receive, reject, and transfer initial disabled child claims.

Since the December 2016 release, users have had to apply screening criteria to ensure DCPS could process an incoming case before receipting it into the system. As the Agency improved functionality with each subsequent release, it lessened the case-screening burden on users. For example, in October 2017, SSA provided functionality to allow participating DDSs to automatically route incoming cases to DCPS if they choose.

To make disability determinations, DDSs may incur expenses to procure medical evidence, send claimants to consultative examinations, or consult with medical and psychological professionals.⁵ Therefore, DCPS must interface with State-managed fiscal systems. In February 2018, SSA surveyed DCPS users in the 10 participating DDSs about their experience with the fiscal functionality, including the ability to request and pay for consultative examinations and medical evidence. Users in over half the DDSs indicated fiscal functionality worked well; however, the remaining users said the Agency needed to develop additional fiscal functionality (see Table 1).

⁵ 20 C.F.R. § 404.1517 and 416.1017 (2017).

DDS	Overall Fiscal Functionality	Fiscal Functionality for Medical Evidence	Fiscal Functionality for Consultative Examinations
Delaware	2		2
Iowa		6	
Maine			
Nebraska		6	\otimes
Ohio	2		2
Rhode Island	2		2
South Dakota		6	\otimes
Virginia		6	
Washington	6		6
Washington, D.C.	\otimes	\otimes	\otimes

 Table 1: User Engagement Results on Fiscal Functionality

Data Source: SSA

- Users indicated fiscal functionality is working for the DDS
- **O** Users indicated fiscal functionality needs improvement
- S Fiscal functionality was not available

On January 27, 2018, SSA deployed its fifth major release into production. According to the Agency, this release added functionality to support most adult and child initial and reconsideration claims and expanded functionality to support consultative examinations and other fiscal requirements.

Cases Processed in DCPS

As of February 28, 2018, the DDSs had closed 6,477 cases using DCPS and had 1,906 cases pending (See Table 2). This included 263 cases in which 6 DDSs used the functionality to request and schedule consultative examinations as part of the determination process.⁶

⁶ SSA took a measured approach in implementing functionality to request and schedule consultative examinations. When the Agency initially released the functionality in July 2017, it limited the ability to request and schedule consultative examinations to two DDSs to ensure the new functionality was working as intended.

DDS	Closed Cases	Pending Cases	Cases in Which DDSs Procured Medical Evidence	Cases in Which DDSs Procured Consultative Examinations
Delaware	534	353	687	44
Iowa	930	165	781	30
Maine	1,195	556	1,458	136
Nebraska	28	17	32	0
Ohio	1,920	237	1,066	34
Rhode Island	533	210	671	7
South Dakota	49	17	30	0
Virginia	1,007	124	692	12
Washington	264	226	436	0
Washington, D.C.	17	1	0	0
Total	6,477	1,906	5,853	263

 Table 2: Cases Processed Using DCPS as of February 28, 20187

Data Source: SSA

SSA's Plan for Future Releases and Estimated Costs

After hearing from its users and consulting with its DCPS Steering Committee, SSA focused its resources on development rather than rolling DCPS out to additional DDSs.⁸ The Agency is focused on increasing the number of users and the volume of cases in the DDSs. SSA plans to track case receipts and clearances to reveal a trend rather than set a target or goal to measure success. In late spring or early summer 2018, the Agency expects to resume planning for the subsequent roll out to the remaining 42 DDSs.

With the upcoming releases planned for April and July 2018, the Agency will focus on maximizing functionality to increase the number of users and volume of cases processed using DCPS at the participating DDSs. According to SSA, the April 2018 release will include functionality enhancements to reduce workarounds in the system and increase usability. The Agency plans to deliver functionality to process initial adult continuing disability reviews in the July 2018 release and adult continuing disability review reconsiderations in October 2018.

⁷ The Ohio, Delaware, and Maine DDSs first started processing cases in DCPS in December 2016. The Washington, D.C., DDS only processed quick disability determination/compassionate allowance cases with medical evidence of record in the file.

⁸ The Agency's DCPS Steering Committee is chaired by the DCPS Chief Program Officer and consists of DDS administrators, representatives from SSA regional offices, and key Agency executives.

Figure 1 summarizes SSA's planned delivery of functionality for the upcoming product increments.9

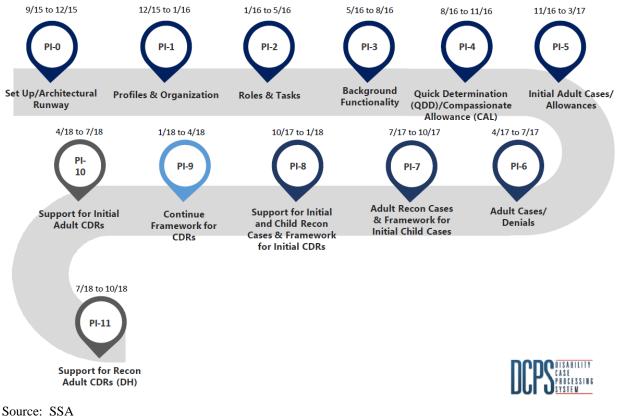


Figure 1: DCPS Product Roadmap – Updated February 13, 2018

Recon refers to reconsideration cases CDR refers to continuing disability reviews PI refers to Product Increments

Based on SSA's cost estimates, as of February 2018, its cumulative costs for the new DCPS project were about \$80 million.¹⁰ The Agency anticipated its DCPS costs through the end of Fiscal Year (FY) 2022 to be about \$140 million, comprised of an estimated \$121 million in total development costs and an estimated \$19 million in operation and maintenance costs.

⁹ See Appendix C for additional details about the Agency's Product Roadmap.

¹⁰ These cumulative costs do not include costs SSA expended on the prior system (DCPS Beta).

Development Progress

SSA is developing DCPS in an Agile software development environment through a series of 2or 3-week iterations called "sprints." With Agile, functional requirements are expressed as user stories. During sprint planning and grooming, teams collaborate and assign points to a user story based on its complexity and the level of effort required.¹¹ User stories for which the Agency has not completed development are considered the backlog.

SSA reported it had completed all the story points associated with functionality the Agency planned for the January 2018 release (product increment 8). Figure 2 illustrates SSA's progress in developing DCPS through the January 2018 release.

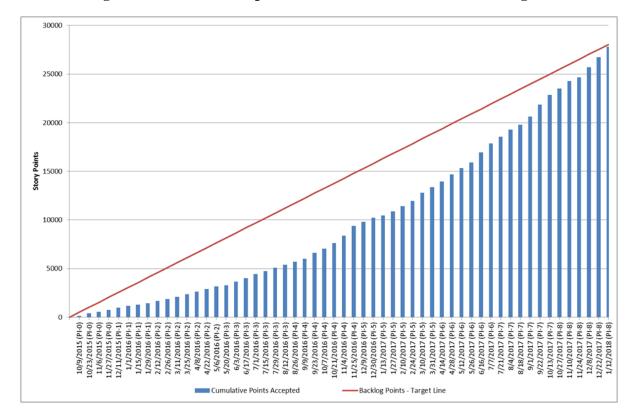
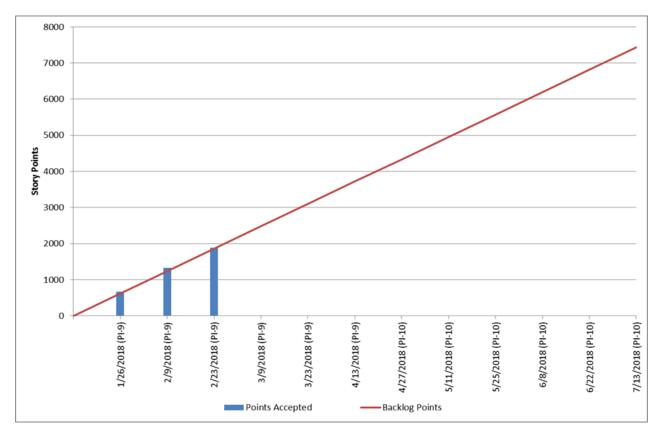


Figure 2: DCPS Burn-up Chart – Product Increments 0 Through 8

Data Source: SSA

¹¹ Grooming involves the team reviewing the backlog to ensure prioritized items are ready for delivery.

The January 2018 release was SSA's final objective for all its reporting mechanisms, including the DCPS Burn-up Chart for Product Increments 0 through 8. With the release deployed, SSA appended two more Product Increments to their reporting and monitoring charts to continue measuring progress. In the next two product increments, the Agency plans to focus on user enhancements and providing functionality to support initial adult continuing disability reviews. As of February 23, 2018, SSA had completed 1,884 of the 7,434 (25 percent) story points it identified for these product increments; see Figure 3.





Data Source: SSA

In an Agile environment, SSA continually updates the backlog of user stories. For example, the Agency identifies new user requirements and system functionality needed to process certain types of cases and adds new user stories to the backlog. The backlog may also increase when the Agency identifies defects.¹² Conversely, SSA may remove some user stories if it concludes they have become unnecessary.

¹² If a story was accepted and closed but later found not to meet the acceptance criteria, SSA creates a defect, assigns it story points, and prioritizes it within the backlog.

Although we cannot know how many new user stories SSA will identify in the future, the universe of story points will likely continue growing because the Agency has not yet identified all the user stories needed for DCPS to provide full functionality. While this is common in an Agile environment, it may affect SSA's ability to deliver planned functionality.

DCPS Project Risks

As required by the Office of Management and Budget (OMB), SSA developed a Risk Management Plan to reduce the effects of uncertainties on DCPS' success.¹³ The Agency maintains a Risk Register to identify, assess, and track the risks associated with DCPS and updates the status of those risks at least monthly. In February 2018, SSA concluded the following risks either will, or are very likely to, occur.¹⁴ For additional information about the risks SSA identified, see Appendix D.

Fiscal Functionality

SSA recognizes fiscal functionality is the largest and most difficult hurdle for the DCPS project.¹⁵ The current fiscal interface does not accommodate all States' requirements, which may affect the project as more DDSs implement DCPS. In January 2018, the Agency updated its risk register to clarify the risks associated with fiscal requirements.

- State Parent Agency/Fiscal State Interface. Each State has unique requirements to process payments. Complicated interface requirements could delay SSA's ability to deliver functionality and make maintaining those interfaces difficult. To mitigate this risk, the Agency plans to take a phased approach to delivering fiscal interfaces for each State.
- User Interface. To address each State's payment file requirements, SSA must develop DCPS user interface solutions, which may be complex. The Agency plans to mitigate this risk by applying State feature-based requirements on top of a common "base" user interface.
- **Fiscal and Vendor Onboarding Activities.** Insufficiently developed fiscal and vendor requirements may slow or delay DCPS implementation at new DDSs. To mitigate this risk, SSA plans to implement a collaborative process with the DDSs and their State parent agencies to collect the appropriate information to implement the fiscal functionality in their State. The Agency estimates this process will take approximately 3 months per State.

¹³ OMB, Capital Programming Guide Supplement to OMB Circular A-11, *Planning, Budgeting and Acquisition of Capital Assets*, Appendix 5, p. 62 (2017).

¹⁴ While SSA identified technical, schedule, and environmental risks to DCPS, it did not identify any financial risks because DCPS is presently funded and is a high priority project for the Agency.

¹⁵ Complex State-specific requirements, including fiscal functionality, contributed to cost and schedule overruns of the prior system, DCPS Beta.

Infrastructure Team Resources

SSA acknowledged that insufficient resources on the infrastructure teams might require that the Agency reduce the scope of releases or delay functionality. To mitigate the risk, the Agency obtained additional contractor personnel to assist teams with development and implementation.

CONCLUSION

In September 2017, we reported SSA planned to deliver functionality to support all workloads including continuing disability reviews and DDS disability hearings—by April 2018. Since then, SSA has revised its plans and, as of February 2018, expected development would continue beyond October 2018. In addition, SSA has not yet determined when it will resume deploying DCPS to additional DDSs.

In February 2018, SSA estimated its DCPS costs through Fiscal Year 2022 would be about \$140 million. However, given the uncertainty of when SSA will finish developing DCPS and rolling it out to all DDSs, we could not determine whether the Agency's cost estimate was reasonable. Furthermore, until SSA completes DCPS development and implementation, DDSs will continue incurring costs to operate and maintain their existing systems.

In response to our draft report, the Agency provided technical comments. We addressed those comments as appropriate.

As Chairman Johnson requested, we will continue monitoring the project and issue periodic reports on SSA's DCPS-related efforts. In our next review, we will gather feedback about the system from users in the participating DDSs.

Rone Lausa

Rona Lawson Assistant Inspector General for Audit



Appendix A – SCOPE AND METHODOLOGY

Our objective was to evaluate the Social Security Administration's (SSA) progress toward developing and implementing its Disability Case Processing System (DCPS). To accomplish our objective, we:

- Reviewed documentation on SSA's progress with developing and implementing DCPS, such as the Product Releases, DCPS Product Road Maps, and Burn-up Charts.
- Reviewed monthly updates to the DCPS Risk Register.
- Attended various DCPS-related briefings.
- Interviewed SSA personnel from the DCPS Chief Program Office.

We conducted our review from November 2017 through March 2018 in Baltimore, Maryland. The principal entity reviewed was SSA's DCPS Chief Program Office. We determined the data used for this audit were sufficiently reliable to meet our objective. We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.

Appendix B – RELATED OFFICE OF THE INSPECTOR GENERAL REPORTS

This report is one in a series of Office of the Inspector General reports that examines the Social Security Administration's (SSA) progress in developing and implementing the Disability Case Processing System (DCPS).

Congressional Response Report: Contractor's Market Research and Analysis for the Disability Case Processing System (<u>A-14-18-50506</u>), February 2018

SSA hired a contractor to conduct market research and analyze options to the current DCPS that could fulfill the Agency's requirements. The contractor reported, "The modernized system is needed by SSA Business in January 2018" and determined that DCPS was the only alternative that could meet that requirement. While we acknowledged the Agency's efforts in obtaining the analysis, a number of factors—including Federal procurement requirements, the date by which SSA told the contractor it needed a new solution, and the short timeframe the Agency gave the contractor to conduct its analysis—limited the contractor's analysis.

Congressional Response Report: Progress in Developing the Disability Case Processing System as of August 2017 (<u>A-14-17-50221</u>), September 2017

As of August 2017, SSA had planned to deliver functionality to support initial and reconsideration cases by January 2018 and all remaining workloads—including continuing disability reviews and disability determination services (DDS) disability hearings—by April 2018. However, given the uncertainty regarding the future growth of the backlog and SSA's ongoing development velocity, we were unable to conclude whether the Agency's release goals were reasonable.

Congressional Response Report: Progress in Developing the Disability Case Processing System as of March 2017 (<u>A-14-17-50079</u>), April 2017

SSA's ability to meet its delivery goals will depend on the backlog's future growth and velocity with which the Agency completes the user stories. We reported the Agency should continue reviewing its delivery targets to ensure they are feasible, considering the resources committed to the project and the Agency's development experience to-date. In addition, SSA identified—and is taking steps to address—some security concerns with the system.

Congressional Response Report: Progress in Developing the Disability Case Processing System as of November 2016 (<u>A-14-17-50174</u>), December 2016

In May 2016, SSA estimated DCPS's first release would be available in December 2016 and would support initial claims and reconsiderations. However, SSA changed the scope of the release and planned for it to include only the functionality needed to support a limited number of cases. We concluded SSA would need to make further investments in the product before it could support initial claims and reconsiderations.

Congressional Response Report: Costs Incurred in Developing the Disability Case Processing System (A-14-16-50099), September 2016

SSA's reported costs of \$356 million for the DCPS project for the 8-year period ended September 30, 2015 were reasonably accurate. We noted issues with SSA's processes for capturing and reporting contractor and labor costs. While we did not consider these issues to be of sufficient significance to materially affect the overall DCPS cost figure, we believe they warrant SSA's attention.

Congressional Response Report: The Social Security Administration's Analysis of Alternatives for the Disability Case Processing System (<u>A-14-16-50078</u>), May 2016

We concluded SSA did not sufficiently evaluate all alternatives for DCPS—for example, phasing an existing system into all DDSs or procuring and modernizing one of the vendor-supported existing systems. Without a comprehensive analysis of alternatives, the Agency cannot be assured the chosen path will be the best path to simplify system support and maintenance and reduce infrastructure costs—key objectives for the DCPS project. We could not conclude the Agency's chosen path forward is most likely to result in the timely delivery of a cost-effective solution that meets users' needs.

Observations and Recommendations for the Disability Case Processing System (Limited Distribution) (<u>A-14-15-50008</u>), May 2015

All three DDS administrators we interviewed identified issues with the DCPS application and development process but expressed their continued support of DCPS and optimism about the project. We made several recommendations for SSA to consider as it continued developing DCPS.

Congressional Response Report: The Social Security Administration's Disability Case Processing System (A-14-15-15016), November 2014

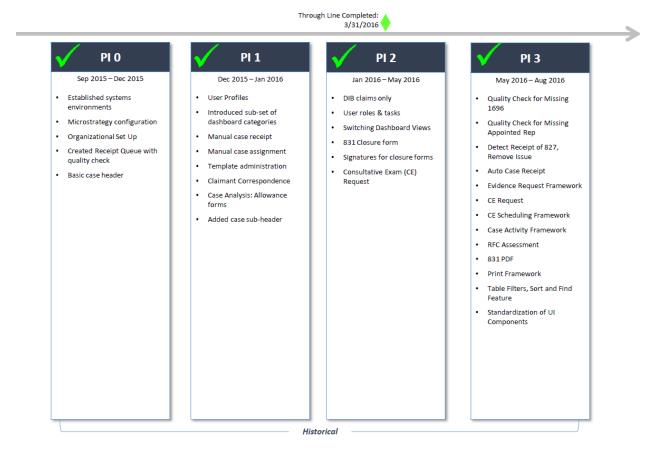
SSA had taken steps to help get the project on track. However, we concluded SSA should suspend development of certain custom-built components of DCPS until it completed its evaluations and determined whether off-the-shelf or modernized SSA-owned software were viable alternatives.

Appendix C – DISABILITY CASE PROCESSING SYSTEM ROAD MAP

The Product Road Map represents the Social Security Administration's (SSA) plans for the Disability Case Processing System (DCPS). The Road Map is subject to change because of many factors, including current velocity, ability to estimate more accurately, and changing business priorities. The shaded area within Product Increment (PI) 9 indicates stretch goals. SSA is developing the functionality within the shaded area but may not complete it by the end of the PI. Any work remaining will move to PI 10.



DCPS Product Road Map



¹ SSA prepared the Road Map. References to "our" and "us" in the note refer to the Agency, not the Office of the Inspector General.

DCPS Product Road Map

Sites 1 - 3:		Sites 4 - 6:	Sites 7 - 9:
12/17/2016		April 2017	August 2017
PI 4	PI 5	PI 6	PI 7
Aug 2016 – Nov 2016	Nov 2016 – Mar 2017	Apr 2017 - Jul 2017	Jul 2017-Oct 2017
Support for QDD/CAL cases	Support for Initial Adult Cases/	Support for Adult Cases/ Denials	Support for Adult Recon &
 DI DI/DIB Concurrent Physical Allegations Fully Favorable Allowances State Isolation Transfer to Legacy Auditing Security Error Logging Transaction Management Evidence Requests to Medical Sources FOFAE Case Notes Disability Determination Explanation PDF Case Activity Log Fiscal – MER Updates After Transfer DE Authority 	Allowances - DWB, CDBR/CDBD, DS (Triple Concurrent) - Allowances (Fully, Equal) - Enhanced MER Rates by Vendor Type - Implement Vendor Data Feeds - Enhanced MER templates - Mental allegations (PRTF) - 3 rd party contacts - Federal Quality Assurance (QA) - Transfers - Support Eastern and Central time zones - Lock down claim or case after closure - DMA failures displayed in Evidence Request - AXIAR Printing - Modify or Deactivate Organizations - Fiscal BI Report - Modify Allegations	 MRFC Denial Determinations Non-Severe Durational Past Work Other Work Create and Send Decisional Notice with Personalized Disability Explanation Medical Vocational Analysis Vendor Search - CE CE Scheduling, non-split vendors CE Claimant Travel reimbursement (for mileage) CE Callow-up by Letter Cancel CE Fiscal CE with SPA interface ERA - MER (No Fiscal) Enhanced View Hyperlinks Enhanced BI Reports Enhanced GA Recon Receipt, Reject and Transfer Only Enhanced Forly Enhanced Failure Management Usability Enhancements 	 Support for Adult Recon & Framework for Initial Disabled Child (DC) DC Receipt, Reject and Transfer Only Adverse Onset/Closed Period MC/PC Referral Auto Cancel MER Follow-ups Modify MER follow-up date ERE – MER Fiscal Fed QA Enhancements Auto Cancel CE Follow-ups Case Locking Framework High Risk Alerts Support for Appointed Reps Carrespondence Inactivate 3rd Party Contact Case Control Dashboard for Update After Transfer Alerts Examiner Dashboard for Update After Transfer Alerts Examiner Dashboard for Update After Transfer Alerts Enhanced BI Usability Enhancements MER Pay Per Page

Historical

DCPS Product Road Map

PLEASE NOTE: The Road Map entries for PI 9 - PI 11 represent our plans based on the information currently available to us. It is subject to change, due to many factors including: our current velocity, our ability to estimate more accurately, and changing business priorities.

Site 10: November 2017	Release 1 January 2018	Release 1.3 April 2018	Release 1.6 July 2018
V PI 8	PI 9	PI 10	PI 11
Oct 2017 – Jan 2018	Jan 2018 – Apr 2018	Apr 2018 – Jul 2018	Jul 2018 – Oct 2018
Support for Initial and Child Recon Cases & Framework for Initial CDRs Child Case Development Child Case Correspondence Child Case Referral Types Child Case Referral Types Child Domain Evaluation (CDE) CE Mileage for 3rd Party CE Splits ERE – CE and CE Fiscal Case Locking - CES Enhanced Claims Analysis Tech/Recon Issues Auto Cancel CE Report Follow- up Basic Case Search Fed QA Return "Conversation" No Determinations (CC) Decentralized DDS Framework Basic Auto Case Assignment Undo Fiscal Approval/Denial Secondary Fiscal Review Fax Now Presumptive Disability Case Level Follow-ups – "At a Glance" Enhanced Bl	Cont. Framework for Initial CDRs View Other User's Dashboard Off Peak Fax "Clone" Payment Requests Acquiescence Rulings Case Locking – Analysis Dashboard Filters Auto Batch MER Follow-ups Support for Multiple Printers Route Follow-ups SPA Reconciliation Assistance Scope Single Office Auto Match MER Vendors Enhanced Case "At a Glance" Internal QA - End of Line % CE Split Pay Unknown Vendor Fiscal Left Hand Nav,/Filters Update Claimant information CE Attachments for Provider ND/TR (Examiner) Reactivations Escalated Claims Get Next Referral Generic Referral Option Symptoms Evaluation	Support for Initial Adult CDRs Carryover from Previous PI Initial Adult CDR Development Age 18 Redetermination Case Intake and Assignment New MER letters New EIR Intransactions Updates to Roles/Tasks Side-by-Side Comparison Determination Fiscal Changes New PDNs Reschedule CE Cancel MER Auto Batch CE Reminders Dashboard Org Filter Static CE Vendor Attachments Case Assignment Thresholds Send Copy of CE Report Concurrent PDNs Integrated CE MC/PC Review Search/Print Invoices Auto Attach CE Vendor Instructions Auto Attach CE Vendor Instructions	Support for Recon Adult CDR (DH) Carryover from Previous PI Disability Hearings (DH) Development Ability to schedule w/HO and new location New role/new dashboard Determination Determination Determination Determination EOR/Evaluating/Reconciling Medical Opinions CE Vendor Letter: Upcoming Appointments CE Vendor Letter: Outstanding CE Reports CE Vendor Letter: Kept Status
Usability Enhancements	Supervisor CE Review Temp Vendors Enhanced CE Search (Zips) MER Search Enhancements Closure Edits Fiscal Search Maintenance Mode	 Initiate HIT MER Request Additional Notifications of Inbound UATs Case Locking: Fiscal Block CE Vendors (Calendars) Vendor Admin Moodify Incoming Transactions 	 Proximity Search: Street to Street Integrated CE MC/PC Review Dual Time Zone Scheduling SNO Letter to MER Vendor with list of outstanding requests

Undefined Abbreviations

AR	Assistance Request
BI/BS	Blind Individual/Blind Spouse
CAL	Compassionate Allowance
CDBD	Childhood Disability Benefits – Disability Insurance Benefits Wage Earner
CDBR	Childhood Disability Benefits - Retirement, Survivor Insurance Wage Earner
CDR	Continuing Disability Review
DDS	Disability Determination Service
DE	Disability Examiner
DI (SSI)	Title XVI Disabled Individual
DIB	Title II Disability Insurance Benefits
DMA	Document Management Architecture
DWB	Disabled Widow(er)'s Benefits
DS	Disabled Spouse

EFI	Electronic Folder Interface
EOR	Electronic Outbound Request
ERE	Electronic Records Express
FO	Field Office
FOFAE	Findings of Fact and Analysis of Evidence
HIT	Health Information Technology
НО	Hearing Office
MC/PC	Medical Consultant/Psychological Consultant
MER	Medical Evidence of Record
MRFC	Mental Residual Functional Capacity
ND	No Determination
PDF	Portable Document Format
PDN	Personal Disability Notice
PRTF	Psychiatric Review Technique Form
QDD	Quick Disability Determination
RECON	Reconsideration
RFC	Residual Functional Capacity
SNO	Special Notice Option
SPA	State Parent Agency
TR	Transfer
UAT	Update after Transfer
Forms	
SSA-827	Authorization to Disclose Information to the Social Security Administration
SSA-831	Disability Determination and Transmittal

SSA-1696 Appointment of Representative

Appendix D- DISABILITY CASE PROCESSING SYSTEM RISK MANAGEMENT PLAN

Risk management is the systematic process of identifying, analyzing, and responding to project risk. The Social Security Administration (SSA) maintains a Risk Register to identify, track, assess, and monitor the risks associated with the Disability Case Processing System (DCPS) project. Table D–1 provides details about the risks SSA identified.

Risk	SSA's Assessed Probability of Occurrence	SSA's Assessed Potential Impact	Mitigation Strategy
DCPS fiscal interface does not accommodate all State system requirements to connect for fiscal payments	High	High	Deliver DCPS in a phased approach for each State
Insufficient fiscal and vendor requirements may slow or delay large-scale implementation of DCPS to new sites	High	High	Introduce vendor onboarding succession management; include parent agency and business intelligence team in fiscal demonstrations and requirement discussions
Insufficient resources on infrastructure team may reduce the scope or delay delivering functionality	High	High	Create deployment team that will relieve the infrastructure team of new site preparation duties
Fiscal complexity of creating a common user interface	High	Medium	Deliver common user interface solution and apply customized State configurations
Complexity for State disability determination services (DDS) special requirements	Medium	High	Build common functionality into the core product and use flexibilities to enable site- specific customizations
Insufficient end-to-end testing	Medium	High	Use automated testing and test thoroughly with early user involvement
Limited resources may prevent SSA from deploying DCPS in fully Agile manner	Medium	High	Continuously work with the Office of Systems and the Chief Technology Officer to shift SSA's Software Development Lifecycle to a more Agile environment
Dependencies on other projects	Medium	High	Work with subject matter experts to develop integration approaches
DDS users may not accept DCPS	Medium	High	Build and demonstrate valuable, working software, based on close and continuous collaboration with the disability community

Table D-1: Risks SSA Identified for DCPS – as of February 26, 2018

Risk	SSA's Assessed Probability of Occurrence	SSA's Assessed Potential Impact	Mitigation Strategy
Unclear terminology and illogical screen design may confuse users	Medium	Medium	Incorporate usability/User experience testing into software development lifecycle and solicit volunteers from the DDS community to provide input on terms and screens to make DCPS as user friendly as possible
The change to new feature teams may cause a short-term velocity drop	Medium	Medium	Partially roll out feature teams. Start with two teams only and learn from best practices
Insufficient user testing	Medium	Medium	CPO implementation team will work with DDS users and development teams to improve testing
Inability to create user test cases efficiently	Low	High	Create a utility to automatically generate test cases based on desired criteria
Transition to a new IT services contract may cause loss of production ¹	Low	Low	Establish a transition plan that accounts for maintaining program artifacts, system access, and program standards

Summarized from SSA's Risk Register (February 26, 2018)

Probability

- **High** Very likely or will occur.
- Medium Probable or may occur.
- Low Improbable or unlikely to occur.

Impact

- **High** Will cause a significant delay, cost variance, or scope issue in development or operation of the project.
- **Medium** Will cause a delay, cost variance, or scope issue in development or operation of the project.
- Low Will have minor impact on system development or operation of the project.

¹ SSA uses staff from multiple vendors to develop DCPS through the Agency's Information Technology Support Services Contract. SSA extended the current contract through Fiscal Year 2018; therefore, the Agency considered the risk to DCPS to be low.

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