Audit Report

Staffing, Productivity, and Processing Times at State Disability Determination Services



MEMORANDUM

Date: July 18, 2025 Refer to: 072309

To: Frank Bisignano

Commissioner

From: Michelle L. Anderson Wichell & Onla Son

Acting Inspector General

Subject: Staffing, Productivity, and Processing Times at State Disability Determination Services

The attached final report presents the results of the Office of Audit's review. The objective was to determine the extent to which staffing, productivity, and processing times at disability determination services changed from Fiscal Years 2019 through 2023.

If you wish to discuss the final report, please call me or have your staff contact Jeffrey Brown, Deputy Assistant Inspector General for Audit.

Attachment

Staffing, Productivity, and Processing Times at State Disability Determination Services 072309



July 2025

Office of Audit Report Summary

Objective

To determine the extent to which staffing, productivity, and processing times at disability determination services (DDS) changed from Fiscal Years (FY) 2019 through 2023.

Background

The Social Security Administration (SSA) administers disability programs under Titles II and XVI of the Social Security Act. To receive benefits under either program, an individual must first file an application with SSA. SSA forwards the cases that meet the non-disability criteria for benefits to the DDS with jurisdiction. The DDS develops medical evidence and determines whether a claimant is disabled or blind under the law.

There are DDSs in each of the 50 states; the District of Columbia; and Puerto Rico. The Office of Disability Adjudication's Office of Disability Determinations monitors the disability claims activities conducted at state DDSs. DDSs are state-run. and the Government provides funding through SSA to support their operations. Therefore, DDS employees are not SSA employees. States provide DDSs with sufficient qualified personnel to ensure disability determinations are made accurately and promptly, while SSA provides the funding to cover DDS costs, including staff salaries, office expenses, and other operational expenses.

Results

From FYs 2019 through 2023, DDSs lost key technical staff, including disability examiners who developed medical evidence and made disability determinations. The rate DDS full-time disability examiners separated each FY, measured as attrition rate, ranged from 13 to 25 percent, for an average of 19 percent. The overall average attrition rate for total DDS staff during this time was 13 percent. DDS staff losses coincided with a 15-percent reduction in disability determinations, from 2.2 to 1.9 million, and an 81-percent increase in processing times, from 121 to 219 days. SSA's ability to address DDS staffing and productivity issues is limited by the complexities of the Federal-state relationship and historical budget constraints.

Though there are unique challenges for each region and DDS, SSA and DDS management we interviewed identified two common issues they attribute to the loss of key technical staff: (1) outdated classification for disability examiners and (2) increased job complexity. Furthermore, inconsistent hiring authority resulted in DDS' inability to replace staff who separated. SSA has worked with DDS management to develop such initiatives as offering workload assistance, streamlining procedures, and creating a recruitment and retention workgroup to share best practices across all DDSs. However, despite combined efforts, DDS staffing losses and SSA's limited ability to address them delayed claimants' disability determinations and any benefits to which they were entitled.

Conclusion

The loss of key technical staff DDSs experienced during FYs 2019 through 2023 coincided with lower productivity and increased processing times. SSA has neither control over congressional budget decisions nor a direct role in DDS' workforce planning or retention efforts; therefore, SSA must focus on what is within its control, such as working with states to ensure appropriate job classifications and giving DDSs the authority to replace staffing losses as needed to prevent further reduced productivity and increased processing times.

Recommendations

We made five recommendations related to improving staffing, productivity, and processing times at state DDSs. SSA agreed with our recommendations.

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ABBREVIATIONS

C.F.R. Code of Federal Regulations

DDS Disability Determination Services

FY Fiscal Year

ODD Office of Disability Determinations

OIG Office of the Inspector General

POMS Program Operations Manual System

PPWY Production Per Work Year

SDPA State Disability Program Administration Division

SSA Social Security Administration

U.S.C. United States Code

OBJECTIVE

To determine the extent to which staffing, productivity, and processing times at disability determination services (DDS) changed from Fiscal Years (FY) 2019 through 2023.

BACKGROUND

The Social Security Administration (SSA) administers the Old-Age, Survivors, and Disability Insurance program to provide benefits to wage earners and eligible family members in the event the wage earner retires, becomes disabled, or dies.² SSA's Supplemental Security Income program provides a minimum level of income to individuals who are aged, blind, or disabled and meet certain income and resource limits.³ To receive disability benefits under either program, an individual must first file an application with SSA.⁴ If the claimant meets the non-disability criteria to be eligible for benefits, SSA forwards the claim to the DDS with jurisdiction to develop medical evidence and determine whether a claimant is disabled or blind under the law.⁵

There are DDSs in each of the 50 states; the District of Columbia; and Puerto Rico.⁶ The Office of Disability Adjudication's Office of Disability Determinations (ODD) monitors the disability claims activities conducted at state DDSs. DDSs are state-run, and the Government provides funding through SSA to support their operations.⁷ Therefore, DDS employees are not SSA employees. States provide DDSs with sufficient qualified personnel to ensure disability determinations are made accurately and promptly, while SSA provides the funding to cover DDS costs, including staff salaries, office expenses, and other operational expenses.⁸

¹ The Federal FY is October 1 through September 30. State FYs are typically July 1 through June 30. The analysis in this report is based on Federal FY.

² 42 U.S.C. §§ 402, 423(a).

³ 42 U.S.C. §§ 1381, 1381a.

⁴ 42 U.S.C. §§ 423(a)-(b), 1382, 1383.

⁵ SSA, *Disability Determination Process*, ssa.gov (January 30, 2023).

⁶ In addition, SSA has Federal disability processing units that make disability determinations.

⁷ SSA, *POMS*, DI 39506.100, A (August 18, 2023).

⁸ SSA, POMS, DI 39503.001 (July 30, 1996), DI 39506.001 (April 1, 2024), and DI 39518.005, A.1 (August 5, 1996).

SCOPE AND METHODOLOGY

We reviewed data from ODD's Management Information site regarding DDS staffing, productivity, and processing times from FYs 2019 through 2023. Using staffing and performance metrics, we selected 10 DDSs and interviewed their management teams.⁹ We also interviewed employees from ODD's State Disability Program Administration Division (SDPA) in each region who worked directly with the DDSs. We conducted these interviews to determine (1) the causes for staffing issues at DDSs; (2) the relationships between staffing, productivity, and processing times; and (3) how SSA and/or DDS management tracks the effectiveness of new initiatives and whether they have resulted in improvements.¹⁰

RESULTS OF REVIEW

From FYs 2019 through 2023, DDSs lost key technical staff, including disability examiners who developed medical evidence and made disability determinations. The rate DDS full-time disability examiners separated each FY, measured as attrition rate, ranged from 13 to 25 percent, for an average of 19 percent. The overall average attrition rate for total DDS staff during this time was 13 percent. DDS staff losses coincided with a 15-percent reduction in disability determinations, from 2.2 to 1.9 million, and an 81-percent increase in processing times, from 121 to 219 days. SSA's ability to address DDS staffing levels and productivity issues is limited by the complexities of the Federal-state relationship and historical budget constraints. SSA and DDS management have attempted to work within these limitations to develop such initiatives as offering workload assistance, streamlining procedures, and creating a recruitment and retention workgroup to share best practices across all DDSs. Despite these efforts, DDSs struggled with achieving staffing levels needed to prevent reduced productivity and increased processing times.

Staffing and Productivity

DDS productivity, measured as production per work year (PPWY),¹³ decreased by 21 percent, and average processing time increased by 81 percent from FYs 2019 through 2023 (see Table 1). This resulted in 15 percent fewer initial disability determinations and a 96-percent increase in the number of pending determinations. Though DDSs made more disability determinations and productivity increased in FY 2024, processing times and pending levels increased.

⁹ See Appendix A for the DDS metrics we reviewed.

¹⁰ See Appendix A for more information on our scope and methodology.

¹¹ The attrition rate represents the percent of full-time employees who separated via voluntary or involuntary departures, such as resignations, retirements and terminations, from the DDS during the FY.

¹² Average processing times include the time field office employees develop the non-medical aspects of the claims before sending them to the DDSs for medical determinations. The average time attributed to field offices over the audit period was 37 days.

¹³ SSA calculates PPWY using the numbers of disability determinations processed per unit of resources (work year).

Table 1: Initial Disability Claims FYs 2019 Through 2024¹⁴

FY	Average Processing Time (Days)	Claims Received	Disability Determinations Cleared	Disability Determinations Pending	PPWY
2019	121	2,280,118	2,249,994	572,663	302.8
2020	132	2,130,534	1,979,377	719,069	255.2
2021	166	1,917,703	1,922,034	693,660	238.6
2022	184	2,070,029	1,802,758	903,408	229.8
2023	219	2,162,203	1,916,375	1,124,929	240.2
Percent Change, FYs 2019 Through 2023	+81%	-5%	-15%	+96%	-21%
2024	238	2,294,578	2,206,150	1,175,970	245.7

The decline in DDS productivity and increase in processing time coincides with a decrease in the number of DDS staff in key technical positions, such as experienced disability examiners, medical consultants, and hearing officers (see Table 2).

Table 2: DDS Staff by Selected Position, All DDSs FYs 2019 Through 2024¹⁵

FY	Experienced Examiners ¹⁶	Medical Consultants	Hearing Officers
2019	6,266	2,370	415
2020	6,183	2,237	362
2021	5,981	2,137	333
2022	5,804	2,028	317
2023	5,594	2,071	293
Percent Change, FYs 2019 Through 2023	-11%	-13%	-29%
2024	6,072	1,994	281

¹⁴ The audit period was FYs 2019 through 2023. FY 2024 data were provided for informational purposes.

¹⁵ The audit period was FYs 2019 through 2023. FY 2024 data were provided for informational purposes.

¹⁶ According to SSA, it takes 1 year for a trainee to transition to an examiner; however, each state dictates the requirements, and the process may vary for each state.

Not only did DDSs lose key technical staff, but they lost disability examiners at a higher rate than overall DDS staff. Specifically, SSA reported an average 19-percent attrition rate for disability examiners during the audit period, which was higher than the 13-percent attrition rate for total DDS staff (see Table 3).

Table 3: Attrition Rate, All DDSs FYs 2019 Through 2024

FY	Total Staff Attrition Rate	Examiner Attrition Rate
2019	11%	15%
2020	10%	13%
2021	14%	20%
2022	18%	25%
2023	14%	20%
Average, FY 2019 Through 2023	13%	19%
2024	11%	16%

Though unique challenges exist for each region and DDS, management at the 10 DDSs and employees at regional SDPAs we interviewed identified 2 common issues outside the COVID-19 pandemic that they attribute to the loss of key technical staff during the audit period: (1) outdated classification for disability examiners and (2) increased job complexity.

Disability Examiner Classification

Each state human resource department compares and classifies state jobs, including DDS positions, into groups to establish salaries and minimum qualifications. According to DDS management and regional SDPA employees, many state classifications for the disability examiner position were outdated. With an outdated classification, states group the examiner position with other jobs across the state that, at one point, may have been similar but require less technical training and expertise than the examiner position, which results in comparable pay for incomparable work. Additionally, the wages for disability examiners do not compete with Federal agencies or private corporations in many states.

In 2022, SSA started a recruitment and retention workgroup that comprised a DDS representative from each region and other SSA subject-matter experts in relevant components. The workgroup provided resources for DDSs to use when they work with their states to support reclassifying or improving pay for disability examiners. DDSs that had reclassified the disability examiner position experienced lower attrition. For example, the Vermont DDS experienced a 4.6-percent attrition rate during the audit period. The DDS management team attributed this rate to the built-in career ladder for disability examiners. The career ladder and resulting salary increase became effective after Vermont reclassified the disability examiner position, which the state had not reviewed for 15 years.

Though effective, reclassification is not a simple process. Some DDSs had begun reclassification actions but working through the state process was taking several years. For example, the Alaska DDS, with the support of its regional SDPA, had been working with the state since 2022 to reclassify the disability examiner position. According to the reclassification study, the Alaska DDS' disability examiner wages were lower than other DDSs by as much as 25 percent, despite Alaska having the highest cost-of-living rate than other states. As of November 2024, the reclassification study was ongoing.

According to SSA's Office of Disability Adjudication, the Agency's Office of General Counsel has stated SSA cannot define or put pay policies into place for state employees. However, SSA can support DDSs in working with their states to reclassify the disability examiner positions to obtain a competitive salary and ensure appropriate position descriptions. The recruitment and retention workgroup also shared other states' practices on pay, bonus, recruitment, and retention. The SDPA employees and DDS management teams generally found the initiatives helpful. There were some initiatives DDSs could not successfully implement because of state restrictions or other issues unique to the DDS. For example, some DDSs could not implement bonus incentives based on resistance from unions since the states could not offer the benefit to the non-DDS employees they represented. According to SSA, the workgroup paused its efforts in June 2024 because of a hiring freeze. As of April 2025, the workgroup was still inactive.

Disability Examiner Job Complexity

Disability examiners evaluate disability claims and make determinations in accordance with laws, regulations, policies, and procedures governing SSA disability programs. Their work involves evaluating medical evidence to make judgments about the presence, onset, clinical severity, and prognosis of physical or mental impairments and determining claimants' vocational potential. The workload is complex and requires that the examiner have a high level of analytical skills, SSA program knowledge, medical terminology awareness, and vocational outlook familiarity. Also, with the increase in electronic medical records, DDS management teams asserted that disability examiners reviewed significantly more medical evidence than in the past, sometimes thousands of pages for one claimant. The DDS management teams we interviewed cited job complexity as one factor in the loss of disability examiners. Even DDSs with low attrition rates lost examiners because of the work's complexity. For example, the Vermont DDS, which had the lowest overall attrition rate of 4.6 percent for disability examiners during the audit period, still lost disability examiners, stating the work was too intense.

The complexity of the disability examiner position makes losing experienced staff detrimental to a DDS as it results in a significant loss of institutional knowledge. The experience lost, combined with the lack of resources to train new employees, results in a reduction in the higher output that is generally associated with an experienced examiner. For example, the Montana DDS experienced the highest overall attrition rate of 44.8 percent during the audit period. According to Montana DDS management, they lost over 100 years' experience in 2022 and 2023. New examiners are typically in training for 1 year, which often requires that experienced staff stop, or reduce, casework to train and mentor the new employee. Overall, new examiners generally take about 2 years to gain the experience needed for the DDS to see a positive impact on case clearances and productivity. When a large percentage of the office must focus on training, workload production declines and processing times increase, which results in growing backlogs.

In FY 2024, SSA made significant policy changes to streamline the disability adjudication process and reduce processing times. For example, in June 2024, SSA implemented a new rule that reduced the review of past relevant work of claimants from 15 to 5 years, which reduced the burden on claimants and DDS employees while providing enough information to make appropriate disability determinations. However, complexities remain in the disability determination process, such as the Transferability of Skills Assessment. This Assessment requires a complex 5-step vocational analysis for the claimant. Some DDS management teams and regional SDPA employees identified this step as unnecessarily cumbersome but presented an opportunity to incorporate artificial intelligence to reduce the burden on the examiner without compromising the integrity of the disability determination process. Despite the growing complexity of the disability determination process and the uniqueness associated with each claimant, SSA has proven it can identify and implement program changes that benefit both the DDS employee and the claimant.

Funding and Efficient Hiring

Each state provides its DDSs an organizational structure, facilities, qualified personnel, medical consultant services, and a quality assurance function. However, SSA pays 100 percent of the necessary costs the DDSs incur. Therefore, each DDS depends on SSA's budget allocations to perform its work. Once Congress approves SSA's annual budget, the Agency allocates funds to each component based on their annual operating plans and estimates, which were often prepared almost 2 years before the start of the FY. DDSs are included as part of ODD's budget and therefore must wait for ODD to further allocate budgeted amounts to its divisions and the DDSs.

DDSs typically do not receive hiring authority until ODD provides their budget allocation, which often occurs later in the FY because of the budget timing and, in many years, continuing resolutions that require that agencies operate at the previous FY's funding levels. Once DDSs receive their hiring authority, they must work through the state hiring process, which often has its own challenges that contribute to a prolonged hiring cycle. For example, according to SDPA employees, the New Jersey state hiring process typically takes 9 months from start to finish. This provides an even shorter window for successful hiring as the DDS attempts to work through conflicting state and Federal hiring processes. Many DDS management teams indicated they worked through the state hiring process when SSA's hiring timeline expired (typically at the end of the FY) so they lost the hiring allocation. Even when there is an approved budget, if a DDS loses an employee but does not have hiring authority, SSA typically does not authorize the DDS to replace the employee until it grants the next hiring authority. When asked what prevents ODD from allowing DDSs to continuously hire throughout the year. ODD employees responded that their decisions are based on budget uncertainty. ODD explained ". . . funding could be sufficient to cover mass hiring in the current year, but if the following year's budget does not support all of those hires being on the payroll for a full year in the following year, we could face some issues."

Changes in Staffing, Productivity, and Processing Times at State DDSs (072309)

¹⁷ 20 C.F.R. § 404.1603(c)(2); SSA, *POMS*, DI 39563.200 (January 23, 1990).

When asked whether ODD would be able to give DDSs the authority to hire throughout the year if SSA received its budget at the beginning of the FY, ODD employees stated, "Receiving a budget at the beginning of the [FY] would be helpful. However, the unknown surrounding the following year's budget would still pose a risk."

DDS' inability to replace employees as needed creates a burden on DDSs and results in too many hires at once. When SSA authorizes a DDS to hire a large number of employees after a long hiring drought, the existing technical staff is often diminished and not available to train and mentor new hires. As a result, DDSs cannot plan appropriately for staffing and training needs or incorporate a succession plan for anticipated losses due to retirements or other departures. Some DDSs have identified ideal staffing levels that would enable them to reduce pending claims to a manageable level, but DDSs cannot achieve these staffing levels because of the inconsistent hiring authority and inability to replace staff who separate.

CONCLUSION

The loss of key technical staff experienced by DDSs during FYs 2019 through 2023 coincided with lower productivity and increased processing times. Despite combined efforts, DDS staffing losses and SSA's limited ability to address them ultimately delayed claimants' disability determinations and any benefits to which they were entitled. In March 2025, SSA published a *3-Month Action Plan* in which it stated it will focus on core responsibilities related to customer service, including improving DDS performance and productivity. SSA has neither control over congressional budget decisions nor a direct role in DDS workforce planning or retention efforts; therefore, SSA's action plan must focus on what is within its control, such as working with states to ensure appropriate job classifications and giving DDSs the authority to replace staffing losses as needed to prevent further reduced productivity and increased processing times.

RECOMMENDATIONS

We recommend SSA:

- 1. Work with states to ensure appropriate job classifications for DDS employees, particularly disability examiners.
- 2. Resume the retention and recruitment workgroup, or a similar endeavor, to develop initiatives that provide support to DDSs.
- Consider technologies, such as artificial intelligence, that could accelerate the Transferability
 of Skills Assessment or other processes without compromising the accuracy of DDS'
 disability determinations.

¹⁸ SSA, 3-Month Action Plan (March 18, 2025).

- 4. Work with DDSs to identify an ideal staffing level at each DDS and estimate the costs to achieve those staffing levels to support congressional budget requests.
- 5. Create procedures that give DDSs the flexibility to replace staffing losses as needed throughout the year based on annual budget estimates.

AGENCY COMMENTS

SSA agreed with our recommendations, see Appendix C.

APPENDICES

Appendix A – DISABILITY DETERMINATION SERVICES' METRICS

We reviewed four categories of performance metrics across state disability determination services (DDS) for Fiscal Years (FY) 2019 through 2023: (1) attrition; (2) staffing, measured by average number of trainees; (3) productivity, measured as production per work year (PPWY); and (4) average processing time for initial disability claims. We interviewed management teams at the top two and bottom two DDSs in each of the four categories.

Table A-1: Average Attrition for Full-time Examiners FYs 2019 Through 2023

DDS	Attrition Rate	DDS	Attrition Rate
Montana	62.8%	Colorado	18.0%
Kansas	48.5%	Missouri	16.0%
Louisiana	42.8%	Arkansas	16.0%
New Mexico	38.0%	Nebraska	16.0%
Nevada	35.2%	South Dakota	15.9%
Florida	32.7%	District of Columbia	15.6%
Maine	30.7%	Utah	14.9%
North Dakota	29.7%	Ohio	14.5%
Georgia	28.6%	Oregon	14.4%
Wyoming	27.9%	New York	14.2%
Alaska	27.2%	California	13.4%
Texas	27.0%	Arizona	13.3%
Tennessee	25.9%	Alabama	13.3%
Delaware	25.3%	Indiana	13.2%
Illinois	24.7%	West Virginia	12.5%
Wisconsin	24.5%	Washington	12.2%
Mississippi	24.0%	New Hampshire	11.9%
Maryland	22.7%	Michigan	10.8%
Kentucky	21.7%	New Jersey	10.0%
North Carolina	20.8%	Connecticut	9.1%
Virginia	20.6%	lowa	7.9%
Idaho	20.5%	Massachusetts	7.5%
Hawaii	20.0%	Pennsylvania	7.3%
South Carolina	20.0%	Rhode Island	4.6%
Minnesota	19.4%	Vermont	4.6%
Oklahoma	18.6%		

Changes in Staffing, Productivity, and Processing Times at State DDSs (072309)

¹ We identified the average attrition rate over the 5-year period by using the attrition rate for each year, FYs 2019 through 2023, and calculating the average.

Table A-2: Average Percent of Trainee Examiners FYs 2019 Through 2023²

DDS	Trainee Rate	DDS	Trainee Rate
Montana	53.8%	Hawaii	15.8%
New Mexico	40.6%	Missouri	15.4%
Idaho	39.6%	Ohio	15.4%
Delaware	35.9%	West Virginia	14.9%
Wyoming	35.2%	Indiana	14.6%
Kansas	35.2%	Florida	14.6%
Louisiana	34.6%	Oregon	14.5%
Maine	27.5%	Nebraska	14.2%
Nevada	25.4%	New Jersey	14.0%
Tennessee	25.1%	Mississippi	13.4%
Utah	24.3%	lowa	12.9%
North Dakota	23.8%	Kentucky	12.8%
South Dakota	22.6%	Michigan	12.7%
Virginia	20.4%	California	10.3%
North Carolina	20.2%	Maryland	9.8%
Alaska	19.6%	Oklahoma	9.8%
Alabama	19.2%	Connecticut	9.1%
Arkansas	18.6%	Washington	8.9%
Minnesota	18.6%	Massachusetts	8.1%
Illinois	18.3%	New Hampshire	7.7%
South Carolina	17.6%	Rhode Island	7.5%
Texas	17.5%	Pennsylvania	6.4%
Arizona	17.1%	New York	6.2%
Georgia	16.7%	Vermont	2.4%
Colorado	16.7%	District of Columbia	0.0%
Wisconsin	16.6%		

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² We identified the average percentage of trainees over the 5-year period by dividing the number of trainee examiners by the number of full-time examiners for each year, FYs 2019 through 2023, and calculating the average.

Table A-3: Average DDS PPWY FYs 2019 Through 2023³

DDS	PPWY	DDS	PPWY
Texas	378.4	Rhode Island	239.2
Indiana	334.3	Oklahoma	238.4
Kansas	329.1	New York	238.3
District of Columbia	320.4	South Carolina	238.1
Illinois	317.7	Utah	236.6
Florida	293.8	North Carolina	236.2
Maine	293.3	Kentucky	235.9
Idaho	290.9	Massachusetts	234.4
Connecticut	286.4	Colorado	230.7
Ohio	280.8	Missouri	228.4
Louisiana	273.0	Maryland	227.8
Georgia	269.1	North Dakota	223.4
Wyoming	267.2	New Hampshire	221.1
Virginia	265.9	Arkansas	216.2
Pennsylvania	263.5	Iowa	211.6
Minnesota	261.5	Delaware	210.6
California	260.1	Hawaii	208.5
Wisconsin	255.2	Michigan	206.5
New Mexico	249.2	Alabama	200.2
New Jersey	248.8	Washington	199.5
Arizona	247.8	Nebraska	198.5
South Dakota	246.9	Nevada	191.7
Mississippi	246.6	West Virginia	189.3
Tennessee	245.5	Vermont	177.2
Montana	243.1	Alaska	141.8
Oregon	242.0		

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³ PPWY is the relationship between the number of claims processed and the amount of productive time provided by one employee working full-time for 1 year. We identified the average PPWY over the 5-year period by using the PPWY for each year, FYs 2019 through 2023, and calculating the average.

Table A-4: Average DDS Processing Time for Initial Disability Claims (Days) FYs 2019 Through 2023⁴

DDS	Average Processing Time	DDS	Average Processing Time
Alaska	216.5	Kansas	170.5
Delaware	211.7	Nebraska	169.3
South Carolina	208.6	Arizona	167.4
Tennessee	208.2	Mississippi	163.9
Georgia	206.5	Arkansas	161.0
Maryland	199.9	Wyoming	156.3
New Mexico	196.1	Connecticut	148.7
Nevada	195.6	Hawaii	148.6
Florida	190.1	Kentucky	148.3
Illinois	189.8	South Dakota	148.2
Montana	189.4	Maine	147.5
Wisconsin	186.6	Oklahoma	146.3
Oregon	183.6	Idaho	143.2
District of Columbia	181.3	Pennsylvania	140.8
North Carolina	180.3	Indiana	139.7
Colorado	178.3	New York	139.6
Massachusetts	178.2	Minnesota	139.4
Louisiana	175.9	North Dakota	138.8
Texas	175.6	California	137.4
Washington	173.6	New Jersey	136.8
Utah	173.6	Ohio	136.8
West Virginia	172.2	Missouri	134.2
Virginia	172.2	lowa	130.1
Alabama	172.1	Vermont	125.2
New Hampshire	172.1	Rhode Island	124.6
Michigan	171.3		

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⁴ We identified the average processing time over the 5-year period by using the average processing time for each year, FY 2019 through FY 2023, and calculating the average.

Appendix B – **S**COPE AND METHODOLOGY

To accomplish our objective, we:

- Reviewed relevant Social Security Administration (SSA) policies and publications, the Code
 of Federal Regulation, and other documents related to disability determination services
 (DDS) operations, including Federal-state relationships, budgeting policies, annual spending
 plans, and staffing requirements.
- Identified goals, benchmarks, and targets related to DDS workloads.
- Identified resources and tools SSA provides DDSs to achieve workload goals, workforce planning, recruitment, hiring and retention processes, and initiatives to address attrition.
- Obtained data from the Office of Disability Determination's (ODD) Management Information site regarding DDS staffing, productivity, and processing times from Fiscal Years 2019 through 2023.
- Identified the 10 DDSs with the highest and lowest attrition rates, disability examiner trainee staffing levels, productivity per work year, and/or case processing times.
- Interviewed management at the 10 selected DDSs and employees from ODD's State Disability Program Administration Division in each region to obtain information related to (1) causes for staffing issues, (2) relationships between staffing, productivity, and processing times, (3) how SSA and/or DDS management tracks the effectiveness of new initiatives and if they have resulted in improvements; and (4) how SSA and/or DDS management evaluates the results of exit interviews to identify drivers for attrition. Specifically, we interviewed management teams from the following DDSs:
 - Alaska
 - Delaware
 - District of Columbia
 - Indiana
 - Kansas
 - Montana
 - New Mexico
 - Rhode Island
 - Texas
 - Vermont

We conducted our review between May 2024 and March 2025. We determined the data used for this audit were sufficiently reliable to meet our objective. The principal entity audited was SSA's ODD. We assessed the significance of internal controls necessary to satisfy the audit objective. This included an assessment of the internal control components: control environment, risk assessment, control activities, information and communication, and monitoring. In addition, we reviewed the principles of internal controls as associated with the audit objective. We identified the following components and principles as significant to the audit objective.

- Component 1: Control Environment
 - Principle 2: Exercise oversight responsibility
 - o Principle 3: Establish structure, responsibility, and authority
 - Principle 4: Demonstrate commitment to competence
 - o Principle 5: Enforce accountability
- Component 2: Risk Assessment
 - Principle 9: Identify, analyze, and respond to change
- Component 4: Monitoring
 - Principle 16: Perform monitoring activities
 - Principle 17: Evaluate issues and remediate deficiencies

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 findings and conclusions based on our audit objectives. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

Appendix C – **AGENCY COMMENTS**



MEMORANDUM

Date: July 7, 2025 Refer To: TQA-1

To: Michelle L. Anderson

Acting Inspector General

From: Chad Poist

Chief of Staff

Subject: Office of the Inspector General Draft Report, "Staffing, Productivity, and Processing Times at

State Disability Determination Services" (072309) -- INFORMATION

Thank you for the opportunity to review the draft report. We agree with the recommendations.

Please let me know if I can be of further assistance. You may direct staff inquiries to Amy Gao at (410) 966-1711.



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