

Social Security Administration
Office of the Inspector General

Semianual Report to Congress



April 1, 2020 through September 30, 2020

OIG BY THE NUMBERS

April 1, 2020 - September 30, 2020

1,126
cases opened



1,344
cases closed



\$121+ Million

investigative monetary accomplishments
(includes SSA recoveries, restitution, fines, settlements, judgments, and estimated savings)

270
convictions



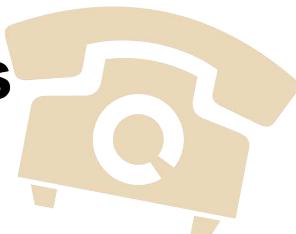
23
audit reports
issued



\$723+ Million
in questioned costs

\$580+ Million
in funds put to better use

489,636 allegations
received



16 civil monetary
penalty actions¹



\$759,544
in penalties and
assessments

1. We temporarily suspended most Civil Monetary Penalty (CMP) actions due to the impact of the Coronavirus-19 (COVID-19) pandemic. As of the end of this reporting period, we have resumed normal operations.

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A MESSAGE FROM THE INSPECTOR GENERAL

I am pleased to present this *Semiannual Report to Congress* for the period April 1, 2020 through September 30, 2020.

The last 6 months presented organizational and individual challenges as we adjusted to life during the COVID-19 pandemic. We quickly implemented workforce flexibilities, yet kept our focus on determining the safest and most effective way to return employees to the workplace when possible. This proactive approach allowed us to maintain effective oversight of Social Security Administration (SSA) programs and operations.

Despite these challenging circumstances, my top priority as Inspector General continues to be directing resources to audits, investigations, and legal initiatives that have the greatest impact on, and provide the most value to, SSA and taxpayers. That means constantly evaluating the oversight landscape to identify and address trends and emerging issues, rather than waiting until they become entrenched problems.

In consultation with the Office of Personnel Management, I am leading an effort to revise our Strategic Plan to reflect an impact-driven approach to oversight. In our first phase of this effort, during this reporting period, we created new Office of the Inspector General (OIG) mission, vision, and value statements that better define who we are as an organization, where we want to go, and how we will get there. We virtually convened leaders and staff from across the organization, solicited their ideas and expertise, and recently announced:

- Our **mission** is to serve the public through independent oversight of SSA's programs and operations;
- Our **vision** is to drive meaningful change to protect taxpayer dollars; and
- Our **values**, which describe how we will interact with each other and our stakeholders, are
 - Passion through *commitment*;
 - Excellence through *teamwork and accountability*;
 - Innovation through *agility and creativity*;
 - Professionalism through *integrity*; and
 - Inclusivity through *respect*.

Within this report, you will find highlights of our work toward these goals, and statistical accomplishments showing that our commitment to excellence in oversight has not faltered. The tireless work of the OIG's most valuable asset, its people, will continue, without fail, to improve and protect Social Security and the many people it serves across the country.



A handwritten signature in black ink that reads "Gail S. Ennis".

Gail S. Ennis
Inspector General



HIGH-IMPACT INITIATIVES

TASK FORCE PARTICIPATION

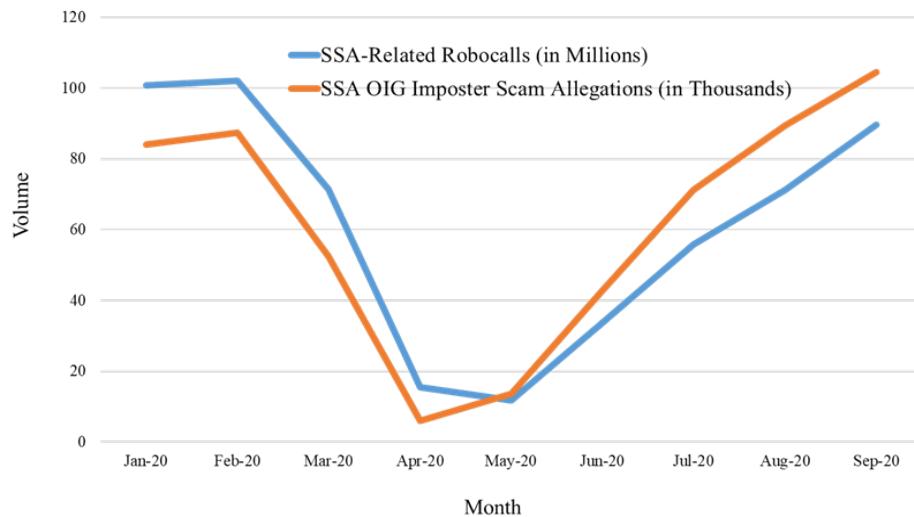
The OIG recognizes the need to have productive partnerships with Federal, State, and local law enforcement agencies to share information, address issues of overlapping jurisdiction, and combine expertise and resources. To this end, we are active participants on law enforcement task forces across the country, including the FBI's joint terrorism task forces, Homeland Security Investigations' document and benefit fraud task forces, Department of Justice's (DOJ) elder fraud task forces, and U.S. Marshals' fugitive task forces. During this reporting period, we have also joined task forces, or worked jointly with other agencies, investigating allegations of fraud related to the COVID-19 pandemic, including unemployment insurance fraud and Paycheck Protection Program fraud.

As part of the National Unemployment Insurance Fraud Task Force, we are working with the Secret Service, Department of Labor OIG, FBI, Homeland Security Investigations, IRS—Criminal Investigation, U.S. Postal Inspection Service, and Department of Homeland Security OIG, in coordination with DOJ, to investigate fraud schemes targeting the unemployment insurance programs of state workforce agencies. Fraudsters are using stolen identities to file fraudulent unemployment claims, exploiting the unprecedented expansion of these benefits provided in response to economic disruption caused by the COVID-19 pandemic. In August 2020, a task force investigation led to the [indictment](#) of a Massachusetts man on mail fraud, wire fraud, and aggravated identity theft charges, for an alleged scheme in which he made numerous false unemployment claims in his own name and others' identities.

We are also involved in investigations of Paycheck Protection Program fraud, working with the FBI, IRS-Criminal investigation, Small Business Administration OIG, and other agencies. For example, in September 2020, a joint investigation led to the [indictment and arrest](#) of an attorney in Bergen County, New Jersey, on charges of bank fraud, money laundering, and aggravated identity theft. The attorney is accused of obtaining more than \$9 million in Paycheck Protection Program loans by submitting fraudulent loan applications to four lenders on behalf of businesses that purportedly provided educational services. He allegedly fabricated the existence of hundreds of employees, manipulated bank and tax records, and falsified a driver's license on the applications.

SOCIAL SECURITY SCAM PREVENTION AND AWARENESS

During this reporting period, we saw a brief drop in Social Security-related telephone scams, followed by a steep climb for both the estimated volume of calls¹ and the number of scam allegations we received. While we cannot be certain, it is likely the volume drop of both robocalls and allegations can be attributed to the COVID-19 shutdown disrupting call center operations. The relative increase in allegations compared to robocalls beginning in April 2020 may be attributable to SSA's and the OIG's aggressive outreach efforts.



1. Estimated SSA-related robocall volume data provided by YouMail, a company providing robocall blocking services.



HIGH-IMPACT INITIATIVES

We have undertaken a multidisciplinary approach to combat these pervasive scams, pursuing scammers and their facilitators as well as increasing public awareness to prevent fraud loss. As the scams have increased over the past 6 months, we continued our efforts:

- As the result of an OIG-led investigation, the U.S. District Court for the Eastern District of New York [entered a consent decree](#) on August 26 imposing a permanent injunction against two companies that transmitted fraudulent robocalls. Those companies can no longer transmit calls into the U.S. telephone system. This action stemmed from a civil complaint filed by DOJ against five companies and their owners; a March 2020 consent decree had enjoined the other three companies from transmitting calls.
- As the result of an OIG-led investigation, a husband and wife [pleaded guilty](#) in the Northern District of Georgia on September 1 and October 6, respectively, on money laundering and conspiracy charges, accused of transmitting over \$500,000 from victims to scammers in India.
- We have issued over 50 subpoenas to “gateway carriers” identified as having a pervasive robocall issue on their Voice over Internet Protocol networks. We are warning them—and providing guidance as requested—to avoid facing CMPs for violating Section 1140 of the *Social Security Act* by facilitating the activities of those who use the name of Social Security without authorization.
- We worked with SSA and the United States Postal Inspection Service to place scam awareness posters in every U.S. Post Office, and we created a scam awareness flyer that U.S. Attorneys have distributed locally to elder services and law enforcement agencies.
- In coordination with the OIG, SSA added a Social Security-scam related message, including how to report these scams, to certain SSA envelopes and mailings. Since March 2020, SSA has mailed approximately 68 million of these to its customers.
- We issued a [Congressional Response Report](#) on May 27 to the Subcommittee on Social Security, House Committee on Ways and Means, detailing SSA’s efforts to combat the scams.

COOPERATIVE DISABILITY INVESTIGATIONS

The Cooperative Disability Investigations (CDI) Program continues to be one of our most successful anti-fraud initiatives, contributing to the integrity of the Agency's disability programs. CDI, established in 1997, combines resources and expertise from SSA, the OIG, State disability determination services (DDS), and State or local law enforcement, to investigate and deter Social Security disability fraud. CDI units investigate pre-effectuation and post-entitlement disability claims suspected of fraud; their findings assist SSA and DDS in making timely and accurate disability determinations, and may lead to prosecution.

Since inception, CDI investigations have provided evidence that led to projected savings to taxpayers of more than \$7 billion. For this reporting period, CDI investigations led to

- 687 disability claims being denied or ceased;
- \$45,645,197 in projected savings for SSA programs; and
- \$49,378,034 in projected savings for non-SSA programs.

During this reporting period, we opened new CDI units in Omaha, Nebraska; Las Vegas, Nevada; Manchester, New Hampshire; and Cheyenne, Wyoming. CDI now has 49 units covering 44 states, the District of Columbia, and the Commonwealth of Puerto Rico. It also covers the U.S. territories of Guam, American Samoa, the Northern Mariana Islands, and the U.S. Virgin Islands.

SSA and the OIG will continue to work with its State and local partners to expand CDI coverage for all 50 states by 2022, in accordance with the *Bipartisan Budget Act of 2015*.

Following are CDI case highlights for this semiannual reporting period:

- Based on a referral from the Creve Coeur, Missouri SSA hearing office, the St. Louis CDI Unit investigated a 54-year-old applicant for Supplemental Security Income (SSI) and Disability Insurance (DI) benefits. She alleged diabetes, back problems, low kidney function, vertigo, major depression, anxiety, sleep apnea, and diabetic neuropathy. Our investigation found evidence that the claimant,



HIGH-IMPACT INITIATIVES

through her appointed representative, submitted improperly altered medical source statements to qualify for SSI and DI benefits. SSA denied her claim, resulting in projected SSA savings of \$47,814 and non-SSA savings of \$77,501.

- Acting on information received from the Texas DDS, our Dallas CDI Unit investigated a 52-year-old DI beneficiary. From December 2017 to September 2019, the woman concealed her employment from SSA as a jewelry store salesperson. She pleaded guilty to theft of Government funds. In May 2020, a judge sentenced her to 36 months of probation and ordered her to repay \$46,477 to SSA.
- Our Detroit CDI Unit investigated a 45-year-old DI beneficiary whose daughter was previously investigated for exaggerating her limitations. The mother alleged needing her daughter to provide in-home services, such as non-medical personal care, cooking, and cleaning. Our investigation revealed the mother's statements made in support of her daughter's disability claim contradicted her own allegation of being dependent on the care of others. The Michigan DDS determined the mother's disability had ceased, resulting in projected SSA savings of \$54,516 and non-SSA savings of \$70,438.
- Based on a referral from the Virginia DDS, our Richmond CDI Unit investigated a 42-year-old woman who applied for DI benefits and SSI. She reported limitations in lifting, stair climbing, walking, sitting, standing, understanding, memory, concentration, following instructions, talking, completing tasks, and getting along with others. During the investigation, CDI investigators saw her driving a car and walking up stairs without the use of a cane or assistive aid. Witnesses provided statements indicating she does not use any assistive devices and gets around without difficulty. The DDS denied the woman's claim, resulting in projected SSA savings of \$47,814 and non-SSA savings of \$75,213.

FACILITATOR FRAUD INVESTIGATIONS

In recent years, we have re-focused existing resources on third-party facilitators in the disability claims process who abuse the public trust by enabling the approval of fraudulent claims. This approach maximizes our investigators' efforts—and recovery of funds for SSA—by potentially identifying dozens, hundreds, or even thousands of fraudulent claims, rather than investigating one fraudulent claim at a time. These facilitators can be involved at any stage of the disability claim and in any role, including claimant representative, translator, medical provider, or even SSA or DDS employee.

We have had several investigative successes dismantling these schemes, including the [indictments](#) of 10 individuals in St. Louis, Missouri during this semiannual reporting period. Two of those indicted, Thomas Hobbs and Viviane Carbone-Hobbs, are chiropractors who allegedly used their practice to defraud Social Security and several private health and disability insurance companies of more than \$12 million. The indictment charges the chiropractors and eight co-conspirators with conspiracy to defraud, health care fraud, and theft of Government funds. Based on a report to our fraud hotline, our investigation found evidence the chiropractors exaggerated the patients' medical conditions and ability to care for themselves in order to qualify for Social Security and private insurance disability payments. They also required their patients to undergo excessive medical treatments and diagnostic evaluations beyond what was medically necessary, to further the fraud scheme. This case remains open pending judicial action.

During this reporting period, we also issued an audit that assessed SSA's actions to improve controls over the hearings process to identify and prevent third-party facilitator fraud. The audit, [Agency Actions After the Huntington Fraud Scheme](#), provided valuable information to SSA stakeholders about the agency's increased controls to prevent ALJs from assigning cases to themselves, increased oversight of administrative law judges, and actions taken to strengthen fraud prevention in the disability claims process.



AUDIT – Highlights



23
Reports Issued



\$723,670,882
Questioned Costs



\$580,252,613
Funds Put to
Better Use

We conduct comprehensive audits and evaluations of SSA's programs and operations in order to identify opportunities for savings, better use of funds, and improvements in program management and results. For Fiscal Year (FY) 2020, we identified the following management and performance challenges for SSA, and conducted audits in these issue areas:¹

- Improve Administration of the Disability Programs - The Agency continues to face challenges with pending disability hearings and related processing times.
- Minimize Payment Errors and Improve Management of Payment Workloads - The Agency is challenged by administrative mistakes and computation errors, which are major causes of over- and underpayments.
- Improve the Prevention, Detection, and Recovery of Improper Payments - SSA needs to identify and prevent improper payments using third-party data, automation, and data analytics. Preventing improper payments is more advantageous than detecting them since additional resources are not spent in recovering the overpayments.
- Improve Service Delivery - SSA faces challenges as it pursues its mission to deliver quality services to the public, including growing workloads as experienced employees are expected to retire.
- Secure Information Systems and Protect Sensitive Data - SSA must ensure its information systems are secure and sensitive data are protected.
- Modernize Information Technology - SSA must modernize its information technology to accomplish its mission despite budget and resource constraints.

During this reporting period, we issued 23 reports (full list available in Appendix B). Of those, we include summaries below of reviews revealing significant challenges in SSA's administration of its programs and operations. Click on the title of each report to read the full text of the audit.

THE SOCIAL SECURITY ADMINISTRATION'S REJECTION OF STATE ELECTRONIC DEATH REGISTRATION REPORTS

OBJECTIVE: Assess SSA's rejection of State-submitted Electronic Death Registration (EDR) reports and determine whether these rejections resulted in (1) improperly paying deceased beneficiaries and representative payees and (2) not posting death information to the records of deceased non-beneficiaries.

FINDINGS: EDR begins when a funeral director submits a decedent's personal information to SSA's Online Verification System (OVS). Once States certify the deaths, they transmit the EDR reports to SSA. SSA rejects EDR reports that do not pass its verification tests. From November 2017 through October 2018, SSA received 2,526,496 State-submitted EDR reports and rejected 205,547 (8 percent). Of these, we reviewed 13,989 with personal information that matched SSA's records, but did not have a date of death recorded. We found SSA's rejection of these 13,989 State-submitted EDR reports resulted in SSA improperly paying an estimated \$36 million to 3,120 deceased beneficiaries and 20 deceased representative payees and not posting dates of death to the records of 10,849 deceased non-beneficiaries. We estimate identifying and correcting the missing dates of death prevented, or will prevent, approximately \$23 million in additional improper payments to deceased beneficiaries and payees over the next 12 months. Of the 13,989 rejected EDR reports, 99 percent were rejected because State

1. As FY 2020 progressed, SSA was presented with new challenges, including the onset of the COVID-19 pandemic. To address these challenges, we re-focused our list, which is available in our IG Statement on SSA's Management and Performance Challenges [will hyperlink when available in mid-November.]

AUDIT – Highlights

records did not match exactly with the most recent information in SSA's OVS file. Had States followed SSA instructions to submit EDR reports that matched exactly with the OVS file, SSA would have posted the deaths. SSA could have also prevented the improper payments had it designed the system to match the information provided against its Numident file, before it rejected EDR reports with OVS discrepancies.

RECOMMENDATIONS: We made three recommendations for SSA to reduce improper payments, correct its death records, and enhance the EDR process. SSA agreed with our recommendations.

THE SOCIAL SECURITY ADMINISTRATION'S IMPLEMENTATION OF *iPaySSA*

OBJECTIVE: To answer questions from the Subcommittee on Social Security, House Ways and Means Committee, on SSA's implementation of *iPaySSA*, specifically regarding risks and vulnerabilities, how individuals would receive confirmation that a payment was processed; and what group(s) SSA was targeting for the initial release of *iPaySSA*.

FINDINGS: The goal of *iPaySSA* was to reduce the burden and cost of SSA's manual remittance process and provide the public with a more convenient and timely method of payment. SSA planned to offer the application to approximately 260,000 individuals who:

- have only 1 overpayment;
- receive monthly installment billing notices; and
- remit payments (a) in field offices via cash, credit card, or check; (b) to a processing center by mail; or (c) by telephone via credit card.

We found SSA needed to fully consider all the risks for *iPaySSA* and implement identity verification to address all risks associated with the online application. In March 2020, the Agency hired an independent contractor to conduct a security assessment of *iPaySSA* and its infrastructure.

CONCLUSION: Based on security risks and vulnerabilities identified by our audit team and the contractor, on July 17, 2020, SSA informed the OIG that it no longer intends to implement the *iPaySSA* project. Instead, the agency is directing its efforts to providing the public with modern electronic service options, including the ability to repay overpayments securely online through the development of its modern Debt Management Product. We did not make any recommendations in this report.

MISCELLANEOUS BENEFIT SUSPENSIONS FOR OLD-AGE, SURVIVORS AND DISABILITY INSURANCE BENEFICIARIES

OBJECTIVE: Determine if SSA completed follow-up actions to resolve issues for Old Age, Survivors and Disability Insurance (OASDI) benefits withheld using the miscellaneous suspense code.

FINDINGS: We identified 2,525 beneficiaries, suspended between January 2015 and December 2018, with the miscellaneous suspense code, used when SSA does not specifically identify issues requiring resolution. SSA must contact the beneficiary, or others as needed, to determine whether to pay withheld benefits and/or to continue monthly payments. We reviewed a random sample and found that for 41 percent, SSA had not completed follow-up actions to resolve issues that caused withholding of benefits as of January 2020, resulting in almost \$748,000 withheld, for an average of 36 months. Based on those findings, we project SSA withheld approximately \$378 million from almost 21,000 beneficiaries without resolving the issues that caused the benefit suspensions. SSA does not have controls to monitor beneficiaries in miscellaneous suspense status or an oversight process to ensure employees use the miscellaneous suspense code appropriately.

RECOMMENDATIONS: We made three recommendations, to 1) resolve the remaining suspense cases we identified; 2) analyze a sample of miscellaneous suspense code cases to determine the appropriate corrective actions and consider broadening this review; and 3) implement controls to identify these cases and ensure they are resolved timely. SSA agreed with our recommendations.



AUDIT – Highlights

RETIREMENT BENEFICIARIES POTENTIALLY ELIGIBLE FOR WIDOW(ER)'S BENEFITS

OBJECTIVE: Determine if retirement beneficiaries were eligible for, but not receiving, higher widow(er)'s benefits.

FINDINGS: We identified more than 30,000 retirement beneficiaries potentially eligible for additional widow(er)'s benefits and sampled a random population of 100 beneficiaries. Of the sample, 69 were eligible for higher benefits. SSA had previously identified 20 of those persons (who filed prior to our review), but we found 49 were eligible for approximately \$630,000 in benefits but had not filed for them. Based on these findings, we estimated 15,076 beneficiaries were eligible for \$193.8 million as of September 2019, and of these, 12,615 could lose an additional \$530.9 million over their lifetimes. This occurred because SSA employees did not always assess and take action on cases when they were alerted to possible payment increases, and/or because SSA does not have processes to detect when beneficiaries may be eligible for higher widow(er)'s benefits.

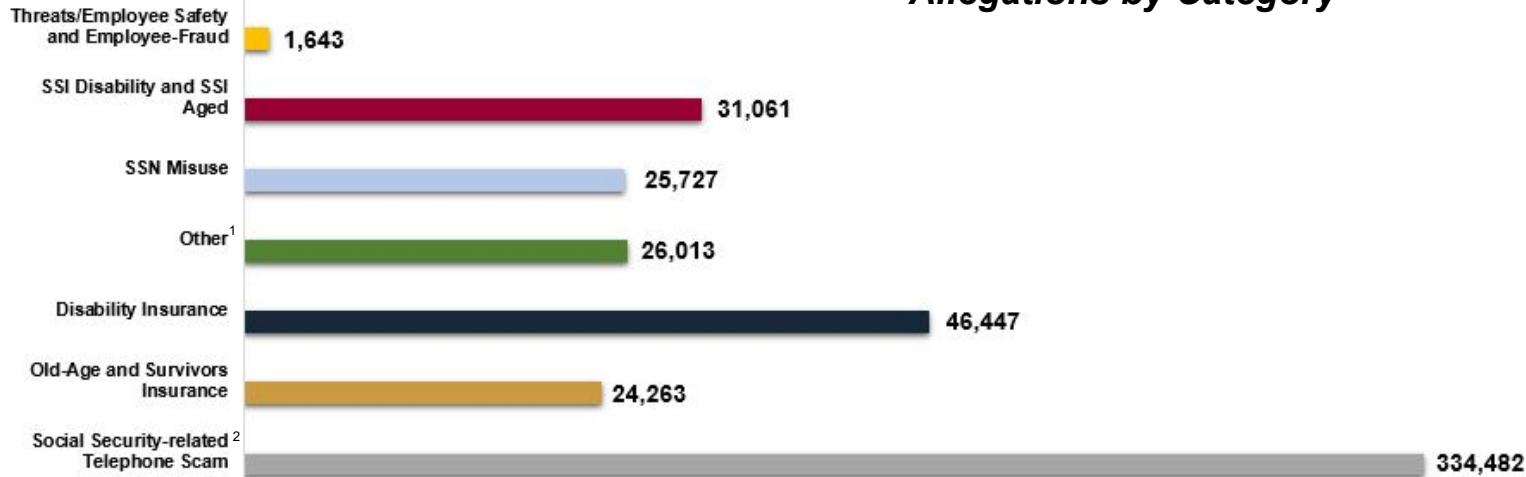
RECOMMENDATIONS: We made five recommendations to SSA to evaluate improvements needed for quality reviews, clarify instructions, and develop additional processes to identify retirement beneficiaries potentially eligible for widow(er)'s benefits. SSA agreed with our recommendations.



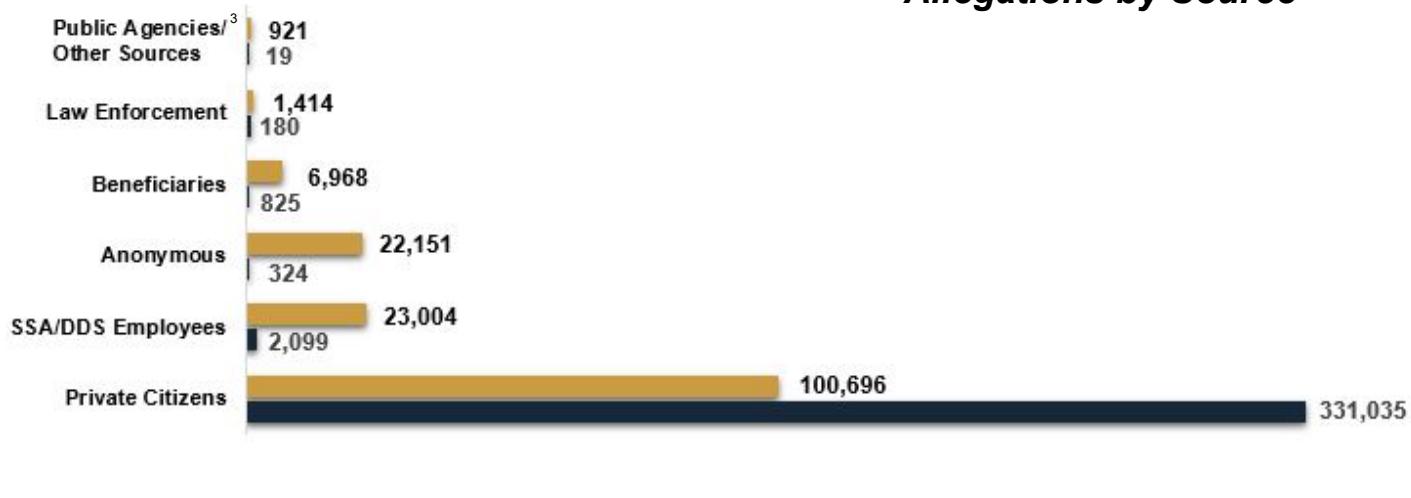
INVESTIGATIONS – Highlights

Total Allegations Received – 489,636

Allegations by Category



Allegations by Source



■ Other SSA Fraud

■ Social Security-related Telephone Scam

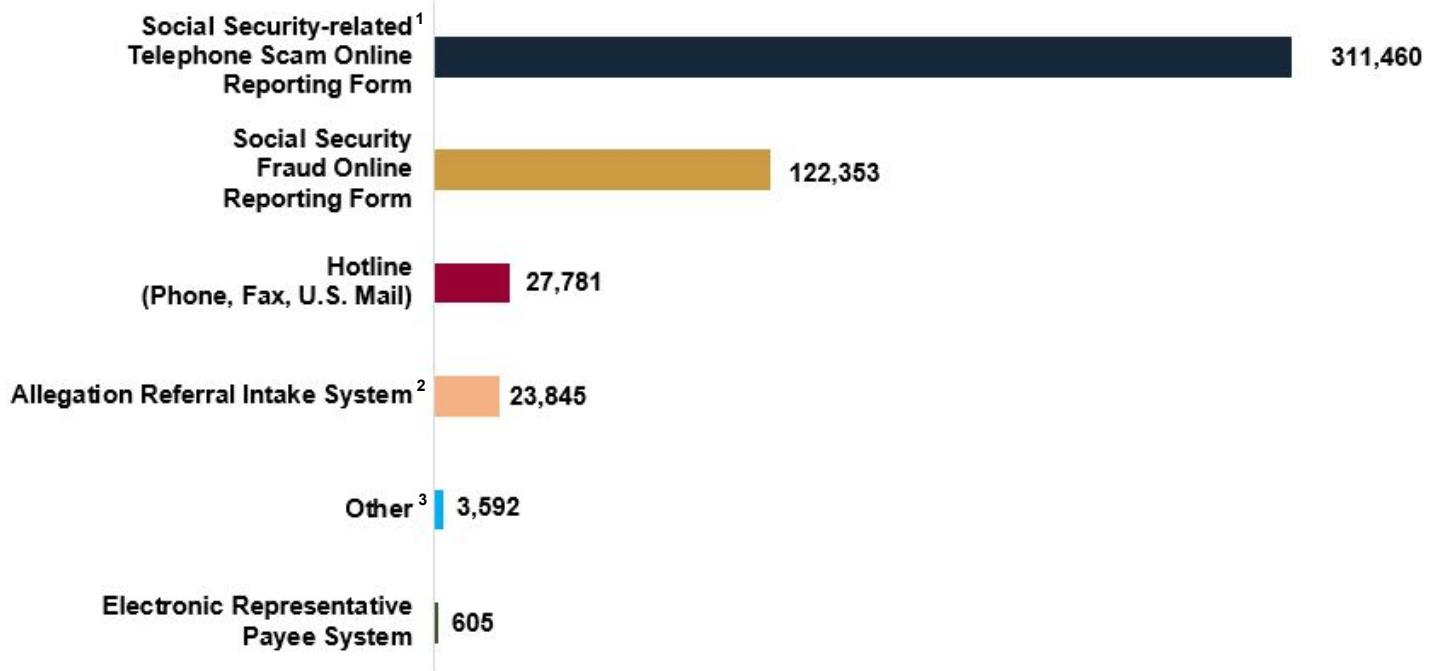
1. Most of these allegations were determined to be unrelated to fraud, waste, or abuse in SSA programs or operations.
2. Social Security-related telephone scams refer to those that misuse SSA's name to commit fraud. These are primarily telephone scams, but a small number of scams are reported to have been communicated via email, text, or U.S. Mail.
3. This includes, but is not limited to, Congress, financial institutions, contractors/grantees, employee of contractor, and employee of subject.



INVESTIGATIONS – Highlights

Total Allegations Received – 489,636

Allegations by Method



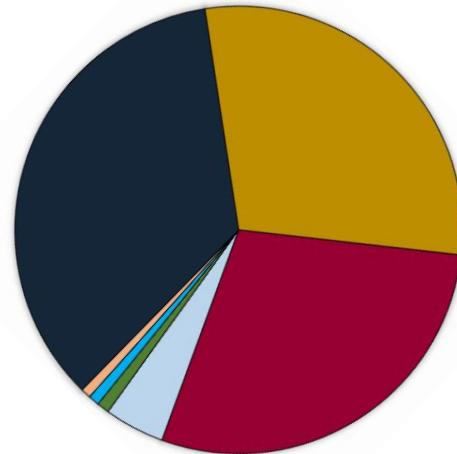
1. Social Security-related telephone scams refer to those that misuse SSA's name to commit fraud. This primarily refers to telephone scams but also includes a small number of scams reported to have been communicated via email, text, or U.S. Mail.
2. The Allegation Referral Intake System is SSA's system through which SSA and DDS employees submit allegations directly to the OIG. Employees may submit allegations in other ways, such as through the hotline, so this category does not necessarily include all employee allegations.
3. Other allegations include those entered directly into SSA OIG's National Investigative Case Management System by the Office of Investigations, received from other sources.



INVESTIGATIONS – Highlights

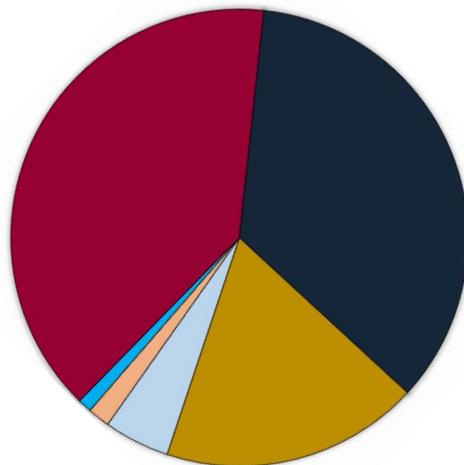
Total Cases Opened – 1,126

	Disability Insurance – 397
	Old-Age and Survivors Insurance – 329
	Supplemental Security Income – 324
	Social Security Number Misuse – 49
	Other ¹ – 10
	Employee Fraud – 9
	Employee Safety – 8



Total Cases Closed – 1,344

	Supplemental Security Income – 526
	Disability Insurance – 469
	Old-Age and Survivors Insurance – 244
	Social Security Number Misuse – 62
	Employee Safety – 21
	Employee Fraud – 13
	Other ¹ – 9



1. Category includes investigations representing less than 2 percent of total; for example, false personation and other issues unrelated to SSA's programs or operations.



INVESTIGATIONS – Highlights

Investigative Achievements



807
Investigative Reports
Issued¹



377
Persons Referred
to DOJ for Criminal
Prosecution²



45
Persons Referred to State and
Local Prosecuting Authorities
for Criminal Prosecution³



270
Convictions



241
Indictments and Criminal
Informations⁴



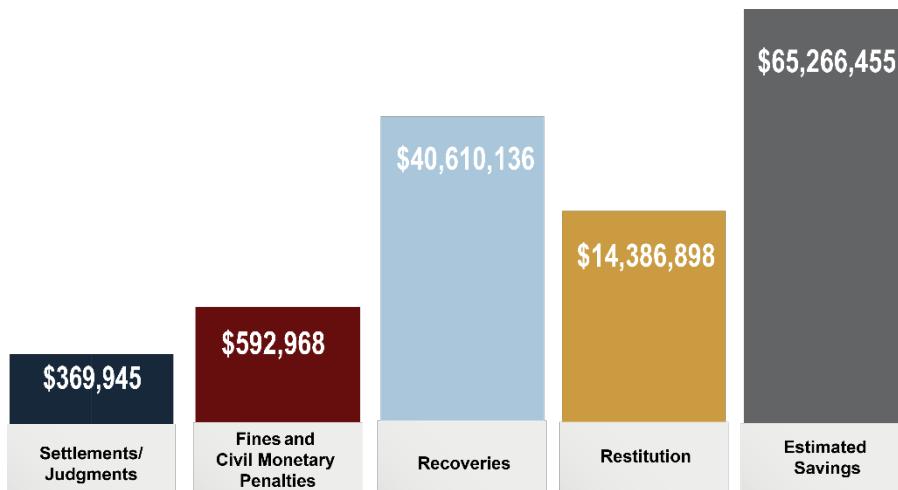
1,023
Total Number of
Administrative Actions⁵



876
Total Number of Subjects
with an Administrative
Action

Investigative Monetary Accomplishments

TOTAL - \$121,226,402



1. Total number of summary reports of investigative findings issued externally by the Office of Investigations, including prosecution referrals, reports of employee investigation, reports of special investigation, and CDI reports of findings.
2. Total number of individual subjects or entities referred to the DOJ where the investigative findings were not subject to pre-established prosecution declination guidelines.
3. Total number of individual subjects or entities referred to State and local prosecuting authorities where the investigative findings were not subject to pre-established prosecution declination guidelines. These persons may also have been referred to DOJ.
4. Total number of initial indictment or criminal information filings per subject. Subsequent or superseding indictments or criminal informations related to the same subject are not included.
5. Administrative actions includes benefits terminated, claims denied, administrative recovery, reduction in SSA benefits, removal of representative payee, and benefits suspended.

INVESTIGATIONS – Highlights

The OIG's Office of Investigations is responsible for evaluating and taking appropriate investigative action on allegations of fraud and misconduct in SSA's benefit programs and agency operations, in coordination with DOJ and State or local prosecutors. Our investigations may result in criminal or civil prosecution, CMPs, or agency administrative actions. Following are major categories of OIG investigations and highlights of cases from this reporting period that have helped ensure the integrity of the Social Security system.

DISABILITY INSURANCE FRAUD

This type of fraud historically comprises a significant part of our investigative workload. DI fraud includes, among other activities, concealing work activity or medical improvement while receiving disability benefits, representative payee misuse, and deceased payee fraud. Following are significant DI fraud case highlights from the past 6 months.

PRESCHOOL OWNER HIDES BUSINESS FROM SSA

Investigators in our Phoenix, Arizona office received a referral from the Apache Junction, Arizona SSA office about a 56-year-old DI beneficiary. Our investigation found evidence the man concealed from SSA that he was the owner and operator of a preschool. From December 2006 to September 2015, he fraudulently received DI benefits when he was not eligible for them. As a result of our investigation, the man pleaded guilty to theft, and in May 2020, he was sentenced to 7 years of probation and ordered to repay \$308,693 to SSA.

FATHER STEALS BENEFITS INTENDED FOR HIS CHILD

Based on a referral to our fraud hotline, our Clearwater, Florida office investigated a 47-year-old representative payee, responsible for his minor child's DI benefits. From November 2012 through December 2015, he provided false information to SSA to receive and convert the benefits to his own use, while the child was in the mother's care and custody. He pleaded guilty to theft of Government funds and making false statements. In September 2020, he was sentenced to 3 months of incarceration and 3 years of supervised release. He was also ordered to repay \$36,374 to SSA.

SUPPLEMENTAL SECURITY INCOME FRAUD

SSI is a needs-based program, and we work to ensure that only those who are truly eligible for these critical benefits receive them. Eligibility for SSI primarily relies on self-reporting many factors including earnings, assets, resources, marital status, residency, and living arrangements, among others. We investigate allegations of many types of SSI fraud, including when someone conceals a marriage, real estate, or their true country of residence from SSA while receiving SSI payments. Following are significant SSI fraud case highlights from the past 6 months.

COUPLE CONCEALED PROPERTY TO RECEIVE SSI FOR OVER 35 YEARS

Based on a referral from the Chula Vista, California SSA office, our San Diego, California office investigated a married couple receiving SSI. We found evidence the husband and wife concealed owning real property in Mexico to continue receiving SSI and Medicaid from about March 1992 to October 2018. As a result of our investigation, the husband pleaded guilty to making false statements and the wife pleaded guilty to theft of Government funds. In July 2020, the husband was sentenced to 3 years of probation and ordered to repay \$54,173 to SSA and \$15,095 to the California Department of Health Care Services. Also in July 2020, the wife was sentenced to 5 years of probation and ordered to repay \$204,441 to SSA and \$10,634 to the California Department of Health Care Services.



INVESTIGATIONS – Highlights

MAN MAKES FALSE STATEMENTS TO RECEIVE GOVERNMENT BENEFITS FOR OVER 16 YEARS

A referral from the Moore, Oklahoma SSA office led our Oklahoma City office, jointly with the U.S. Department of Agriculture (USDA) OIG, to investigate a 56-year-old SSI recipient. For over 16 years from September 2002 to November 2018, the man repeatedly made false statements to SSA and the Oklahoma Department of Human Services about his living arrangements and resources to receive SSI and Supplemental Nutrition Assistance Program benefits. As a result of our investigation, the man pleaded guilty to Social Security fraud. In July 2020, he was sentenced to 12 months and 1 day of incarceration and 3 years of supervised release. He was also ordered to repay \$98,933 to SSA and \$29,085 to USDA.

RETIREMENT AND SURVIVORS INSURANCE FRAUD

These investigations pertain primarily to Retirement and Survivors Insurance (RSI) benefits, including deceased payee fraud, representative payee misuse, false statements about marital or parental status in applying for survivors benefits, and other related types of fraud. Following are significant case highlights in this category from the past 6 months.

MAN STEALS DECEASED MOTHER'S RETIREMENT BENEFITS

Based on a referral from a Cincinnati, Ohio SSA office as part of the agency's Medicare Non-Utilization Project, our Atlanta, Georgia office investigated the 61-year old son of an RSI beneficiary. Following his mother's death in 1997 he continued to receive and use the benefits disbursed for his mother. As a result of our investigation, he pleaded guilty to theft of government funds. In August 2020, he was sentenced to 16 months of incarceration and 3 years of supervised release, and was ordered to repay \$267,933 to SSA.

SON STEALS DECEASED MOTHER'S RETIREMENT BENEFITS

Based on a referral from our Office of Audit, our Clearwater, Florida office investigated the 54-year-old son of an RSI beneficiary. Following his mother's death in 2009, the man continued to receive and use the benefits disbursed for his mother. As a result of our investigation, he pleaded guilty to theft of government funds. In June 2020, the man was sentenced to 6 months of incarceration and 3 years of supervised release. He was also ordered to repay \$75,984 to SSA.

SOCIAL SECURITY NUMBER MISUSE

The OIG works to ensure the integrity of SSNs, as SSA depends on them to post earnings to individuals' records accurately and calculate earned benefits. SSNs are used by not only SSA but also other agencies and entities, so we often investigate their misuse jointly with other agencies. We are authorized to investigate any situation in which a person misuses an SSN, whether it be for unauthorized work, obtaining a loan, applying for a government benefit, or any other purpose. Following are SSN misuse case highlights for the past 6 months.

NICARAGUAN NATIONAL USES STOLEN IDENTITY TO APPLY FOR BENEFITS

Based on information provided by the Norfolk, Virginia SSA office, our Omaha, Nebraska office, jointly with the Department of State's Diplomatic Security Service, investigated a 59-year old Nicaraguan national. The investigation found evidence the woman used the personal information of a United States citizen to obtain a U.S. passport and to apply unsuccessfully for Social Security benefits. As the result of the investigation, she pleaded guilty to passport fraud and fraudulent use of an SSN, and in August 2020, she was sentenced to 15 months of incarceration.



INVESTIGATIONS – Highlights

DOMINICAN NATIONAL USES STOLEN IDENTITY TO OBTAIN BENEFITS AND SERVICES

As part of a Homeland Security Investigations Document and Benefit Fraud Task Force, our Boston, Massachusetts office participated in a joint investigation of a 44-year-old Dominican Republic national. The man misused the personal information of a U.S. citizen to fraudulently obtain Medicaid, unemployment benefits, medical services, and utility services. As a result of the task force investigation, the man pleaded guilty to misuse of a Social Security number, aggravated identity theft, and making false statements relating to healthcare matters. In April 2020, he was sentenced to 24 months and 1 day of incarceration and 2 years of supervised release. He was also ordered to repay \$3,724 to the MassHealth Medicaid program, \$8,949 to the Massachusetts Department of Unemployment Assistance, and \$4,552 to various medical providers and utility companies.

EMPLOYEE SAFETY

Employee safety is of paramount concern to SSA and its OIG. We share responsibility for investigating reports of threats or use of force against SSA employees with the Department of Homeland Security's Federal Protective Service, and with local law enforcement if the activity occurs off federally owned or leased property. Following are employee safety case highlights from the past 6 months.

MAN THREATENS TO HARM ADMINISTRATIVE LAW JUDGE AND SSA EMPLOYEES

Based on a referral from the SSA Office of Hearing Operations, our Portland, Oregon office worked jointly with the Federal Bureau of Investigation and the Federal Protective Service to investigate a 47-year-old SSI applicant. The man displayed threatening behavior at a hearing before an administrative law judge. Later, he threatened to shoot SSA employees at a future hearing. As a result of the joint investigation, the man pleaded guilty to attempting to interfere with the administration of the *Social Security Act*. In June 2020, a judge sentenced him to 57 months of probation.

MAN CONVICTED OF MAKING THREAT AGAINST SSA EMPLOYEE

Based on a referral from, and working jointly with, the Federal Protective Service, our Omaha, Nebraska office investigated a 37-year-old SSI recipient. Investigators found that during a telephone interview, the man threatened to harm an SSA employee. As a result of the joint investigation, the man pleaded guilty to making threats against an SSA official. In May 2020, he was sentenced to 5 months of incarceration followed by 1 year of supervised release.

EMPLOYEE FRAUD

Public integrity investigations are critical to ensuring we maintain the public trust in the Social Security system. We must take swift action concerning allegations against employees who may have misused their position for personal gain or violated other laws or regulations in the performance of their official duties. Following is an employee fraud case highlight from the past 6 months.

SSA EMPLOYEE STEALS BENEFITS FROM DISABLED MINOR CHILDREN

Based on a referral from the SSA New York Region, Center for Automation, Security, and Integrity, our Albany, New York office investigated an SSA claims specialist. Our investigation found evidence the employee misused SSA's systems to misdirect SSI payments intended for two disabled minor children to her own bank account. As a result of our investigation, the employee pleaded guilty to theft of Government funds and identity fraud. In September 2020, she was sentenced to 1 year of probation and was ordered to repay \$3,309 to SSA.



LEGAL – Highlights



10

Section 1129
Cases Resolved



\$584,544
Section 1129
Penalties and
Assessments
Imposed



6

Section 1140
Cases Resolved



\$175,000
Section 1140
Penalties and
Assessments
Imposed

SSA's CMP program, delegated to the OIG, allows the IG to impose CMPs for certain violations of the *Social Security Act*. The CMP program permits the OIG to maximize our enforcement impact by creating an effective administrative enforcement alternative when criminal or civil prosecution is not available.

Section 1140 of the Social Security Act, as amended, is a consumer protection tool that prohibits, in part, people and companies from misleading consumers by giving a false impression of an official association with, or endorsement by SSA, when communicating with the public. We are authorized to impose penalties of up to \$10,705 for each misleading communication. When the violation is in the form of a broadcast, the imposed penalties may be up to \$53,524 per broadcast. Our Section 1140 program focuses on consumer protection through prevention, early intervention and enforcement. In addition, because Section 1140 is consumer protection focused, we continued our Section 1140 enforcement efforts uninterrupted during the COVID-19 pandemic.

During this reporting period, we continued utilizing Section 1140 in our prevention and early intervention efforts to combat Social Security-related telephone scam calls. We identify and issue notices to telecom companies that allow imposter phone calls originating internationally to pass into the United States through their networks. The notices include information about Section 1140 and inform the companies that allowing customers to utilize their services to conduct SSA imposter phone calls could be subjected to Section 1140 action. Some of the companies contacted during this period have reached out to us to discuss measures to proactively detect and prevent fraudulent phone calls. One of the carriers, upon receiving our notice, terminated relationships with 8 customers that had collectively passed over 27 million imposter calls in 1 day, while another company completely stopped engaging in this type of business.

Our Section 1140 enforcement efforts this period also included imposing a \$175,000 penalty against a marketing company. The OIG asserted that the company's use, along with 16 of its customers, of the protected words "Social Security" on the return envelopes of business reply mailers was misleading. Without admitting that it violated the law, the company agreed to pay a \$175,000 penalty. We previously settled a similar claim against one of the 16 customers, whereby the customer agreed to pay a \$98,000 penalty, and we are working to resolve claims against the remaining 15 customers.

Section 1129 of the Social Security Act, as amended, authorizes a CMP against anyone who: makes false statements to SSA, or knowingly withholds material facts from SSA, to obtain or retain benefits or payments under Titles II, VIII, or XVI of the *Social Security Act*; or wrongfully converts a beneficiary's payments while acting as a representative payee. Our authority permits us to impose penalties of up to \$8,606 for each false statement, representation, omission, or conversion. Violators may also be subject to an assessment, in lieu of damages, of up to twice the amount of a resulting overpayment or conversion. Recognizing that Americans were facing significant health and economic challenges due to the COVID-19 pandemic, we suspended Section 1129 CMP actions in most instances during the reporting period. Only those cases already in process prior to the onset of the pandemic, or, where an individual communicated he or she wanted to settle a CMP matter, were resolved during the past 6 months. However, we continued developing Section 1129 cases, and we have now resumed normal operations.

APPENDICES

REPORTING REQUIREMENTS

This report meets the requirements of the *Inspector General Act of 1978*, as amended, and includes information mandated by Congress.

	Requirement	Page(s)
4(a)(2)	Review of legislation and regulations	45
5(a)(1)	Significant problems, abuses, and deficiencies	8,11
5(a)(2)	Recommendations concerning significant problems, abuses, and deficiencies	8
5(a)(3)	Recommendations described in previous Semiannual Reports on which corrective actions are incomplete	27, 31
5(a)(4)	Matters referred to prosecutive authorities and the prosecutions and convictions that have resulted	14
5(a)(5), 6(b)(2)	Summary of instances where information was refused	26
5(a)(6)	List of audits	24
5(a)(7)	Summary of significant reports	8
5(a)(8)	Table showing the total number of audit reports and total dollar value of questioned costs	25
5(a)(9)	Table showing the total number of audit reports and total dollar value of funds put to better use	25
5(a)(10)	Summary of unresolved reports	34
5(a)(11)	Significant management decisions that were revised during the reporting period	26
5(a)(12)	Significant management decisions with which the Inspector General disagrees	26
5(a)(13)	Information described under section 804(b) of the <i>Federal Financial Management Improvement Act of 1996</i>	43
5(a)(14)	The results of any peer review conducted by another Office of Inspector General during the reporting period	44
5(a)(15)	List of any outstanding recommendations from any peer review conducted by another Office of Inspector General that have not been fully implemented, including a statement describing the status of the implementation and why implementation is not complete	44
5(a)(16)	List of any peer reviews conducted by the Inspector General of another Office of the Inspector General during the reporting period, including a list of any outstanding recommendations made from any previous peer review (including any peer review conducted before the reporting period) that remain outstanding or have not been fully implemented	44



REPORTING REQUIREMENTS

	Requirement	Page(s)
5(a)(17), (18)	Table showing total number of investigative reports issued	42
5(a)(19)	Detailed report on each investigation involving a senior Government employee where allegations of misconduct were substantiated	46
5(a)(20)	Detailed description of any instances of whistleblower retaliation	48
5(a)(21)	Description of any attempt by the establishment to interfere with the independence of the Office of the Inspector General	47
5(a)(22)	Description of any audits or investigations that were not disclosed to the public	42



APPENDIX A: RESOLVING AUDIT RECOMMENDATIONS

Questioned costs include Social Security Administration (SSA) expenditures that we determined, based on our audits: violated a provision of a law, regulation, contract, grant, cooperative agreement, or other agreement or document governing the expenditure of funds; were not supported by adequate documentation; or were unnecessary or unreasonable. Disallowed costs are those questioned costs that SSA management has sustained or agreed should not be charged to the Government.

Section 5(a)(8) of the *Inspector General Act of 1978*, as amended, requires that we provide statistical tables showing the total number of audit reports, inspection reports, and evaluation reports and the total dollar value of questioned costs (including a separate category for the dollar value of unsupported costs), for reports—

- A. for which no management decision had been made by the commencement of the reporting period;
- B. which were issued during the reporting period;
- C. for which a management decision was made during the reporting period, including—
 - i. the dollar value of disallowed costs; and
 - ii. the dollar value of costs not disallowed; and
- D. for which no management decision had been made by the end of the reporting period.

Reports with Questioned Costs for the Reporting Period April 1, 2020 through September 30, 2020

	Number of Reports	Dollar Value Supported	Dollar Value Unsupported
A. For which no management decision had been made by the commencement of the reporting period.	32	\$3,700,990,274	\$0
B. Which were issued during the reporting period. ¹	8	\$723,670,882	\$0
Subtotal (A + B)	40	\$4,424,661,156	\$0
Less:			
C. For which a management decision was made during the reporting period.			
i. Dollar value of disallowed costs. ²	4	\$396,120,863	\$0
ii. Dollar value of costs not disallowed. ¹	4	\$101,768,676	\$0
Subtotal (i + ii)	8	\$497,889,539	\$0
D. For which no management decision had been made by the end of the reporting period.	36	\$3,926,771,617	\$0

1. See Reports with Questioned Costs in Appendix B of this report.
2. Some reports have multiple monetary recommendations and are accounted for as follows: One report has two recommendations with one recorded in section Ci and the other recorded in section D. One report has one recommendation split between sections Ci and Cii. Two reports have one recommendation recorded in section Cii and the other is recorded in section D.



APPENDIX A: RESOLVING AUDIT RECOMMENDATIONS

When SSA avoids costs by implementing our recommendations, those funds may be put to better use. Section 5(a)(9) of the *Inspector General Act of 1978*, as amended, requires that we provide statistical tables showing the total number of audit reports, inspection reports, and evaluation reports, and the dollar value of recommendations that funds be put to better use by management, for reports—

- A. for which no management decision had been made by the commencement of the reporting period;
- B. which were issued during the reporting period;
- C. for which a management decision was made during the reporting period, including—
 - i. the dollar value of costs agreed to by management; and
 - ii. the dollar value of costs not agreed to by management; and
- D. for which no management decision had been made by the end of the reporting period.

Reports with Funds Put to Better Use April 1, 2020 through September 30, 2020

	Number of Reports	Dollar Value
A. For which no management decision had been made by the commencement of the reporting period.	14	\$1,818,787,430
B. Which were issued during the reporting period.¹	6	\$580,252,613
Subtotal (A + B)	20	\$2,399,040,043
Less:		
C. For which a management decision was made during the reporting period.		
i. Dollar value of costs agreed to by management. ²	3	\$129,373,473
ii. Dollar value of costs not agreed to by management. ¹	3	\$28,195,116
Subtotal (i + ii)	6	\$157,568,589
D. For which no management decision had been made by the end of the reporting period.	15	\$2,241,471,454

1. See Reports with Funds Put to Better Use in Appendix B of this report.
2. One report has one recommendation split between sections Ci and Cii.



APPENDIX B: AUDIT REPORTS ISSUED

Reports with Non-Monetary Findings
April 1, 2020 – September 30, 2020

Report Title	Report Number	Issue Date
Single Audit of the State of Tennessee for the Fiscal Year Ended June 30, 2019	A-77-20-00003	4/21/2020
Single Audit of the State of Indiana for the Fiscal Year Ended June 30, 2019	A-77-20-00004	4/30/2020
Single Audit of the State of Florida for the Fiscal Year Ended June 30, 2019	A-77-20-00005	5/5/2020
The Social Security Administration's Compliance with the Improper Payments Elimination and Recovery Improvement Act of 2012 in the Fiscal Year 2019 Agency Financial Report	A-15-19-50842	5/11/2020
Single Audit of the State of Texas for the Fiscal Year Ended August 31, 2019	A-77-20-00006	5/12/2020
Single Audit of the State of Minnesota for the Fiscal Year Ended June 30, 2019	A-77-20-00007	5/12/2020
The Social Security Administration's Telephone Services (Congressional Response Report)	A-05-20-50899	5/15/2020
The Social Security Administration's Response to Telephone Imposter Scams (Congressional Response Report)	A-02-20-50904	5/27/2020
Single Audit of the State of Oklahoma for the Fiscal Year Ended June 30, 2019	A-77-20-00008	6/15/2020
The Social Security Administration's Reconsideration Level of Appeal	A-01-19-50762	6/22/2020
The Social Security Administration's Field Office Customer Service (Congressional Response Report)	A-08-20-50898	7/14/2020
The Social Security Administration's Implementation of iPaySSA (Congressional Response Report)	A-14-19-50893	7/30/2020
Assignment of Nonwork Social Security Numbers	A-08-18-50500	8/7/2020
Agency Actions After the Huntington Fraud Scheme	A-12-19-50883	9/10/2020



APPENDIX B: AUDIT REPORTS ISSUED

Reports with Questioned Costs April 1, 2020 – September 30, 2020

Report Title	Report Number	Issue Date	Dollar Value
Agency Processing of Duplicate Payment Detection Alerts	A-05-19-50796	5/6/2020	\$37,993,520
Retirement Beneficiaries Potentially Eligible for Widow(er)'s Benefits	A-13-13-23109	6/9/2020	\$193,832,554
Match of New Hampshire and Vermont Death Information Against Social Security Administration Records	A-01-19-50865	6/22/2020	\$1,683,757
Match of Oklahoma Death Information Against Social Security Administration Records	A-06-18-50769	7/17/2020	\$11,240,709
Accuracy of Supplemental Security Income Recipients' Reports of Separation	A-02-14-31417	7/30/2020	\$68,600,000
Match of Kentucky Death Information Against Social Security Administration Records	A-04-19-50815	9/15/2020	\$2,448,493
Miscellaneous Benefit Suspensions for Old-Age, Survivors and Disability Insurance Beneficiaries	A-07-19-50799	9/21/2020	\$377,577,400
The Social Security Administration's Rejection of State Electronic Death Registration Reports	A-08-18-50499	9/21/2020	\$30,294,449
TOTAL			\$723,670,882

Reports with Funds Put to Better Use April 1, 2020 – September 30, 2020

Report Title	Report Number	Issue Date	Dollar Value
Retirement Beneficiaries Potentially Eligible for Widow(er)'s Benefits	A-13-13-23109	6/9/2020	\$530,935,069
The Social Security Administration's Actions to Resolve Potentially Fraudulent Internet Claims	A-09-18-50603	6/11/2020	\$22,083,797
Match of New Hampshire and Vermont Death Information Against Social Security Administration Records	A-01-19-50865	6/22/2020	\$322,814
Match of Oklahoma Death Information Against Social Security Administration Records	A-06-18-50769	7/17/2020	\$3,475,412
Match of Kentucky Death Information Against Social Security Administration Records	A-04-19-50815	9/15/2020	\$346,566
The Social Security Administration's Rejection of State Electronic Death Registration Reports	A-08-18-50499	9/21/2020	\$23,088,955
TOTAL			\$580,252,613



APPENDIX C

SIGNIFICANT MANAGEMENT DECISIONS WITH WHICH THE INSPECTOR GENERAL DISAGREES

Nothing to report.

SIGNIFICANT MANAGEMENT DECISIONS THAT WERE REVISED DURING THE REPORTING PERIOD

Nothing to report.

SUMMARY OF INSTANCES WHERE INFORMATION WAS REFUSED

Nothing to report.



APPENDIX D: SIGNIFICANT MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

28

Total Unimplemented Significant Monetary Recommendations Fiscal Years 2016 – 2019 **\$3,272,025,521**

Report Title	Report Number, Issue Date	Dollar Value(s)	Unimplemented Recommendation
FY 2019			
Old-Age, Survivors and Disability Insurance Beneficiaries with Overpayments on Suspended and Terminated Records	A-07-18-50317, 9/25/19	\$17,976,178 Questioned Costs	Recommendation 2: Establish a process to identify overpayments that exist on suspended or terminated Social Security numbers (SSN) that the Re-entitled Beneficiaries process does not detect, so the Agency can transfer and recover them via benefit withholding.
Overpayments Pending Collection for Miscellaneous Reasons	A-04-18-50546, 9/24/19	\$33,673,719 Questioned Costs	Recommendation 2: Identify and resolve all debtors with a miscellaneous due process status for longer than 1 year.
The Social Security Administration's Accounting for, and Monitoring of, Court-ordered Restitutions	A-04-18-50633, 9/24/19	\$6,734,317 Funds Put to Better Use	Recommendation 2: Use the reconciled list, mentioned in recommendation 1, to ensure the Department of Justice (DOJ) is collecting the court-ordered restitutions, and if not being collected, use all methods of recovery and/or contact DOJ, as required by policy, to determine whether civil actions should be taken.
Dedicated Account Underpayments Payable to Children Receiving Supplemental Security Income	A-04-18-50607, 9/17/19	\$65,223,112 Questioned Costs	Recommendation 2: Identify and take corrective action on the remaining population of Supplemental Security Income (SSI) recipients with unpaid dedicated account underpayments.
Follow-up: Minor Children Receiving Social Security Benefits Without a Representative Payee	A-13-17-50169, 6/6/19	\$22,499,184 Funds Put to Better Use	



APPENDIX D: SIGNIFICANT MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

Recommendation 2: Implement a process to periodically identify all children under age 17 and 5 months being paid directly; and determine and document whether the Agency needs to appoint representative payees.

[Recovery of Old-Age, Survivors and Disability Insurance Overpayments When a Contingently Liable Beneficiary Stops Receiving Benefits](#)

A-04-18-50651, 5/15/19

\$15,101,940 Questioned Costs

Recommendation 2: Review and take action to remove the overpayment balance from the 4,690 terminated contingently liable beneficiaries and transfer the debt balance to the original debtor for an immediate payment of the overpayment or seek recovery through additional debt collection tools.

[The Social Security Administration's Application of Due- process Provisions for Old-Age, Survivors and Disability Insurance Overpayments](#)

A-07-18-50622, 3/29/19

\$144,322,321 Questioned Costs

\$259,024,702 Funds Put to Better Use

Recommendation 2: Improve its alert and quality review processes for overpayments requiring manual notices to ensure notices are complete, accurate, and sent timely.

Recommendation 3: Revise systems programming to ensure automated overpayment notices contain all required due-process language.

[Processing of Deferred Old-Age, Survivors and Disability Insurance Cases with a High Risk of Benefit Payment Error](#)

A-05-18-50620, 3/15/19

\$39,514,050 Questioned Costs

Recommendation 3: Review the population of deferred Old-Age, Survivors and Disability Insurance (OASDI) cases we identified to assess whether additional cases need correction.

[Accuracy of Disability Entitlement Dates for Primary Beneficiaries Who Previously Filed Disability Claims](#)

A-07-18-50257, 12/21/18

\$376,918,787 Questioned Costs

\$279,264,694 Funds Put to Better Use

Recommendation 4: Determine whether SSA needs to review additional beneficiaries who had prior Disability Insurance (DI) Benefits filings and may have incorrect entitlement dates.

FY 2018

[Accuracy of the Determination of Workers' Compensation Offset During Disability Insurance Claims Processing](#)

A-02-14-34090, 9/25/18

\$33,820,756 Questioned Costs

Recommendation 2: Determine whether the Social Security Administration (SSA) should review additional cases in the population of DI beneficiaries who filed or intended to file for Workers' Compensation/Public Disability Benefit offset.

[Interim Benefits Paid After a Disability Claim is Denied](#)

A-02-18-50543, 9/13/18

\$2,142,834 Questioned Costs

Recommendation 1: Review and take appropriate actions to correct the cases we determined were not accurately processed.



APPENDIX D: SIGNIFICANT MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

[Representative Payee Criminal Bar Policy](#)

A-13-18-50154, 8/31/18

\$13,730,931 Funds Put To Better Use

Recommendation 1: Determine if it should review the 4,856 payees we identified in its efforts to comply with the *Strengthening Protections for Social Security Beneficiaries Act of 2018*.

[The Social Security Administration's Use of Administrative Tolerance Waivers](#)

A-04-16-50145, 8/1/18

\$12,568,202 Questioned Costs

Recommendation 1: Establish controls in the new Debt Management Product, as part of its Debt Management modernization initiative, that ensure technicians can only use the administrative tolerance waiver for overpayments allowable under the provision.

[Accuracy of Month of Entitlement Determinations for Supplemental Security Income Recipients Awarded Old-Age, Survivors and Disability Insurance Benefits](#)

A-08-18-50582, 7/27/18

\$135,712,356 Questioned Costs

\$463,395,260 Funds Put To Better Use

Recommendation 1: Evaluate, as part of information technology modernization efforts, the feasibility of new systems controls to help ensure that SSA establishes the earliest OASDI Month of Entitlement for SSI recipients.

[Old-Age, Survivors and Disability Insurance Debtors Who Were Not Current on an Installment Agreement](#)

A-04-18-50265, 5/25/18

\$88,295,888 Questioned Costs

Recommendation 1: Review the 12,269 delinquent debtor records and take action, where appropriate, to begin benefit adjustment or recovery using its external collection tools.

[Manual Adjustments to Old-Age, Survivors and Disability Insurance Overpayments](#)

A-07-18-50294, 4/9/18

\$72,729,487 Questioned Costs

\$275,994,019 Funds Put To Better Use

Recommendation 2: Determine the cost-effectiveness of reviewing additional manually adjusted overpayments that may need correction, focusing on overpayments adjusted by greater than \$20,000 to target larger dollar errors.

[Higher Benefits for Dually Entitled Widow\(er\)s Had They Delayed Applying for Retirement Benefits](#)

A-09-18-50559, 2/14/18

\$131,817,936 Questioned Costs

\$9,847,464 Funds Put To Better Use

Recommendation 1: Take action, as appropriate, for the 41 beneficiaries identified by our audit.

Recommendation 2: Evaluate the results for the 41 beneficiaries in our sample and determine whether SSA should review the remaining population of 13,514 beneficiaries.

[Old-Age, Survivors and Disability Insurance Benefits to Individuals Removed from the United States](#)

A-13-17-34105, 12/29/17

\$2,803,833 Questioned Costs

Recommendation 2: Take action, if appropriate, on the remaining 1,746 beneficiaries we identified who were still receiving benefits.



APPENDIX D: SIGNIFICANT MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

The Cost-effectiveness of Vocational Rehabilitation Services

A-02-17-14048, 10/20/17

\$94,883,352 Questioned Costs

Recommendation 1: Determine whether the Agency should revise how it determines whether vocational rehabilitation services led to Social Security DI trust and/or the SSI general revenue fund savings before reimbursing vocational rehabilitation costs.

FY 2017

Widow(er)s Eligible for an Earlier Initial Month of Entitlement

A-09-17-50187, 8/7/17

\$285,191,557 Questioned Costs

Recommendation 2: Determine the feasibility of reviewing the remaining population of widow(er)s who may be eligible for additional months of benefits before their application filing date and could have chosen an earlier initial month of entitlement.

Cross-referred Social Security Numbers

A-06-13-23091, 7/17/17

\$170,621,570 Questioned Costs

\$21,179,350 Funds Put To Better Use

Recommendation 1: Review all cases where numberholders (NH) simultaneously receive benefit payments under cross-referred SSNs.

Recommendation 4: Review all cases where NHs received payments under SSNs that are cross-referred to SSNs that contain the NH's death information.

Manually Reduced Cross-program Recovery Overpayments

A-06-17-50225, 7/5/17

\$7,029,192 Funds Put To Better Use

\$58,159,028 Questioned Costs

Recommendation 1: Consider the cost-effectiveness of implementing controls to prevent systems from erroneously deleting SSI overpayments.

Recommendation 3: Consider the cost-effectiveness of identifying and re-establishing SSI overpayments erroneously deleted by Manual Adjustment Credit and Award Data Entry adjustments.

Statutory Benefit Continuation During the Appeals Process For Medical Cessations

A-07-17-50127, 5/11/17

\$60,252,538 Questioned Costs

Recommendation 3: Evaluate the results of its actions for the individuals we identified, and determine the feasibility of identifying the remaining individuals in our populations who should have additional overpayments posted.

FY 2016

Old-Age, Survivors and Disability Insurance Benefits Withheld Pending a Windfall Offset Determination

A-09-15-15041, 3/21/16

\$71,596,964 Questioned Costs

Recommendation 2: Evaluate the results of its actions for the 58 beneficiaries and take appropriate action to address the remaining population of 61,734 beneficiaries identified during the current audit.



APPENDIX E: SIGNIFICANT NON-MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

18

Unimplemented Significant Non-Monetary Recommendations Fiscal Years 2014 - 2019

Report Title	Report Number, Issue Date	Unimplemented Recommendation
FY 2019		
<u>Dedicated Account Underpayments Payable to Children Receiving Supplemental Security Income</u>	A-04-18-50607, 9/17/19	Recommendation 3: Improve controls to ensure it timely pays dedicated account underpayments for children receiving Supplemental Security Income (SSI), such as establishing management reports, retaining diaries, and/or adding automation as discussed in the report.
<u>Supplemental Security Income Underpayments Due Deceased Recipients</u>	A-06-18-50608, 9/10/19	Recommendation 1: Attempt to locate the surviving SSI-eligible spouses and issue any underpayments they are due.
<u>Windfall Elimination Provision Exemptions</u>	A-13-17-34132, 8/8/19	Recommendation 4: Finalize changes to its administrative finality policy regarding whether the Agency should continue to pay prospective benefits even where administrative finality currently prohibits reopening the determination.
<u>U.S. Veteran Disability Claims Processing Time</u>	A-15-17-50227, 7/12/19	Recommendation 1: Define “expeditious” for processing Military Casualty/Wounded Warrior and Veteran 100 Percent Permanent and Total claims and measure processing time pursuant to the definition.
<u>Recovery of Old-Age, Survivors and Disability Insurance Overpayments When a Contingently Liable Beneficiary Stops Receiving Benefits</u>	A-04-18-50651, 5/15/19	Recommendation 3: Establish controls to remove the outstanding debt from terminated contingently liable beneficiaries and transfer the balance to the original debtor for an immediate payment of the overpayment or seek recovery through additional debt collection tools when available.



APPENDIX E: SIGNIFICANT NON-MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

Beneficiaries Whose Payments Have Been Suspended and Who Have Death Information on the Numident

A-09-15-15039, 12/21/18

Recommendation 2: Develop controls for suspended beneficiaries with death information on the Numident to ensure they are resolved in a timely manner.

FY 2018

Accuracy of the Determination of Workers' Compensation Offset During Disability Insurance Claims Processing

A-02-14-34090, 9/25/18

Recommendation 3: Take appropriate actions to improve the accuracy of Workers' Compensation/Public Disability Benefit (WC/PDB) offset determinations during Disability Insurance claims processing. For example, determine whether the Social Security Administration (SSA) should clarify policy, improve access to online resources, improve systems controls, and/or initiate data matches with WC/PDB payers.

Underpayments Paid on Supplemental Security Income Records with Outstanding Overpayments

A-07-17-50182, 7/23/18

Recommendation 1: Determine whether, as part of its information technology systems modernization, it could limit the number of manual actions required to ensure it withholds SSI prior month underpayments from SSI recipients to recover outstanding overpayments.

Overpayments Not Collected Through Benefit Withholding

A-07-18-50278, 7/16/18

Recommendation 2: Determine whether, as part of its Debt Management modernization initiative, it could automate the manual actions currently required to ensure it initiates benefit withholding at the appropriate time.

Master Beneficiary Record Death Information that Did Not Appear on the Numident

A-06-17-50190, 5/3/18

Recommendation 2: Develop system enhancements that ensure death information input on payment records is also recorded on the Numident.

Using Nursing Home Data to Determine Suitability of Representative Payees

A-03-16-50056, 3/21/18

Recommendation 1: Review and analyze the Department of Health and Human Services' Centers for Medicare and Medicaid Services nursing home data to determine whether it can be a tool to assess the suitability of organizational payees that are nursing homes to ensure they are serving beneficiaries' best interests, especially those organizational payees that might not meet SSA's monitoring criteria.

Higher Benefits for Dually Entitled Widow(er)s Had They Delayed Applying for Retirement Benefits

A-09-18-50559, 2/14/18

Recommendation 4: Determine whether it should develop additional controls to ensure it informs widow(er) beneficiaries of their option to delay their application for retirement benefits.



APPENDIX E: SIGNIFICANT NON-MONETARY RECOMMENDATIONS FROM PRIOR FISCAL YEARS FOR WHICH CORRECTIVE ACTIONS HAVE NOT BEEN COMPLETED

FY 2017

[Cross-program Recovery to Collect Overpayments](#)

A-13-15-15029, 4/28/17

Recommendation 2: Consider establishing automated alerts to notify staff to review certain overpayments when cross-program recovery should be used to collect overpayments.

[The Social Security Administration's Telework Program and Its Effect on Customer Service \(Congressional Response Report\)](#)

A-04-17-50267, 7/12/17

Recommendation 1: Determine whether additional customer service or production metrics would assist in measuring how telework affects field offices' (FO) ability to provide customer service and employee productivity.

Recommendation 3: Determine the effect telework has on customer wait times when an FO experiences an unusually high number of visitors.

FY 2016

[Underpayments Payable to Widow\(er\)s Eligible for a Higher Monthly Benefit Amount](#)

A-09-14-34103, 4/11/16

Recommendation 4: Determine whether it should develop a systems alert to detect when a widow(er)'s indexing primary insurance amount should apply.

[Old-Age, Survivors and Disability Insurance Benefits Withheld Pending a Windfall Offset Determination](#)

A-09-15-15041, 3/21/16

Recommendation 3: Take appropriate action to address the population of 26,558 beneficiaries identified during our 2011 audit.

Recommendation 4: Periodically identify and select for review beneficiaries whose Old Age, Survivors and Disability Insurance benefits are being withheld pending a windfall offset determination.

FY 2015

[Supplemental Security Income Overpayments Pending a Collection Determination by the Social Security Administration](#)

A-07-15-15030, 9/22/15

Recommendation 3: Establish a plan, as resources allow, to review remaining overpayments where no recent actions had been taken to collect overpayments from individuals no longer receiving SSI payments, focusing on the highest dollar overpayments first.

FY 2014

[Supplemental Security Income Telephone Wage Reporting](#)

A-15-12-11233, 2/6/14

Recommendation 1: Adopt a process to identify and report unique Supplemental Security Income Telephone Wage Reporting classifications (for example, wage reports, wage reporters, wage earners, users, usage, etc.) for a specified period.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

The Social Security Administration Office of the Inspector General has open recommendations dating from FY 2012. All recommendations from years prior to FY 2012 are closed. The chart below identifies the number of reports with unimplemented recommendations by year and the aggregate potential cost savings of those recommendations.

Year	Number of Reports with Unimplemented Recommendations	Number of Unimplemented Recommendations	Dollar Value of Aggregate Potential Cost Savings
2020 (as of March 31)	11	31	\$1,704,517,385
2019	28	69	\$2,415,574,482
2018	22	37	\$1,364,670,329
2017	10	20	\$1,070,534,619
2016	8	19	\$108,696,188
2015	4	5	N/A
2014	6	10	\$136,153
2013	3	3	N/A
2012	3	3	\$196,258,314
TOTAL	95	197	\$6,860,387,470



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Below is additional detail for each report included in the Number of Reports column above containing an outstanding unimplemented recommendation. These report summaries are also on our website, <https://oig.ssa.gov>.

Report Title	Report Number	Issue Date	Dollar Value
Match of Pennsylvania Death Information Against Social Security Administration Records	A-15-18-50679	3/23/2020	\$24,267,618
Single Audit of the Commonwealth of Puerto Rico Department of the Family for the Fiscal Year Ended June 30, 2018	A-77-20-00001	3/17/2020	N/A
Manual Actions on Old-Age, Survivors and Disability Insurance Post-entitlement Alerts	A-07-18-50621	3/9/2020	\$1,340,389,275
Beneficiaries with Representative Payees and Earnings	A-02-17-50143	3/5/2020	\$10,853,640
Follow-up: Beneficiaries Who Had Not Cashed Their Checks Within 1 Year	A-09-18-50562	12/23/2019	\$97,311,977
Multiple Social Security Numbers Assigned to Non-citizens Using the Enumeration Beyond Entry Program	A-08-18-50472	12/17/2019	N/A
The Social Security Administration's Controls over Malicious Software and Data Exfiltration	A-14-18-50709	12/4/2019	N/A
The Social Security Administration's Controls over Malware Introduced by Email Phishing	A-14-18-50710	12/4/2019	N/A
Accuracy of Manual Actions for Old-Age, Survivors and Disability Insurance Underpayments over \$6,000	A-03-18-50703	12/2/2019	\$80,668,259
Match of Delaware Death Information Against Social Security Administration Records	A-15-18-50662	11/27/2019	N/A
Appropriateness of Actions Taken on Pending Workers' Compensation Cases	A-05-18-50627	10/7/2019	\$151,026,616
Match of Maine and Rhode Island Death Data Against Social Security Administration Records	A-01-18-50314	9/26/2019	N/A
Old-Age, Survivors and Disability Insurance Beneficiaries with Overpayments on Suspended and Terminated Records*	A-07-18-50317	9/25/2019	\$17,976,178
The Social Security Administration's Accounting for, and Monitoring of, Court-ordered Restitutions*	A-04-18-50633	9/24/2019	\$9,541,711
Overpayments Pending Collection for Miscellaneous Reasons*	A-04-18-50546	9/24/2019	\$35,446,020
Dedicated Account Underpayments Payable to Children Receiving Supplemental Security Income*	A-04-18-50607	9/17/2019	\$65,527,495

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Report Title	Report Number	Issue Date	Dollar Value
The Social Security Administration's Controls for Identifying Potentially Fraudulent Internet Claims	A-09-18-50655	9/13/2019	N/A
The Social Security Administration's Processing of Returned Old- Age, Survivors and Disability Insurance Payments	A-07-18-50570	9/12/2019	\$18,964,672
Supplemental Security Income Underpayments Due Deceased Recipients*	A-06-18-50608	9/10/2019	\$467,994,323
Benefit Payments to Non-citizen Beneficiaries Living Outside the United States Who Have Not Met the 5-year Residency Requirement	A-07-18-50344	9/9/2019	\$28,413,168
Match of New Mexico Death Information Against Social Security Administration Records	A-06-18-50759	9/5/2019	\$4,563,173
Security of the Social Security Administration's Cloud Environment	A-14-18-50498	8/29/2019	N/A
Match of Puerto Rico Death Information Against Social Security Administration Records	A-08-14-14013	8/26/2019	N/A
Match of Florida Death Information Against Social Security Administration Records	A-08-18-50565	8/13/2019	N/A
Windfall Elimination Provision Exemptions*	A-13-17-34132	8/8/2019	\$1,835,472
Follow-up: Aged Beneficiaries Whose Benefits Have Been Suspended for Address, Whereabouts Unknown, or Foreign Enforcement	A-09-16-50077	8/6/2019	\$497,883,609
U.S. Veteran Disability Claims Processing Time*	A-15-17-50227	7/12/2019	N/A
Volume Representative Payee for the Social Security Administration in Connecticut	A-15-18-50443	6/24/2019	N/A
Follow-up: Minor Children Receiving Social Security Benefits Without A Representative Payee*	A-13-17-50169	6/6/2019	\$22,499,184
Follow-up: Underpayments on Prior Supplemental Security Income Records	A-07-18-50676	6/6/2019	\$127,431,265
Medical Improvement Review Standard Exceptions Other Than Failure to Cooperate	A-01-18-50347	6/6/2019	N/A
The Social Security Administration's Compliance with the Improper Payments Elimination and Recovery Improvement Act of 2012 in the Fiscal Year 2018 Agency Financial Report	A-15-18-50678	5/20/2019	N/A

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Report Title	Report Number	Issue Date	Dollar Value
Recovery of Old-Age, Survivors and Disability Insurance Overpayments When a Contingently Liable Beneficiary Stops Receiving Benefits*	A-04-18-50651	5/15/2019	\$17,770,777
The Social Security Administration's Application of Due-process Provisions for Old-Age, Survivors and Disability Insurance Overpayments*	A-07-18-50622	3/29/2019	\$403,347,023
Processing of Deferred Old-Age, Survivors and Disability Insurance Cases with a High Risk of Benefit Payment Error*	A-05-18-50620	3/15/2019	\$39,721,952
Supplemental Security Income Underpayments	A-15-18-50612	12/28/2018	N/A
Accuracy of Disability Entitlement Dates for Primary Beneficiaries Who Previously Filed Disability Claims*	A-07-18-50257	12/21/2018	\$656,658,460
Beneficiaries Whose Payments Have Been Suspended and Have Death Information on the Numident*	A-09-15-15039	12/21/2018	N/A
The Social Security Administration's Programs and Projects that Assist Beneficiaries in Returning to Work	A-04-18-50600	11/5/2018	N/A
Accuracy of the Determination of Workers' Compensation Offset During Disability Insurance Claims Processing*	A-02-14-34090	9/25/2018	\$33,820,756
The Cost of Administering Claimant Representative Fees	A-04-17-50238	9/19/2018	N/A
Effectiveness of the Social Security Administration's Medicare Non- utilization Project	A-08-17-50261	9/19/2018	\$17,583,591
Interim Benefits Paid After a Disability Claim is Denied*	A-02-18-50543	9/13/2018	\$2,142,834
The Social Security Administration's Comprehensive Integrity Review Process	A-14-17-50097	9/10/2018	N/A
Representative Payee Criminal Bar Policy*	A-13-18-50154	8/31/2018	\$13,730,931
Accuracy of Supplemental Security Income Payments to Recipients with Manually Deemed Income	A-07-18-50295	8/30/2018	N/A
Institutionalized Beneficiaries Who Have Earnings	A-02-17-50140	8/20/2018	N/A
The Social Security Administration's Use of Administrative Tolerance Waivers*	A-04-16-50145	8/1/2018	\$12,568,202
Accuracy of Month of Entitlement Determinations for Supplemental Security Income Recipients Awarded Old-Age, Survivors and Disability Insurance Benefits*	A-08-18-50582	7/27/2018	\$599,107,616

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Report Title	Report Number	Issue Date	Dollar Value
Underpayments Paid on Supplemental Security Income Records with Outstanding Overpayments*	A-07-17-50182	7/23/2018	N/A
Overpayments Not Collected Through Benefit Withholding*	A-07-18-50278	7/16/2018	\$9,344,420
Beneficiaries in Suspended Payment Status Pending the Selection of a Representative Payee	A-09-17-50202	6/1/2018	N/A
Controls over Supplemental Security Income Applicants/Recipients' Transferring Ownership of Resources	A-02-16-50066	5/29/2018	N/A
Old-Age, Survivors and Disability Insurance Debtors Who Were Not Current on an Installment Agreement*	A-04-18-50265	5/25/2018	\$88,295,888
Master Beneficiary Record Death Information that Did Not Appear on the Numident*	A-06-17-50190	5/3/2018	N/A
Manual Adjustments to Old-Age, Survivors and Disability Insurance Overpayments*	A-07-18-50294	4/9/2018	\$348,723,506
Undeliverable Social Security Number Cards	A-15-17-50279	4/2/2018	N/A
Using Nursing Home Data to Determine Suitability of Representative Payees*	A-03-16-50056	3/21/2018	N/A
Higher Benefits for Dually Entitled Widow(er)s Had They Delayed Applying for Retirement Benefits*	A-09-18-50559	2/14/2018	\$141,665,400
Old-Age, Survivors and Disability Insurance Benefits to Individuals Removed from the United States*	A-13-17-34105	12/29/2017	\$2,803,833
The Cost-effectiveness of Vocational Rehabilitation Services*	A-02-17-14048	10/20/2017	\$94,883,352
Widow(er)s Eligible for an Earlier Initial Month of Entitlement*	A-09-17-50187	8/7/2017	\$285,453,378
Cross-referred Social Security Numbers*	A-06-13-23091	7/17/2017	\$191,800,920
The Social Security Administration's Telework Program and Its Effect on Customer Service*	A-04-17-50267	7/12/2017	N/A
Manually Reduced Cross-program Recovery Overpayments*	A-06-17-50225	7/5/2017	\$65,188,220
Supplemental Security Income Overpayments Resulting from the Goldberg-Kelly Procedures	A-01-14-34091	6/12/2017	\$9,168,980
The Social Security Administration's Information Technology Costs of the National Support Center	A-04-16-50138	5/16/2017	N/A

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Report Title	Report Number	Issue Date	Dollar Value
Statutory Benefit Continuation During the Appeals Process for Medical Cessations*	A-07-17-50127	5/11/2017	\$60,252,538
Cross-program Recovery to Collect Overpayments*	A-13-15-15029	4/28/2017	\$86,708,264
Beneficiaries Whose Payments Have Been Suspended for No Child in Care and Who Are Serving as Representative Payees for Children	A-09-17-50200	2/24/2017	N/A
Individual Representative Payees Who Do Not Have a Social Security Number in the Social Security Administration's Payment Records	A-09-16-50159	2/17/2017	\$371,962,319
Access to the Social Security Administration's my Social Security Online Services	A-14-15-15010	9/29/2016	N/A
The Social Security Administration's Plan to Achieve Self-Support Program	A-08-16-50030	9/27/2016	N/A
Benefits Payable to Child Beneficiaries Whose Benefits Were Withheld Pending the Selection of a Representative Payee	A-09-16-50088	9/23/2016	\$9,124,990
Underpayments Payable to Widow(er)s Eligible for a Higher Monthly Benefit Amount*	A-09-14-34103	4/11/2016	N/A
Old-Age, Survivors and Disability Insurance Benefits Withheld Pending a Windfall Offset Determination*	A-09-15-15041	3/21/2016	\$71,596,964
Households With Multiple Children Receiving Supplemental Security Income Payments Because of Mental Impairments	A-08-14-14098	3/2/2016	N/A
Higher Retirement Benefits Payable to Families of Disabled Beneficiaries	A-09-14-34080	2/2/2016	\$27,974,234
Accuracy of Disability Benefits to Beneficiaries Who Also Receive Federal Employees' Compensation Act Payments	A-02-15-22114	11/13/2015	N/A
Supplemental Security Income Overpayments Pending a Collection Determination by the Social Security Administration*	A-07-15-15030	9/22/2015	N/A
Reimbursement for Data Exchanges with Third Parties	A-03-14-24027	5/8/2015	N/A
Observations and Recommendations for the Disability Case Processing System	A-14-15-50008	5/4/2015	N/A
Fraud Risk Performance Audit of the Social Security Administration's Disability Programs	A-15-15-25002	4/29/2015	N/A

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

Report Title	Report Number	Issue Date	Dollar Value
Auxiliary Beneficiaries Who Do Not Have Their Own Social Security Number	A-01-14-14036	9/29/2014	\$136,153
Payments to Individuals with Deaths Reported in California from 1980 to 1987	A-06-14-21416	8/14/2014	N/A
Access Controls over the Business Services Online	A-03-13-13015	6/5/2014	N/A
Supplemental Security Income Recipients Who Had Not Cashed Their Checks Within 1 Year	A-09-13-23023	4/7/2014	N/A
Improper Use of Children's Social Security Numbers	A-03-12-21269	3/31/2014	N/A
Supplemental Security Income Telephone Wage Reporting*	A-15-12-11233	2/6/2014	N/A
Access Controls for the Social Security Number Verification Service	A-03-12-11204	4/18/2013	N/A
Direct Deposit Changes Initiated Through Financial Institutions and the Social Security Administration's Internet and Automated 800-Number Applications	A-14-12-21271	12/20/2012	N/A
Benefit Payments Managed by Representative Payees of Children in Pennsylvania's State Foster Care Programs	A-13-12-11245	12/4/2012	N/A
Management Advisory Report: Supplemental Security Income Payments to Multi-recipient Households	A-06-09-29149	8/7/2012	\$62,563,749
Beneficiaries Who Had Not Cashed their Social Security Checks Within 1 Year	A-09-10-20133	7/19/2012	\$133,694,565
Title II Deceased Beneficiaries Who Do Not Have Death Information on the Numident	A-09-11-21171	7/9/2012	N/A

* Denotes significant unimplemented recommendation as reported in Appendix D or Appendix E.

REPORTS WITH RECOMMENDATIONS ISSUED BY MARCH 31, 2020 FOR WHICH NO MANAGEMENT DECISION HAD BEEN MADE BY THE END OF THIS REPORTING PERIOD

Management has not made a decision on the one recommendation included in the report, *Single Audit of the Commonwealth of Puerto Rico Department of the Family for the Fiscal Year Ended June 30, 2018*. This report was issued March 17, 2020. The recommendation has not yet been resolved with the Commonwealth of Puerto Rico Department of the Family.



APPENDIX F: OPEN RECOMMENDATIONS AND REPORTS WITH UNIMPLEMENTED RECOMMENDATIONS

REPORTS ISSUED BY MARCH 31, 2020 FOR WHICH NO ESTABLISHMENT COMMENT WAS RETURNED WITHIN 60 DAYS OF BEING PROVIDED THE REPORT

The Social Security Administration responded to all reports issued to it for comment by March 31, 2020 within 60 days.



APPENDIX G: CLOSED AUDITS AND INVESTIGATIONS NOT AVAILABLE TO THE PUBLIC

For this reporting period, we did not have any reviews not made available to the public. Of the 23 audit reports issued this period, one was issued as containing "restricted information" due to the sensitivity of the reported information and findings. This report, [The Social Security Administration's Actions to Resolve Potentially Fraudulent Internet Claims](#), is posted to our public website with redactions.



APPENDIX H: INFORMATION DESCRIBED UNDER SECTION 804(B) OF THE FEDERAL FINANCIAL MANAGEMENT IMPROVEMENT ACT OF 1996

Section 804(b) of the Federal Financial Management Integrity Act (FFMIA) requires an Office of Inspector General (OIG) to report whether its agency has met the targets in a remediation plan. Because the Social Security Administration (SSA) is FFMIA-compliant, it does not have a remediation plan. Therefore, SSA OIG does not have information to report.



APPENDIX I: PEER REVIEWS

OFFICE OF AUDIT

Generally accepted Government auditing standards requires that our Office of Audit undergo a peer review every 3 years to determine whether we suitably designed our system of quality control, and whether we are complying with that system, to provide us with reasonable assurance of conforming with applicable professional standards.

We did not complete a peer review of any other Office of the Inspector General (OIG), nor did any other OIG complete a peer review of the Social Security Administration (SSA) OIG, during this reporting period. There are no outstanding recommendations from prior peer reviews we completed of other OIGs, nor from prior peer reviews other OIGs completed of our Office of Audit.

OFFICE OF INVESTIGATIONS

Federal OIG investigative offices must undergo a peer review every 3 years to ensure that Council of the Inspectors General on Integrity and Efficiency (CIGIE) Quality Standards for Investigations and Quality Standards for Digital Forensics are followed and that law enforcement powers conferred by Section 6(e) of the *Inspector General Act of 1978*, or other authorities, are properly exercised. Each OIG is required to implement and maintain a system of quality control for its investigative operations that ensure compliance with required standards.

We did not complete a peer review of any other OIG, nor did any other OIG complete a peer review of SSA OIG, during this reporting period. There are no outstanding recommendations from prior peer reviews we completed of other OIGs, nor from prior peer reviews other OIGs completed of our Office of Investigations.



APPENDIX J: REVIEW OF LEGISLATION AND REGULATIONS

Section 4(a)(2) of the *Inspector General Act of 1978*, as amended, requires the Social Security Administration (SSA) Office of the Inspector General (OIG) to review existing and proposed legislation as well as regulations relating to SSA's programs and operations, and to make recommendations concerning impact on such programs or on the prevention of fraud, waste, and abuse. We accomplish this in several ways:

- Our audits and other reports evaluate SSA's compliance with existing laws and regulations.
- We recommend, when appropriate, issuing regulations or seeking appropriate legislative authority, and we provide a status of those recommendations in our Semiannual Report to Congress.
- We provide Congressional Response Reports in response to direct requests from Congress.
- We describe planned reviews in our annual Audit Work Plan that will address issues related to laws and regulations.
- We communicate directly with congressional staff as needed to discuss legislative issues relating to our work.

SSA OIG is an active member of the Legislation Committee of Council of the Inspectors General on Integrity and Efficiency (CIGIE). In this role, we serve on a team of Inspectors General (IG), working in close coordination with CIGIE's Executive Council, to monitor, evaluate, prioritize, and develop legislative products that affect the IG community. The Committee is an essential liaison between the IGs and Congress, providing experience-based practical and technical support. To effectively identify, craft, and propose legislation to enhance the success of the IGs, the Committee maintains an open channel of informal communication with congressional staff, and provides formal comments on behalf of CIGIE.

During this period, the Committee coordinated community-wide and agency-specific concerns of CIGIE members on an array of proposed laws relating to good Government and proposed legislation directly affecting OIGs. For example, we reviewed and provided comments, as appropriate, for inclusion in the Committee's comments to Congress on legislation covering topics such as COVID-19 stimulus oversight and improper payment prevention and recovery.

Finally, in addition to our frequent direct communications with congressional staff, we provided comments, pursuant to an Office of Management and Budget Government-wide request, on a bill that directly impact SSA's mission – dealing with breaches of government information systems involving sensitive personal information and requiring notification to impacted individuals, the Congress, and other Federal Government agencies, along with appropriate training.



APPENDIX K: INVESTIGATIONS INVOLVING SENIOR GOVERNMENT EMPLOYEES WHERE ALLEGATIONS OF MISCONDUCT WERE SUBSTANTIATED

During the reporting period, we closed an investigation regarding an allegation of misconduct in connection with an official document submitted to an administrative tribunal by a senior Government employee. The matter was declined by the Department of Justice in 2019, at the beginning of the investigation. The completed investigation was referred to management and corrective action was initiated. No information regarding the allegation, investigation, or corrective action was made public.



APPENDIX L: SSA INTERFERENCE WITH OIG INDEPENDENCE

During this reporting period, we have no instances of Social Security Administration interference with Office of the Inspector General independence to report.



APPENDIX M: DESCRIPTION OF WHISTLEBLOWER ALLEGATIONS AND INSTANCES OF RETALIATION

WHISTLEBLOWER ALLEGATIONS

The *Inspector General Act of 1978* authorizes the Office of the Inspector General (OIG) to receive and investigate whistleblower allegations, or allegations from Social Security Administration (SSA) employees, contractors, and job applicants concerning alleged mismanagement, waste of funds, abuse of authority, specific danger to public health or safety, or other violations within the Agency. Federal law protects government employees, contractors, and job applicants who submit whistleblower allegations from retaliation via certain prohibited personnel practices, including, for example, a significant change in duties or a disciplinary action.

OIG evaluates all incoming whistleblower disclosures—and allegations of retaliation—from SSA employees, contractors, and job applicants; and determines if OIG action is warranted. During this reporting period, we received 39 new whistleblower allegations in addition to the 19 allegations already on file. We closed 24 allegations during this period and are continuing our efforts to evaluate the remaining 34 allegations.

WHISTLEBLOWER RETALIATION

Section 5(a)(20) of the *Inspector General Act of 1978*, as amended, requires SSA OIG to provide a detailed description of any instance of whistleblower retaliation, including information about the official found to have engaged in retaliation and what, if any, consequences the establishment imposed to hold that official accountable. There are no known instances of retaliation to report for this reporting period.



GLOSSARY OF ACRONYMS

CDI	Cooperative Disability Investigations
CMP	civil monetary penalty
COVID-19	Coronavirus Disease 2019
DDS	disability determination services
DI	Disability Insurance
DOJ	Department of Justice
EDR	Electronic Death Registration
FO	field office
FY	fiscal year
iClaim	Internet Claim
IG	Inspector General
IT	information technology
NH	numberholder
OASDI	Old-Age, Survivors and Disability Insurance
OIG	Office of the Inspector General
RSI	Retirement and Survivors Insurance
SSA	Social Security Administration
SSI	Supplemental Security Income
SSN	Social Security number
USDA	U.S. Department of Agriculture
WC/PDB	Workers' Compensation/Public Disability Benefit

