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

***Congressional Response Report: Progress in Developing the Disability Case Processing System as of November 2016 ([A-14-17-50174](#)), December 2016.***

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

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

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

***Congressional Response Report: The Social Security Administration's Analysis of Alternatives for the Disability Case Processing System ([A-14-16-50078](#)), May 2016.***

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

***Observations and Recommendations for the Disability Case Processing System (Limited Distribution) ([A-14-15-50008](#)), May 2015.***

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

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

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

## Appendix C – DISABILITY CASE PROCESSING SYSTEM DEPLOYMENT SCHEDULE

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The Social Security Administration (SSA) anticipates deploying the Disability Case Processing System (DCPS) to at least three disability determination services (DDS) every 3 months.<sup>1</sup> The next release is scheduled for April 2017. The rollout is broken down into 12 groups of varying numbers of DDSs. The majority of DDSs will begin using DCPS in Fiscal Year 2018.

**Table C–1: Planned DCPS Deployment Schedule**

Group	Implementation Date	Number of DDSs	Percent of DDSs	Planned Date to Retire Legacy System
1	December 2016	3	6	October 2018
2	April 2017	3	12	October 2018
3	July 2017	3	17	October 2018
4	October 2017	3	23	October 2018
5	January 2018	7	37	December 2018
6	April 2018	7	50	March 2019
7	July 2018	8	65	June 2019
8	October 2018	8	81	September 2019
9	January 2019	3	87	December 2019
10	April 2019	3	92	March 2020
11	July 2019	3	98	June 2020
12	September 2019	1	100	September 2020
<b>Total</b>		<b>52</b>		

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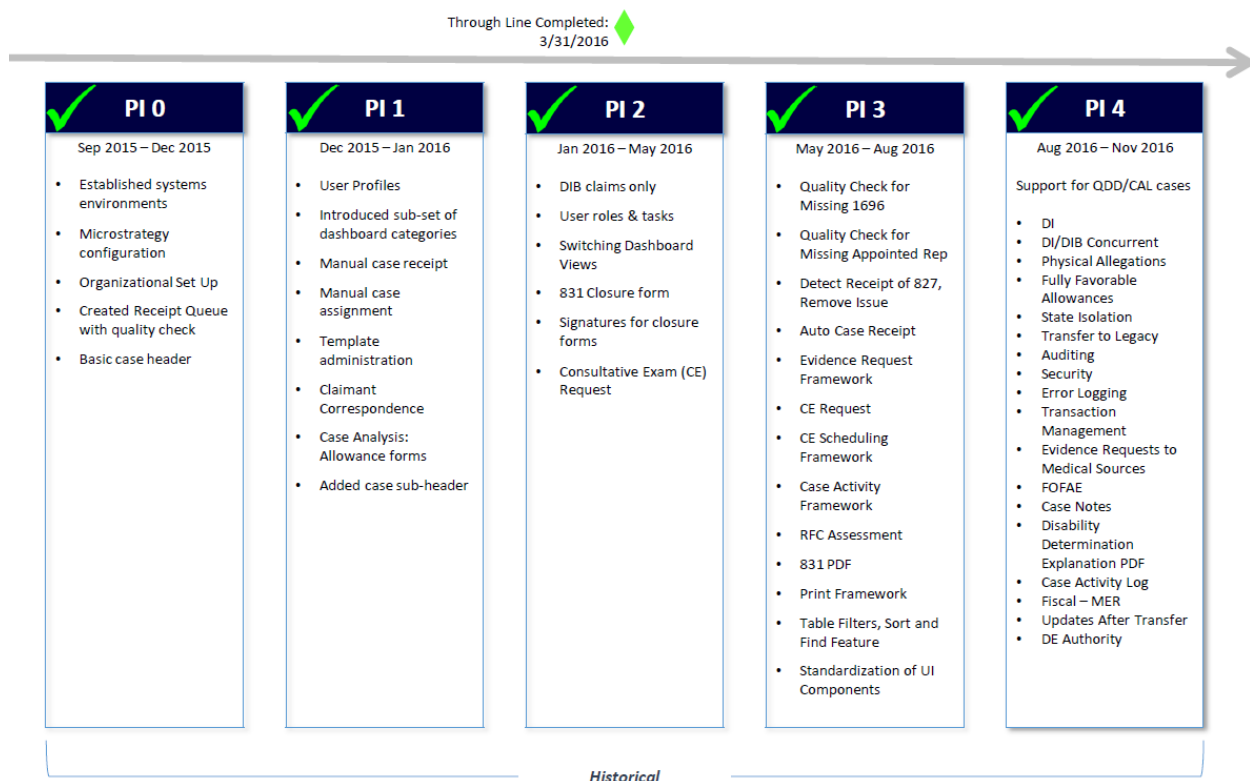
<sup>1</sup> There are 52 DDSs, including 1 in each of the 50 States, the District of Columbia, and Puerto Rico.

# Appendix D– DISABILITY CASE PROCESSING SYSTEM ROAD MAP

According to the Social Security Administration (SSA), the Product Road Map represents the Agency’s plans for the Disability Case Processing System (DCPS) based on information currently available. The Road Map is subject to change because of many factors, including current velocity, ability to estimate more accurately, and changing business priorities. The shaded area within Program Increment (PI) 5 indicates stretch goals. SSA is developing the functionality within the shaded area but may not complete it by the end of the PI. Any work remaining will move to PI 6.

**Figure D–1: SSA’s DCPS Product Road Map<sup>1</sup>**

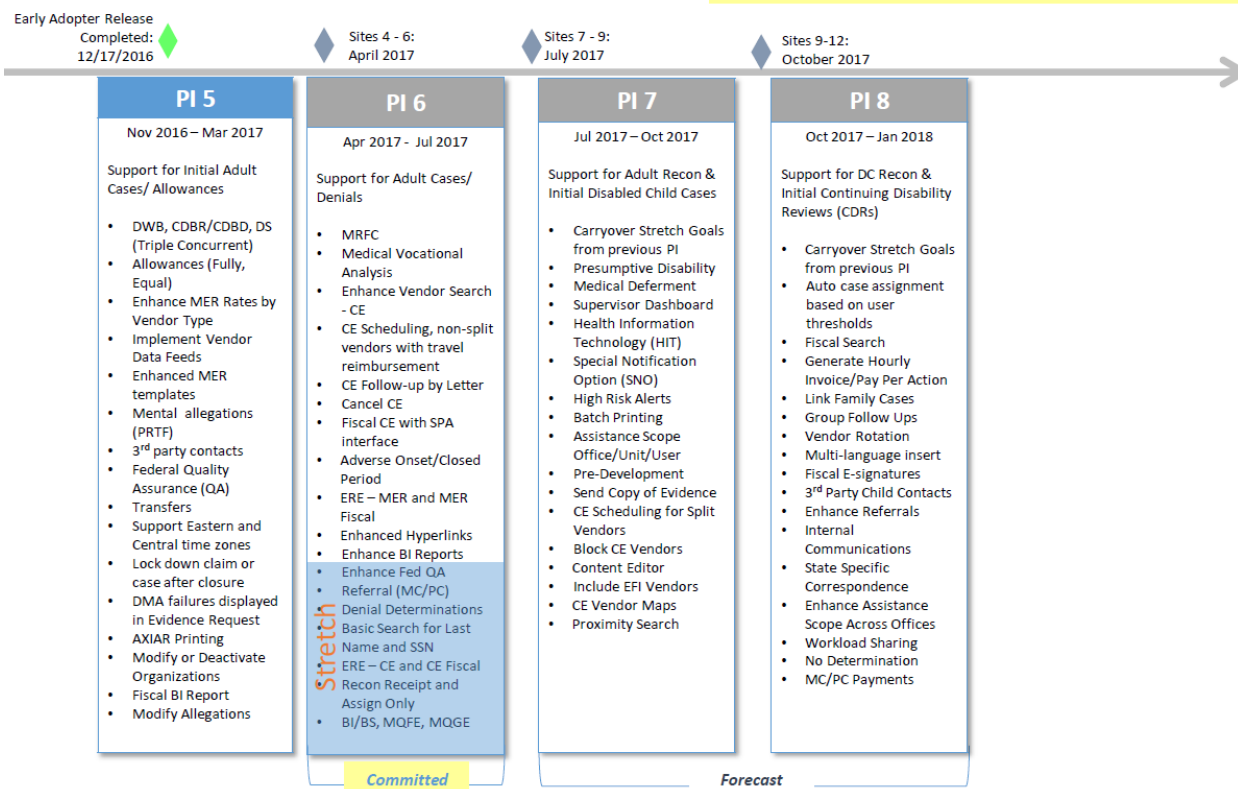
## DCPS Product Road Map



<sup>1</sup> The Roadmap was prepared by SSA. References to “our” and “us” in the note refer to the Agency, not the Office of the Inspector General.

# DCPS Product Road Map

**PLEASE NOTE:** The Road Map entries for PI 7 – PI 8 represent our plans based on the information currently available to us. It is subject to change, due to many factors including: our current velocity, our ability to estimate more accurately, and changing business priorities.



## Undefined Abbreviations

BI/BS	Blind Individual/Blind Spouse
CAL	Compassionate Allowance
CDBD	Childhood Disability Benefits – Disability Insurance Benefits Wage Earner
CDBR	Childhood Disability Benefits - Retirement, Survivor Insurance Wage Earner
DE	Disability Examiner
DI (SSI)	Title XVI Disabled Individual
DIB	Title II Disability Insurance Benefits
DWB	Disabled Widow(er)'s Benefits
DS	Disabled Spouse
EFI	Electronic Folder Interface
ERE	Electronic Records Express
MER	Medical Evidence of Record
MQFE	Medicare Qualified Federal Employee

MQGE	Medicare Qualified Government Employee
QDD	Quick Disability Determination
RECON	Reconsideration
RFC	Residual Functional Capacity
SPA	State Parent Agency
SSN	Social Security Number

### *Forms*

SSA-827	<i>Authorization to Disclose Information to the Social Security Administration</i>
SSA-831	<i>Disability Determination and Transmittal</i>
SSA-1696	<i>Appointment of Representative</i>

## Appendix E – DISABILITY CASE PROCESSING SYSTEM RISK MANAGEMENT PLAN

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

**Table E-1: Risk Register for DCPS**

Risk	Assessed Potential Impact	Assessed Probability of Occurrence	Mitigation Strategy
Velocity is not at a high enough rate to meet planned delivery dates and functionality in January 2018	High	High	Keep scope contained and create deployment teams
User test case creation	High	High	Create a utility to automatically generate test cases
Insufficient resources for teams (infrastructure, fiscal, and vendor) may delay delivering functionality	High	High	Create deployment teams that will relieve the teams (infrastructure, fiscal, and vendor) of new site preparation duties
Transition to a new contract may cause loss of production	High	Medium	Establish a transition plan that accounts for maintaining program artifacts, system access, and program standards
Insufficient end-to-end testing	High	Medium	Develop automated test scripts
Test and implementation resources to support Agile	High	Medium	Identify alternative approaches to SSA’s software development lifecycle for Agile release cycles
Dependencies on other projects	High	Medium	Work with subject matter experts to develop integration approach
Complexity for DDS special requirements	High	Medium	Build common functionality into the core product and use flexibilities to enable site-specific customizations
Fiscal complexity to accommodate state parent agency requirements	High	Medium	Short-term solution to develop a fiscal interface and long-term solution of implementing centralized third party fiscal functionality
Inability to convince DDS users of the value and advantage of DCPS may negatively affect DDS adoption rates	High	Medium	Build and demonstrate valuable, working software, based on close and continuous collaboration with disability community
Immature application and data architectures	High	Medium	Increase focus on the application and data architecture

Risk	Assessed Potential Impact	Assessed Probability of Occurrence	Mitigation Strategy
Open source software <sup>1</sup>	Medium	Low	Procure dedicated support for the chosen DCPS technical software
Insufficient initial developer unit testing	Medium	Low	All code will go through a code review process
Insufficient user testing	Medium	Low	Incorporate usability testing into software development lifecycle and solicit volunteers from the DDS community
DDS may not have technical ability or resources to develop customized features	Low	Medium	Build core product to provide default functionality for all DDSs; offer DDS-developed shareware; offer SSA developer resources; offer contractor support for DDS development

Source: SSA's Risk Register

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<sup>1</sup> Open source software can be accessed, used, modified, and shared by anyone.



## Appendix F – DISABILITY CASE PROCESSING SYSTEM USER SATISFACTION SURVEY

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We surveyed 11 case examiners and supervisors who had experience using the Disability Case Processing System (DCPS) Early Adopter Release.<sup>1</sup>

<b>1. I am satisfied with the quality of training that I received for DCPS.</b>	<b>11 responses; 8 agree (73%)</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• The training was well developed and interactive. The DCPS staff is open and transparent about the program. They communicate where the program is in development, where it is headed, the upside (there are many) and the down side (there are few) of the product. The program is so intuitive and has the look and functionality of an already know program [electronic Claims Analysis Tool] (e-CAT), that very little training is actually required. Most users should be able to be proficient in the program with minimal training. Training may be too strong of a word; introduction might be a more accurate term.</li> <li>• DCPS is user-friendly and so similar to e-CAT; training really only needed to point out where certain functionality is located.</li> <li>• Training has been clear and informational</li> <li>• While I didn't receive formal training, I was involved to a limited extend [<i>sic.</i>] with seeing DCPS in the test environment and my agency was supportive and guided me and other users to get through it easily when it went live.</li> <li>• Did not receive formal training, but learned through demonstrations, meetings and [Acceptance Testing Environment (ATE)] testing.</li> <li>• No formal training. Was given guidance and demonstrations of the system.</li> </ul>	
<b>2. I am satisfied with the timeliness of the training I received for DCPS.</b>	<b>11 responses; 8 agree (73%)</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• Training really was ongoing. Conference calls and Skype meeting kept everyone up to date with the development, which helped to "train" users.</li> <li>• Training and demos have been provided in a sensible timeframe.</li> <li>• See above.</li> </ul>	
<b>3. I am able to successfully complete my work using DCPS.</b>	<b>11 responses; 11 agree (100%)</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• The program has limited functionality currently and more is in the pipeline. What is developed works well. Looking forward to more!</li> <li>• I have not had any issues.</li> <li>• I'd like to have the ability to make a temporary vendor for [Medical Evident of Record (MER)] requests.</li> <li>• I have been able to successfully process an [<i>sic.</i>] number of cases in DCPS</li> <li>• I am not a primary user. I am available in a back up type of role. The work that needs to be completed has been successful to my knowledge.</li> <li>• As long as there are no errors and it is the correct type of case.</li> </ul>	

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<sup>1</sup> We did not alter the users' comments, except to define acronyms and add form names.

<b>4. I can accomplish tasks more quickly in DCPS than I can in my other case processing system.</b>	<b>11 responses; 7 agree (64%)</b>
Comments: <ul style="list-style-type: none"> <li>• It is definitely much faster - initially, it scared me a little how quickly the claims disappeared from my pending.</li> <li>• DCPS so far has increased the speed of processing cases</li> <li>• There is limited functionality in this release of DCPS, so it is hard to compare to our legacy system which has full functionality. There are some issues with workarounds with fiscal section of the application.</li> <li>• From the perspective of receipting in a claim, yes, this task is more quick [<i>sic.</i>] in DCPS.</li> <li>• Yes, for the tasks that are available in this release.</li> </ul>	
<b>5. I can accomplish tasks more easily in DCPS than I can in my other case processing system.</b>	<b>11 responses; 8 agree (73%)</b>
Comments: <ul style="list-style-type: none"> <li>• One system, one product. So much better than Micropact! User friendly.</li> <li>• There are a couple of helpful tools in e-CAT which are not in DCPS yet (ex. the ability to find [a Medically Determinable Impairment (MDI)] by typing keyword, the ability to view [Findings of Fact and Analysis of Evidence (FOFAE)] &amp; copy from it when writing up [Form SSA-416, <i>Medical Evaluation</i>]).</li> <li>• Much easier to complete claims using one program</li> <li>• Same as above. There are some features that are a lot better than our legacy system, (Ex. faster navigation between screens, auto completion of [Form SSA-831, <i>Disability Determination and Transmittal</i>], integration of eCAT into DCPS and it is very intuitive in usability.</li> <li>• Yes, for the tasks that are available in this release.</li> </ul>	
<b>6. Overall, I find DCPS easy to use.</b>	<b>11 responses; 11 agree (100%)</b>
Comments: <ul style="list-style-type: none"> <li>• Very easy to use. Although sufficient training has been provided, I believe I could have learned how to use the program with little to no training.</li> <li>• There are a few workarounds that will be corrected in later releases.</li> </ul>	
<b>7. DCPS works the way I want it to work.</b>	<b>11 responses; 9 agree (82%)</b>
Comments: <ul style="list-style-type: none"> <li>• It transition [<i>sic.</i>] from one step to another quickly and smoothly.</li> <li>• Very intuitive a big change from our legacy system in a very positive way</li> <li>• It's difficult to compare based on the small volume and limited types of claims able to be processed in DCPS at this time. However, so far so good.</li> <li>• It works as expected, other than errors, which are generally fixed quickly and efficiently. Note: errors have become less common in the past week or two.</li> </ul>	
<b>8. DCPS has the functions and capabilities that I expect it to have.</b>	<b>11 responses; 10 agree (91%)</b>
Comments: <ul style="list-style-type: none"> <li>• It actually has more than originally promised!</li> <li>• Basic functions and capabilities to complete the QDD/CAL [Quick Disability Determination/Compassionate Allowance] claims are already in DCPS.</li> <li>• Limited functionality but based on the stated goals for this release - the functionality goals were met. We can process a case from receipt to closure without any issues.</li> </ul>	

9. What do you like best about DCPS?	9 responses
<p>Comments:</p> <ul style="list-style-type: none"> <li>• One product. Case can be receipted, assigned, and fully processed in one system. Creating evidence requests is much easier, the [Form-831] document completes itself. Literally, the user does not have to make any entries on it. Less room for errors. It is an intuitive program with sequential evaluation built in.</li> <li>• The fact DCPS is user-friendly and quite similar to e-CAT which makes the transition easy.</li> <li>• I only have to do the determination once, the [Form-831] is completed. I don't have to go into another system to complete the 831. It is very easy to use and similar to eCat.</li> <li>• Ease of use. It appears going forward this program has the potential to increase the speed and accuracy of case processing.</li> <li>• I like that everything is within one system. I also like that it's relatively self explanatory/easy to use (although we're only using it for relatively simple case actions currently).</li> <li>• Intuitive, ease of navigation, integration of eCAT into claim analysis, ability access eView<sup>2</sup> without going outside the application. able [<i>sic.</i>] to work with multiple screen [<i>sic.</i>] open. Overall at this level we have received a good product.</li> <li>• It eliminates the entire process of coding a claim to be receipted into our legacy system and there is no Federal Mask<sup>3</sup> to screen and check when receipting and closing a claim. It essentially eliminates a case control clerk's role in closing a case.</li> <li>• I like the layout, ease of use, and the ability to preview correspondence before sending.</li> <li>• Its web-based design. It's easy to use, easy to navigate, intuitive and user friendly.</li> </ul>	
10. What do you like least about DCPS?	8 responses
<p>Comments:</p> <ul style="list-style-type: none"> <li>• Limited functionality. Functions that are in production work well but again, I want more. More case types, denials, requesting consultative examinations, etc. These things are planned and should be soon. I see what a great program this is going to be once completed. I wish we did not have to wait. It will make case processing quicker and more accurate. Should be a great service to claimants.</li> <li>• Frequent error messages - when I need to go to another page before completing one page, DCPS gives huge error message on top.</li> <li>• There isn't an ability to make narratives on the cases, except using the case notes. I don't feel the case notes work well for narratives. No ability to make a temp[orary] vendor for [Medical Evidence of Record (MER)] requests. MER received after case closure is received as if the case was still active, not as trailer mail.</li> <li>• Limited functionality at this point.</li> <li>• I would like the electronic documents and MER to be incorporated in DCPS instead of having to open e-view separately.</li> <li>• Need to work on some of the fiscal issues and vendor selection for medical evidence of record requests.</li> <li>• The limited access to eView (only through the 'Evidence Requests' page), and it would be nice to be able to view unread evidence for a particular claim directly from the open claim, rather than going back out to "To Do."</li> <li>• Its limited functionalities and features.</li> </ul>	

<sup>2</sup> eView is a web-based application that enables users involved in case processing to view, print, copy and/or take specified action on disability information contained in the Certified Electronic Folder.

<sup>3</sup> The "Federal Mask" refers to how the legacy DDS systems display fields from the National Disability Determination Services System (NDDSS) related to receipt and closure. The legacy systems tailor the appearance of NDDSS to meet their specific needs and may have added other functionality.

<b>11. Overall, I am satisfied with DCPS.</b>	<b>11 responses; 11 agree (100%)</b>
Comments: <ul style="list-style-type: none"> <li>• I am not very technically savvy but I have been able to navigate DCPS; so, I am sure most other adjudicators would have no problem learning to use DCPS.</li> <li>• Despite limited functionality - more functionality will come later- this product is light years better than the current legacy system which is hard to navigate and very cryptic language used throughout the application</li> <li>• I have enjoyed testing and using the product in its early stages, and the collaboration between the developers and users has been extremely beneficial.</li> </ul>	
<b>12. Have you encountered any issues/problems using DCPS?</b>	<b>11 responses; 5 - Yes (45%)</b>
<b>If Yes: I am satisfied with the support I received when I encountered issues using DCPS.</b>	<b>5 responses; 5 agree (100%)</b>
Comments: <ul style="list-style-type: none"> <li>• Very response [<i>sic.</i>] team. The [Change, Asset and Problem Reporting System (CAPRS)] process is cumbersome but has nothing to do with DCPS it is the way to report system issue to the help desk - it could use some tweaking.</li> <li>• Staff committed to working on the program have been very receptive when encountering problems</li> <li>• The few issues I have reported have been resolved quickly for the most part. the [<i>sic.</i>] only exception would be fiscal issues but we do have some workarounds. I feel confident a solution will be found to these fiscal issues.</li> <li>• Problems are usually resolved or at least addressed quickly and efficiently.</li> </ul>	
<b>13. What do you like best about the case processing system you currently use?</b>	<b>9 responses</b>
Comments: <ul style="list-style-type: none"> <li>• It is going away! (said with fingers crossed and hope in my heart)</li> <li>• Just by glancing at the first screen, I can immediately tell where the claim is currently at (I can tell how many sources are still outstanding and how much follow-up has been done, whether claim has been seen by [medical consultant/psychological consultant (MC/PC)], whether [Form-831 <i>Disability Determination and Transmittal</i>] is being made, etc.).</li> <li>• It is easy to look up a case</li> <li>• It functions</li> <li>• It's easy to see what kind of work I have to do as soon as I open it.</li> <li>• It has full functionality at all level of cases. I has [<i>sic.</i>] used this system since 1994.</li> <li>• From a case control perspective, it is able to manage the large volume of claims processed daily, weekly, annually, etc. It auto assigns claims to examiners daily. We can track the number of our cases in the backlog and in the closure queue. It provides a useful tool for adjudicators to track the individual pendencies [<i>sic.</i>] and manage timeliness of actions vs. dates they are due.</li> <li>• It rarely crashes.</li> <li>• Its many functionalities and features.</li> </ul>	

<b>14. What do you like least about the case processing system you currently use?</b>	<b>9 responses</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• It is the old green screen. DOS prompt type system. It is hard for new users to learn and master. Users that are younger have never seen such and [sic.] outdated and antiquated system. They are used to web-based programs and DCPS is a web-based program.</li> <li>• Difficult to create [Form SSA-831, <i>Disability Determination and Transmittal</i>; Form SSA-832, <i>Cessation or Continuance of Disability or Blindness Determination and Transmittal</i>; and Personalized Disability Notice (PDN)] - having to go to optional pages at times w/ [sic.] various numbers scattered throughout the screen, having to select the right PDN out of numerous different ones listed.</li> <li>• I have to do my work twice.</li> <li>• Outdated, cumbersome, difficult to navigate, increased potential for technical errors</li> <li>• Having to access e-cat separately and sometimes document the same thing in multiple places. (ex: if I put a note on my current case processing system, it will not automatically show up in e-cat. I would have to copy/paste it into e-cat if I wanted it to be included in the [Disability Determination Explanation (DDE)].</li> <li>• Hard to navigate and very cryptic language used to describe various tasks and functions</li> <li>• Data is transmitted to case processing from a [field office] and there is a lot of work done to screen the data and then code it in order to receipt it in. Eliminating the coding part would be excellent. It has glitches. The communication between eCAT/DDEs and how that info propagates to Case Processing and thus closure forms is not always correct. It's possible for defects to be passed from one point to another. It's not intuitive. It takes too many steps to figure out how to manage tasks sometimes.</li> <li>• It is confusing, difficult to figure out how to use, and it does not allow the user to preview documents before printing/issuing.</li> <li>• It is clunky and slow in navigating between different functions and screens.</li> </ul>	
<b>15. Overall, I find my existing case processing system easy to use.</b>	<b>11 responses; 6 agree (55%)</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• If you have been at a DDS 2-4 years, users become familiar with it and it becomes what they know. If given the choice no user would choose Micropact over DCPS.</li> <li>• I have used a case processing system of another state once; Ohio's case processing system is much easier to use.</li> <li>• I can say that it's easy to use because it's the only system I've used for a decade and I'm used to it.</li> <li>• Because I have used it for over 20 years</li> <li>• This is based on my years of experience and familiarity troubleshooting issues.</li> <li>• See above</li> </ul>	
<b>16. Overall, I am satisfied with my existing case processing system.</b>	<b>10 responses; 5 agree (50%)</b>
<p>Comments:</p> <ul style="list-style-type: none"> <li>• I was satisfied until I saw DCPS and how much better, smarter, and faster it is.</li> <li>• It gets the job done</li> </ul>	

17. Any Additional Comments?	5 responses
<p>Comments:</p> <ul style="list-style-type: none"> <li>• DCPS will be good for DDS, SSA, and claimants.</li> <li>• I am hopeful DCPS continues to grow. From a case processing standpoint it desperately needs modernization</li> <li>• I feel we are in the right direction</li> <li>• It's challenging to conceptualize how DCPS will support claims at all levels nationally and it will require adjustments and changes for the DDS. However, I am in support of it. As DCPS capability continues to expand, it will be important that the quality of downloads and transfers from the [field office] to the DDS are as free of errors as possible in order to ensure a smooth transition from [the Electronic Disability Collect System] to Eview to DCPS and then back to the [field office]. To that end, it will be important that claims being closed from DCPS are also as error free as possible from a technical/documentation standpoint. There are a lot of "exception" claims we must manage and it will be important for DCPS to have that capability as well.</li> <li>• Based on my limited experience using DCPS, I think it will be a successful alternative to the legacy systems used in each region. It will unify and streamline DDS business processes nationwide and it will provide users with a much easier to use and more efficient case processing tool.</li> </ul>	

## Appendix G – AGENCY COMMENTS

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## SOCIAL SECURITY

### MEMORANDUM

**Date:** March 30, 2017 **Refer To:** SIJ-3

**To:** Rona Lawson  
Assistant Inspector General for Audit

**From:** Stephanie Hall  
Acting Deputy Chief of Staff

**Subject:** Office of the Inspector General Draft Congressional Response Report, “Progress in Developing the Disability Case Processing System as of March 2017” (A-14-17-50079)--INFORMATION

Thank you for the opportunity to review the draft report. We are pleased with our progress in the development of our Disability Case Processing System and have no further comments on your review.

Please let me know if we can be of further assistance. You may direct staff inquiries to Gary S. Hatcher at (410) 965-0680.

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