Congressional Response Report

Progress in Developing the Disability Case Processing System as of August 2017
September 20, 2017

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

Dear Mr. Chairman:

As you requested, we are providing regular reports to keep the Subcommittee informed on the Social Security Administration’s efforts related to its Disability Case Processing System project. We evaluated the Agency’s progress in developing and implementing the System as of August 2017. To ensure the Agency is aware of the information provided to your office, we are forwarding it a copy of this report.

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

Sincerely,

Gale Stallworth Stone  
Acting Inspector General

Enclosure

cc:  
Nancy A. Berryhill
Objective
To evaluate the Social Security Administration’s (SSA) progress in developing and implementing its Disability Case Processing System (DCPS) as of August 2017.

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

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

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

Results
As of August 28, 2017, 9 DDSs had used DCPS to process 1,665 disability claims. To ensure the new functionality in the latest release was working as intended, SSA asked participating DDSs to limit the number of cases processed in the system. DDS staff we interviewed were pleased with the progress and were looking forward to DCPS having full functionality.

As of the end of August 2017, SSA’s cumulative costs for the new DCPS project were about $64.8 million. This total does not include the costs SSA spent to develop the prior version of DCPS.

While SSA made progress in completing user stories, the universe of story points continued to grow. As expected in an Agile environment, SSA continually updates the backlog of user stories. Therefore, it is difficult to predict how many user stories SSA will identify in the future. In addition, as SSA’s velocity has varied considerably since it began developing DCPS, we cannot predict what velocity SSA will achieve in the future.

DCPS must interface with State-managed fiscal systems. In July 2017, SSA considered the fiscal requirements to represent a high risk to the project. Given the complexity of State-specific functionality, it is imperative that SSA carefully plan for and manage this component of DCPS.

Conclusion
SSA’s goals are to deliver functionality to support all initial and reconsideration cases by January 2018 and all remaining workloads—including continuing disability reviews and DDS disability hearings—by April 2018. However, the Agency had not yet identified all the user stories associated with providing that functionality.

SSA’s ability to meet its delivery goals will depend on the velocity with which it completes the backlog of story points identified to-date as well as the volume of work it has not yet identified. Given the uncertainty with regard to the future growth of the backlog and SSA’s ongoing development velocity, we were unable to conclude whether the Agency’s release goals were reasonable.
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*Progress in Developing DCPS as of August 2017 (A-14-17-50221)*
# Abbreviations

<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Description</th>
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<tbody>
<tr>
<td>DCPS</td>
<td>Disability Case Processing System</td>
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<td>DDS</td>
<td>Disability Determination Services</td>
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<td>FY</td>
<td>Fiscal Year</td>
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<td>GAO</td>
<td>Government Accountability Office</td>
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<td>OIG</td>
<td>Office of the Inspector General</td>
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<td>OMB</td>
<td>Office of Management and Budget</td>
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<td>PI</td>
<td>Product Increment</td>
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<td>SSA</td>
<td>Social Security Administration</td>
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OBJECTIVE

Our objective was to evaluate the Social Security Administration’s (SSA) progress in developing and implementing its Disability Case Processing System (DCPS) as of August 2017.

BACKGROUND

SSA partners with State disability determination services (DDS) to evaluate disability claims and make disability determinations.1 The DDSs use various customized systems to process disability cases. According to SSA, it pays about $32 million each year to operate and maintain these legacy systems.

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

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

The Agency is using an incremental approach to develop and deploy the new DCPS. In December 2016, SSA released its first working software to the Delaware, Maine, and Ohio DDSs, enabling them to process adult initial disability claims that involved only physical allegations and met the criteria for fully favorable decisions under the Quick Disability Determination and Compassionate Allowance programs.2 Since 2016, SSA has continued developing and implementing new releases that have provided additional functionality.

In a February 13, 2015 letter to the Inspector General, Chairman Johnson, Subcommittee on Social Security, Committee on Ways and Means, expressed concerns regarding the development of DCPS and requested that we provide regular reports to keep the Subcommittee informed of SSA’s DCPS-related efforts. This report is one in a series that examines SSA’s DCPS project.3

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

1 Disability Determinations, 42 U.S.C. § 421 (2011). There are 52 DDSs, 1 in each of the 50 States, the District of Columbia, and Puerto Rico.

2 Compassionate Allowances and Quick Disability Determinations allow expedited decisions for claimants who have the most severe disabilities.

3 For information about our other related DCPS reports, see Appendix B.
RESULTS OF REVIEW

As of August 2017, the 9 participating DDSs had processed over 1,600 disability claims using DCPS. DDS staff we interviewed were pleased with the progress so far and were looking forward to DCPS having full functionality.

SSA’s goals are to deliver functionality to support all initial and reconsideration cases by January 2018 and all remaining workloads—including continuing disability reviews and DDS disability hearings—by April 2018. The Agency’s ability to meet these goals will depend on the velocity with which it completes the backlog of story points identified to-date as well as the volume of work for which it has not yet developed stories.

DCPS Releases and Cases Processed

In March 2017, SSA deployed its second major DCPS release to the Delaware, Maine, and Ohio DDSs. This release included functionality to support additional disability claim types that resulted in fully favorable allowances. In April 2017, SSA deployed the software to the Iowa, Rhode Island, and Virginia DDSs.

In July 2017, SSA deployed its third major DCPS release to participating DDSs, which added functionality to support denials as well as requesting and scheduling consultative examinations in certain circumstances. In August 2017, SSA deployed DCPS to the Nebraska, South Dakota, and Washington DDSs, bringing the total number of DDSs using the new system to nine. As of August 28, 2017, the DDSs had made 1,665 determinations using DCPS.

SSA took a measured approach in implementing the new functionality delivered with the July release. To ensure the new functionality was working as intended, SSA asked participating DDSs to process no more than two cases per day. In addition, the ability to request and schedule consultative examinations was initially made available to two of the participating DDSs.

Plan for Future Releases and Estimated Costs

SSA plans to deploy the next major release to current users in October 2017 and introduce it to three new DDSs in November 2017. SSA expects this release will enable users to process adult reconsideration cases. Figure 1 summarizes SSA’s functionality goals for the remaining product increments.5

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4 Reconsideration is the first step in the administrative review process that SSA provides to a claimant who is dissatisfied with an initial determination. SSA, POMS, GN-General, ch. GN 031, subch. GN 03102.100, sec. B.1 (February 7, 2017).

5 See Appendix C for additional details about the Agency’s Product Roadmap.
As of the end of August 2017, SSA’s cumulative costs for the new DCPS project were about $64.8 million. The Agency expects to complete development—and is planning to deploy DCPS to 23 of the 52 DDSs—by April 2018, at a total cost of about $86.5 million. In addition, SSA projects it would spend approximately $33 million from April 2018 through September 2019 to deploy DCPS to all remaining DDSs.

SSA is planning for DDSs to begin retiring their legacy systems in Fiscal Year (FY) 2019. The Agency expects it will retire all legacy systems by the end of FY 2020. SSA estimates it would spend about $6.5 million each year, beginning in FY 2020, to operate and maintain DCPS.

Development Progress

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

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6 “Recon” refers to reconsideration cases.

7 These cumulative costs do not include costs SSA expended on DCPS Beta.
SSA reported that, as of August 22, 2017, it had completed 19,774 (73 percent) of the 27,101 total story points identified to-date.\textsuperscript{8} Figure 2 illustrates SSA’s progress in developing DCPS.

\textbf{Figure 2: DCPS Burn-up Chart as of August 22, 2017}

Source: SSA

SSA’s ability to meet its delivery goals will depend on the velocity with which it completes the backlog of story points identified to-date as well as the volume of work for which it has not yet developed stories.

\textit{Accumulation of New Story Points}

While SSA made progress in completing user stories, the universe of story points continued to grow. As expected in an Agile environment, SSA continually updates the backlog of user stories. For example, the Agency identifies new user requirements and system functionality needed to process certain types of cases and adds new user stories to the backlog. The backlog may also increase when the Agency identifies defects. If a story was accepted and closed but

\textsuperscript{8} This does not mean DCPS was 73 percent complete. As expected in an Agile development environment, the Agency had not yet identified all the user stories needed for DCPS to provide full functionality.
later found not to meet the acceptance criteria, a defect is created. Defects are assigned story points and prioritized within the backlog as another user story.

The number of user stories grew, in part, because SSA included work that did not directly relate to delivering specific user requirements (for example, maintaining network infrastructure; troubleshooting and resolving issues with development software; and bringing new team members onboard). SSA treated these tasks as user stories and tracked their completion as progress toward system development. There is no Federal guidance on how Agile teams should plan or track technical tasks that do not directly relate to user functionality but have to be completed to deliver working software.

In June 2016, SSA identified 11,890 story points needed to deliver functionality to support initial claims and reconsiderations. By August 22, 2017, that number had increased by 128 percent to 27,101. Figure 3 shows the completed and backlog story points between June 7, 2016 and August 22, 2017.

![Figure 3: Completed and Backlog Story Points](source: OIG developed using data provided by SSA.)

As shown in Figure 4, to measure SSA’s progress since June 2016, we netted the number of new story points identified during each sprint with the number of story points completed during the sprint. For example, for the sprint ended August 22, 2017, the Agency completed 488 story points. However, SSA also added 772 new story points to the backlog during that sprint. Therefore, the Agency’s net recession for the sprint was -284 points.
According to SSA, some user stories in the backlog may become irrelevant as development progresses and, as a result, the Agency may remove or de-prioritize them. Likewise, other user stories may be identified that will need to be added to the backlog based on end users’ input and needs. This is an inherent part of Agile, which focuses on developing and delivering exactly what the user needs.

Although we cannot know how many new user stories SSA will identify in the future, the universe of story points will likely continue growing. While this is common in an Agile environment, it will impact SSA’s ability to meet its delivery goals.

**Development Velocity**

Velocity tracks the rate of work using the number of story points completed in a sprint. According to the Government Accountability Office (GAO), measuring and tracking velocity can be a useful tool in managing Agile projects. As shown in Figure 5, velocity has varied considerably. As a result, we cannot predict what SSA’s velocity will be in the future.

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Risks to the DCPS Project

As required by the Office of Management and Budget (OMB), SSA developed a Risk Management Plan to reduce the effects of uncertainties on DCPS’s success. The Agency maintains a Risk Register to identify, assess, and track the risks associated with DCPS and updates the status of those risks at least monthly. As of August 2017, SSA had concluded the following risks either will, or are very likely to, occur and would significantly affect the program. (For additional information about the risks SSA identified, see Appendix D.)

Fiscal Functionality

To make disability determinations, DDSs may incur expenses to procure medical evidence, send claimants to consultative examinations, or consult with medical and psychological professionals. Therefore, DCPS must interface with State-managed fiscal systems. According to SSA, the fiscal process includes gathering State-specific requirements and working with the DDSs and their respective regional offices to review the internal fiscal processes and modify them, where possible, to make them more efficient. The current fiscal interface does not accommodate all

10 Most sprints are 2 weeks in duration. However, the sprints ended December 1, 2015; January 5, 2016; November 29, 2016; January 3, 2017; April 4, 2017; June 20, 2017; and July 11, 2017 included 3 weeks.


12 While SSA identified technical, schedule, and environmental risks to DCPS, it did not identify any risks associated with continued funding for the project.
States’ requirements, which may affect the project as more DDSs are expected to implement DCPS. As a result, SSA increased the probability of this risk to high in July 2017. To address this risk, SSA’s long-term plan is to develop a centralized fiscal process.

In a May 17, 2016 letter to Chairman Johnson, the prior SSA Chief Information Officer stated, “…a major reason the previous [DCPS Beta] attempt failed was that they addressed site-specific functionality from the wrong angle. Consider the most glaring issue: we have to connect to fifty-four different fiscal systems to make payments to vendors through the financial systems provided by each State.” In addition, SSA acknowledged that DDS-specific requirements—including fiscal—were so complex that they contributed to cost and schedule overruns of the prior DCPS Beta system.13 Given the complexity of State-specific functionality and its impact on the prior DCPS Beta initiative, it is imperative that SSA carefully plan for and manage this component of DCPS.

**Development Velocity**

SSA acknowledged its development velocity may not be sufficient to enable the Agency to deliver functionality when planned. To mitigate this risk, SSA obtained additional personnel and planning activities focused on delivering the needed functionality.

**Team Resources**

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

**DCPS Alternatives**

According to OMB, agencies should periodically update their alternatives analyses to capture changes in context for an investment decision.14 In August 2016, the vendor that supported the software used by 46 of the 52 DDSs announced plans to modernize its legacy systems over a 24-month period.15 Our December 2016 report stated that SSA should evaluate its plans to

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15 The DDSs that used the vendor’s existing systems processed 83 percent of the total disability determination workload in FY 2015.
ensure it can demonstrate to Congress and the public that it has chosen the most cost-effective alternative to achieve its goals.\textsuperscript{16}

In April 2017, SSA hired a contractor to conduct an independent Buy-versus-Build analysis to evaluate the Agency’s DCPS custom build solution and any other existing and/or future commercial solutions.\textsuperscript{17} SSA provided us a copy of the contractor’s report and plans to brief us on the results in late September 2017.

**CONCLUSION**

SSA’s goals are to deliver functionality to support all initial and reconsideration cases by January 2018 and all remaining workloads—including continuing disability reviews and DDS disability hearings—by April 2018. However, the Agency had not yet identified all the user stories associated with providing that functionality.

SSA’s ability to meet its delivery goals will depend on the velocity with which it completes the backlog of story points identified to-date as well as the volume of work it has not yet identified. Given the uncertainty of the future growth of the backlog and SSA’s ongoing development velocity, we were unable to conclude whether the Agency’s release goals were reasonable.

As Chairman Johnson requested, we plan to continue monitoring the DCPS project and issue periodic reports on SSA’s DCPS-related efforts.

Rona Lawson
Assistant Inspector General for Audit


\textsuperscript{17} Contract No. TIRNO-99-D-00005/SS00-17-30196, Award amount $237,535.
APPENDICES
Appendix A – Scope and Methodology

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

- Reviewed documentation on SSA’s progress with developing and implementing DCPS, such as the Product Release, DCPS Product Road Maps, Burn-up Charts, and Feature Area Breakdown spreadsheets.
- Reviewed Federal guidance and industry best practices on Agile implementation.
- Reviewed the list of stories completed in Product Increments 5 and 6.
- Reviewed monthly updates to the DCPS Risk Register.
- Attended various DCPS-related briefings.
- Interviewed DCPS users at the Delaware and Ohio DDSs and observed system functionality.
- Interviewed SSA personnel from the DCPS Chief Program Office.

We conducted our review from April through August 2017 in Baltimore, Maryland. The principal entity reviewed was SSA’s DCPS Office of the Chief Program Officer. We determined the data used for this audit were sufficiently reliable to meet our objective. We conducted this performance audit in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective.
Appendix B – RELATED OFFICE OF THE INSPECTOR GENERAL REPORTS

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

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

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

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

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

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

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

**Congressional Response Report: The Social Security Administration’s Analysis of Alternatives for the Disability Case Processing System (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.
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.


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 ROAD MAP

The Product Road Map represents the Social Security Administration’s (SSA) plans for the Disability Case Processing System (DCPS). The Road Map is subject to change because of many factors, including current velocity, ability to estimate more accurately, and changing business priorities. The shaded area within Product Increment (PI) 7 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 8.

Figure C–1: SSA’s DCPS Product Road Map¹

¹ SSA prepared the Road Map. References to “our” and “us” in the note refer to the Agency, not the Office of the Inspector General.
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
CDR    Continuing Disability Review
CE     Consultative Exam
DC     Disabled Child
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
<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
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<tbody>
<tr>
<td>ERE</td>
<td>Electronic Records Express</td>
</tr>
<tr>
<td>HIT</td>
<td>Health Information Technology</td>
</tr>
<tr>
<td>MC/PC</td>
<td>Medical Consultant/Psychological Consultant</td>
</tr>
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<td>MER</td>
<td>Medical Evidence of Record</td>
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<td>MQFE</td>
<td>Medicare Qualified Federal Employee</td>
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<tr>
<td>MQGE</td>
<td>Medicare Qualified Government Employee</td>
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<tr>
<td>MRFC</td>
<td>Mental Residual Functional Capacity</td>
</tr>
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<td>QA</td>
<td>Quality Assurance</td>
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<td>QDD</td>
<td>Quick Disability Determination</td>
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<td>RECON</td>
<td>Reconsideration</td>
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<td>RFC</td>
<td>Residual Functional Capacity</td>
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<td>SNO</td>
<td>Special Notice Option</td>
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<td>SPA</td>
<td>State Parent Agency</td>
</tr>
<tr>
<td>SSN</td>
<td>Social Security Number</td>
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**Forms**

- **SSA-827**  
  *Authorization to Disclose Information to the Social Security Administration*

- **SSA-831**  
  *Disability Determination and Transmittal*

- **SSA-1696**  
  *Appointment of Representative*
## Appendix D—Disability Case Processing System Risk Management Plan

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

### Table D–1: Risk Register for DCPS

<table>
<thead>
<tr>
<th>Risk</th>
<th>Assessed Potential Impact</th>
<th>Assessed Probability of Occurrence</th>
<th>Mitigation Strategy</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCPS fiscal interface does not accommodate all State system</td>
<td>High</td>
<td>High</td>
<td>Short-term solution to develop a fiscal interface and payment file; long-term solution of implementing centralized third party fiscal functionality</td>
</tr>
<tr>
<td>requirements to connect for fiscal payments</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Velocity is not at a high enough rate to meet planned delivery</td>
<td>High</td>
<td>High</td>
<td>Keep scope contained and create deployment teams</td>
</tr>
<tr>
<td>dates and functionality in January 2018</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insufficient resources for teams (infrastructure, fiscal, and</td>
<td>High</td>
<td>High</td>
<td>Create deployment teams that will relieve the teams (infrastructure, fiscal, and vendor) of new site preparation duties</td>
</tr>
<tr>
<td>vendor) may delay delivering functionality</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insufficient end-to-end testing</td>
<td>High</td>
<td>Medium</td>
<td>Use automated testing and test thoroughly with early user involvement</td>
</tr>
<tr>
<td>Insufficient SSA resources to support Agile development lifecycle</td>
<td>High</td>
<td>Medium</td>
<td>Identify alternative approaches to SSA’s software development lifecycle for Agile release cycles</td>
</tr>
<tr>
<td>Dependencies on other projects</td>
<td>High</td>
<td>Medium</td>
<td>Work with subject matter experts to develop integration approaches</td>
</tr>
<tr>
<td>Complexity for State disability determination services (DDS)</td>
<td>High</td>
<td>Medium</td>
<td>Build common functionality into the core product and use flexibilities to enable site-specific customizations</td>
</tr>
<tr>
<td>special requirements</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inability to create user test cases efficiently</td>
<td>High</td>
<td>Medium</td>
<td>Create a utility to automatically generate test cases</td>
</tr>
<tr>
<td>Inability to convince DDS users of the value and advantage of</td>
<td>High</td>
<td>Medium</td>
<td>Build and demonstrate valuable, working software, based on close and continuous collaboration with disability community</td>
</tr>
<tr>
<td>DCPS may negatively affect DDS adoption rates</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Immature application and data architectures</td>
<td>High</td>
<td>Medium</td>
<td>Increase focus on the application and data architecture</td>
</tr>
<tr>
<td>Risk</td>
<td>Assessed Potential Impact</td>
<td>Assessed Probability of Occurrence</td>
<td>Mitigation Strategy</td>
</tr>
<tr>
<td>---------------------------------------------------------------------</td>
<td>---------------------------</td>
<td>-----------------------------------</td>
<td>---------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Lack of dedicated support for open-source technical software(^1)</td>
<td>Medium</td>
<td>Low</td>
<td>Procure dedicated support for the chosen DCPS technical software</td>
</tr>
<tr>
<td>Insufficient initial developer unit testing</td>
<td>Medium</td>
<td>Low</td>
<td>All code will go through a code review process</td>
</tr>
<tr>
<td>Insufficient user testing</td>
<td>Medium</td>
<td>Low</td>
<td>Incorporate usability testing into software development lifecycle and solicit volunteers from the DDS community</td>
</tr>
<tr>
<td>DDS may not have technical ability or resources to develop customized features</td>
<td>Low</td>
<td>Medium</td>
<td>Build core product to provide default functionality for all DDSs; offer DDS-developed shareware; offer SSA developer resources; offer contractor support for DDS development</td>
</tr>
<tr>
<td>Transition to a new IT services contract may cause loss of production(^2)</td>
<td>Low</td>
<td>Low</td>
<td>Establish a transition plan that accounts for maintaining program artifacts, system access, and program standards</td>
</tr>
</tbody>
</table>


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\(^1\) Open source software is publicly available software that can be accessed, used, modified, and shared by anyone. In contrast to proprietary software that is owned and supported by organizations, open source software does not have dedicated vendor support.

\(^2\) SSA uses staff from multiple vendors to develop DCPS through the Agency’s Information Technology Support Services Contract. SSA extended the current contract through Fiscal Year 2018; therefore, the Agency considered the risk to DCPS to be low.
MEMORANDUM

Date: September 19, 2017

To: Rona Lawson
   Assistant Inspector General for Audit

From: Stephanie Hall
   Acting Deputy Chief of Staff


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

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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