Mission

By conducting independent and objective audits, evaluations and investigations, we inspire public confidence in the integrity and security of SSA’s programs and operations and protect them against fraud, waste and abuse. We provide timely, useful and reliable information and advice to Administration officials, Congress and the public.

Authority

The Inspector General Act created independent audit and investigative units, called the Office of Inspector General (OIG). The mission of the OIG, as spelled out in the Act, is to:

- Conduct and supervise independent and objective audits and investigations relating to agency programs and operations.
- Promote economy, effectiveness, and efficiency within the agency.
- Prevent and detect fraud, waste, and abuse in agency programs and operations.
- Review and make recommendations regarding existing and proposed legislation and regulations relating to agency programs and operations.
- Keep the agency head and the Congress fully and currently informed of problems in agency programs and operations.

To ensure objectivity, the IG Act empowers the IG with:

- Independence to determine what reviews to perform.
- Access to all information necessary for the reviews.
- Authority to publish findings and recommendations based on the reviews.

Vision

We strive for continual improvement in SSA’s programs, operations and management by proactively seeking new ways to prevent and deter fraud, waste and abuse. We commit to integrity and excellence by supporting an environment that provides a valuable public service while encouraging employee development and retention and fostering diversity and innovation.
MEMORANDUM

Date: September 26, 2008

To: The Commissioner

From: Inspector General

Subject: The Social Security Administration’s Contract with Unified Consultants Group, Inc., Contract Number SS00-05-60015 (A-15-08-18033)

OBJECTIVE

Our objectives were to determine whether the contractor was complying with the contract terms and applicable Social Security Administration (SSA) policies, and to ensure SSA personnel were properly monitoring the contract. We also determined whether SSA was maximizing the use of the benefits rendered from the contractor’s services.

BACKGROUND

On July 22, 2005, SSA awarded Unified Consultants Group, Inc., (UCG) a contract to conduct physical security facility reviews (PSFR) at SSA facilities\(^1\) nationwide. The PSFR program is designed to assess the adequacy of physical security measures in place at an SSA facility and determine whether there are vulnerabilities that must be addressed. Physical security includes those safeguards that protect SSA facilities, staff and visitors, information, and equipment, but excludes computer systems security. Refer to Appendix D for a list of UCG’s most frequently identified field office security issues. SSA’s Administrative Instructions Manual System (AIMS) defines the priority of physical security issues by designating the most serious security problems as Tier 1, and lesser security issues as Tier 2. Physical security issues relating to fire safety and training are classified as health and safety issues. See Appendix E for a list of Tier 1 and Tier 2 security requirements.

\(^{1}\)SSA facilities may include (1) field offices, (2) Offices of Disability Adjudication and Review (ODAR), (3) Contact Stations, (4) ODAR Remote Sites, (5) teleservice centers, (6) regional offices, (7) program service centers, (8) the Regional Training Center, (9) the National Records Center, (10) the Regional Office Warehouse and (11) SSA Headquarters.
The contract requires that UCG review 312 offices at a cost of $2,773,332.

<table>
<thead>
<tr>
<th>Period of Performance</th>
<th>Number of Offices</th>
<th>Total Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Base Year - Fiscal Year (FY) 2006</td>
<td>100</td>
<td>$881,590</td>
</tr>
<tr>
<td>Option Year 1 - FY 2007</td>
<td>106</td>
<td>$890,821</td>
</tr>
<tr>
<td>Option Year 2 - FY 2008</td>
<td>106</td>
<td>$1,000,921</td>
</tr>
<tr>
<td>Total</td>
<td>312</td>
<td>$2,773,332</td>
</tr>
</tbody>
</table>

The SSA Office of Facilities Management (OFM), Office of Protective Security Services, (OPSS) is responsible for ensuring a safe and secure workplace for Social Security employees nationwide. OPSS personnel are responsible for managing and monitoring the UCG contract. OPSS’ responsibilities under this contract include (1) selecting the SSA facilities to be reviewed, (2) ensuring UCG’s compliance with the contract, (3) reviewing UCG’s completed PSFR reports, (4) monitoring the facilities’ responses to UCG’s recommendations and (5) examining and approving UCG’s invoices.

Security Assessments and Funded Enhancements

OFM developed and implemented the Security Assessments and Funded Enhancements (SAFE) system, which is a secure web portal, to provide a central repository of physical security reports, information and tools\(^2\) to assist in managing the Agency’s physical and protective security program. SAFE, which has been available on the SSA Intranet since October 1, 2007, provides a means of better tracking security reviews for a designated activity, corrective actions taken to correct deficiencies and funding use for security compliance. All field office managers, assistant managers and area directors have access to their offices’ physical security data on SAFE.

Before SAFE was implemented, SSA’s regional physical security coordinators and Office of Disability Adjudication and Review (ODAR) Physical Security Coordinators (PSC) maintained varying forms of documentation to track corrections and request funds from OPSS, if necessary, to assist in resolving the identified physical security issues.

RESULTS OF REVIEW

Overall, we found UCG was conducting the PSFRs in compliance with the contract terms and applicable SSA policy, and OPSS personnel were properly managing and monitoring the UCG contract. We found UCG completed the required number of PSFRs within the required time frames, and submitted reports with the information required by the contract. However, we found (1) inadequate follow-up of outstanding

\(^2\) SAFE provides information on-line, which includes a Physical Security Action Plan, and tools, such as an Occupant Emergency Plan Questionnaire, electronic logs (intrusion detection system testing and activation; duress alarm testing and activation; fire extinguisher inspection; emergency lighting testing; key logs; training logs; and evacuation drills), and an online Physical Security Self-Assessment Questionnaire.
Inadequate Follow-up of Outstanding FY 2006 and 2007 PSFR Recommendations

The office manager must address each PSFR security team finding. The PSFR is a comprehensive review that checks for approximately 70 potential physical security issues. Any disagreement with a finding or suggested remediation method must be presented to the Regional or ODAR Headquarters PSC, who will present the issue to OPSS for resolution.4

We reviewed 38 PSFRs consisting of 18 and 20 PSFRs for FYs 2006 and 2007, respectively. These PSFRs identified 577 recommendations. For the FY 2006 and 2007 PSFRs, OPSS passed the PSFR reports to the regions to address the UCG identified security issues. Our review of the regional and ODAR PSC responses to the status of UCG’s recommendations found that 311 (54 percent) of the 577 recommendations were closed; however, 266 (46 percent) of the recommendations remained open, as shown in the Table below.

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>Number of PSFRs Reviewed</th>
<th>Closed Recommendations</th>
<th>Open Recommendations</th>
<th>Total Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006</td>
<td>18</td>
<td>154</td>
<td>117</td>
<td>271</td>
</tr>
<tr>
<td>2007</td>
<td>20</td>
<td>157</td>
<td>149</td>
<td>306</td>
</tr>
<tr>
<td>Total</td>
<td>38</td>
<td>311</td>
<td>266</td>
<td>577</td>
</tr>
</tbody>
</table>

Closed Recommendations

We did not independently verify the information reported. As a result, we did not assess whether the recommendations were properly closed. The regional and ODAR PSC responses indicated that 42 of the 311 closed recommendations were closed because the office disagreed with the recommendation.

Open Recommendations

The regional and ODAR PSC responses indicated that 96 of the 266 open recommendations pertained to areas requiring mandatory Tier 1 security

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4 Id.
enhancements. The remaining 170 open recommendations related to less critical physical security issues (Tier 2), and health and safety issues.

In some instances, the PSCs could not provide information on the status of the recommendation or stated the recommendation was still under review. For example, in October 2006, UCG found the exterior lighting in one field office was activated on a timer between 5 p.m. and 8 p.m. UCG recommended that the lessor of the building reset the lights’ automatic timer to remain on during all hours of darkness. Sufficient lighting eliminates potential hiding areas and aids in security monitoring. However, as of April 2008, the PSC could not provide information as to whether this recommendation had been addressed or resolved. UCG is completing its work as required by the contract and making recommendations, therefore, the PSCs should be more responsive in completing the required corrective actions, and OPSS along with the Region and ODAR PSCs should ensure all recommendations are addressed.

Also, we found SSA had not addressed 56 recommendations identified in the FY 2006 reviews. All of these reviews were completed during October through December 2005. In one instance, the PSC’s response indicated action was taken. In November 2005, UCG identified an expired fire extinguisher in a field office computer room that may not have worked in the event of a fire. In April 2008, we performed a site visit and found the fire extinguisher had been removed. We were informed the field office was replacing the fire extinguisher. Additionally, a PSFR conducted in April 2007 found fire extinguishers were not clearly marked. SSA policy indicates fire extinguishers should be mounted where they are easily seen and accessed, and where visual obstructions cannot be avoided the location must be conspicuously marked. Accordingly, labels should be applied that conspicuously indicate the positions of obstructed fire extinguishers. In April 2008, we performed a site visit and found the labels of certain obstructed fire extinguishers were too low to be seen over office cubicle walls.

5 AIMS, General Administration Manual (GAM) § 12.06.07 C, Tier 1 Security Enhancements. This policy requires SSA management to ensure that, in SSA offices dealing with the public, mandatory Tier 1 security enhancements are in place.

6 AIMS, GAM § 12.06.07 D, Tier 2 Security Enhancements. Although not mandated, management is to consider Tier 2 enhancements.

7 AIMS, GAM § 13.04.09 Attachments A- J.

8 AIMS, MRM § 04.50.08.E.
SSA’s physical protective security program protects all Agency personnel, visitors, records, equipment and facilities. Inadequate physical protective security controls\(^9\) could result in

1. physical harm to employees and the public,
2. damage to or loss of facilities,
3. the compromise of personally identifiable information,
4. theft,
5. destruction of Government records and property,
6. vulnerability to civil liability, and
7. inability to carry out SSA’s mission.

The examples noted above indicate that identified security issues existed for lengthy periods of time. Additionally, the PSCs stated that some recommendations were still open as a result of a pending action (such as requesting funds). However, we found that 163 (61 percent) of 266 recommendations did not require funding, or the cost of the repair and/or improvement was less than $200. Based on UCG’s estimates, SSA could resolve all 163 issues with as little as $2,963 in funding. While we recognize that SSA policy includes no specific timeframes for correcting security issues, we believe 2 years should be sufficient time to resolve security issues—particularly mandatory Tier 1 issues.

SSA is paying about $2.8 million for a contract meant to improve the security of all Agency personnel, visitors, records, equipment and facilities. However, SSA is not taking timely action to correct security issues identified by the contractor. At the time of our review, many of the contractor’s recommendations remained unimplemented and SSA facilities, data, and employees continued to be vulnerable.

**Inefficient Use of SAFE**

Starting in FY 2008, UCG input the PSFR results directly into SAFE; therefore, all UCG recommendations and cost estimates are included in SAFE. As previously stated, the office manager must address each PSFR security team finding.\(^10\) Any disagreement with a finding or suggested remediation method must be presented to the Regional or ODAR Headquarters PSC who will present the issue to OPSS for resolution.\(^11\)

OPSS monitors the status of each finding and the implementation of corrective actions via the SAFE web portal. The PSCs are responsible for contacting managers to obtain

\(^9\) AIMS, MRM § 04.50.02.B.

\(^10\) AIMS, MRM § 04.50.09.D.4.

\(^11\) Id.
current information about the corrective actions implemented. The office manager is responsible for marking the items “Resolved” in SAFE after remediation is complete.\textsuperscript{12}

We reviewed 17 PSFRs for FY 2008 and found that 5 (29 percent) had included an entry in SAFE. For those regions that completed some form of entry in SAFE, we found many input requests for funds, but did not identify any non-funded corrective action entries. Generally, for the non-funded corrective actions, there was no evidence the issue was addressed or resolved. Also, in several instances, the site managers stated they had not heard of SAFE or had no training and/or understanding of how SAFE operated. Subsequent to our review, we learned that SAFE had not been officially rolled out nationwide until July 2, 2008. Therefore, offices may not have been using the system, although it was available.

SAFE could be better used if SSA would require that the regions respond to all PSFR recommendations (that is, funded and non-funded, and current and prior year) within the SAFE web portal. OPSS stated that SSA policy is being revised to require the use of SAFE.

**Missing Suitability Determination**

We reviewed the suitability determinations for the 9 contractor employees on this contract. We identified one instance where SSA did not complete the suitability process for a UCG employee, causing non-compliance with the Security Requirement Clause of the contract. Specifically, we identified one contractor employee (a subcontractor with SEI) who had performed under the contract\textsuperscript{13} for at least 2 years with access to sensitive SSA information, who did not have a pre-screening or suitability determination. SSA’s Center for Personnel Security and Project Management (CPSPM) confirmed that it had no suitability determination letter for this individual.

According to CPSPM staff, processing of the suitability determination for this individual was under another SSA contract with SEI. However, the SEI contract ended before the suitability determination was completed; therefore, SSA stopped the suitability determination process, no continuation of the process took place under the current contract with UCG. Also, UCG stated the SEI employee without the suitability determination had retired, and his replacement had submitted information for a suitability determination.

The sensitive physical security information in the PSFR protects Agency personnel, visitors, records, equipment and facilities; therefore, SSA must remain committed to safeguarding its information. The SSA Office of Acquisition and Grants contract officer and the OPSS Contracting Officer’s Technical Representative should consistently

\textsuperscript{12} Id.

\textsuperscript{13} SSA Contract Number SS00-05-60015, section C-4.6 Security Requirements Clause, (b) defines “performing under the contract” as either working on-site at an SSA facility (including visiting the SSA site for any reason) or having access to agency programmatic or sensitive information.
monitor the staffing of the contractor and any sub-contractor to ensure that only approved staff are allowed access to SSA’s facilities and programmatic or sensitive information.

CONCLUSION AND RECOMMENDATIONS

We found UCG was conducting the PSFRs in compliance with the contract terms and applicable SSA policies, and OPSS personnel were properly managing and monitoring the UCG contract.

However, SSA is not maximizing the potential benefits of the UCG contract; since SSA has not completed the corrective actions on contractor recommendations timely, effectively and efficiently. Therefore, SSA should either take timely, effective and efficient action on the UCG recommendations, or SSA should modify future contracts to limit the scope of the testing to those areas that the Agency considers more significant and is willing to resolve timely. The reduction in the scope of the PSFRs, to focus only on the corrective actions that SSA would be willing to undertake, could result in potential savings to SSA in a lower contract cost.

Also, we believe SAFE is a useful program, but internal controls must be strengthened to ensure the SSA staff responsible for corrective action complete those actions timely and satisfy the security needs of the office. Additionally, OPSS should make an effort to address older recommendations before SAFE implementation. Some of these recommendations require little or no funding and should be immediately addressed and resolved.

We recommend SSA:

1. Monitor and resolve all outstanding FY 2006 and 2007 PSFR recommendations promptly.

2. Revise SSA policy to require that the regions enter all remedial action into SAFE promptly. Also, SSA should remind all field office managers, assistant managers and area directors on the use of SAFE and ensure recommendations are addressed timely.

3. Ensure all contractor personnel (including subcontractors) who work on the UCG contract have a favorable suitability determination.
AGENCY COMMENTS AND OIG RESPONSE

SSA agreed with the recommendations. The full text of the Agency’s comments is included in Appendix C.

Patrick P. O’Carroll, Jr.
Appendices

APPENDIX A – Acronyms
APPENDIX B – Scope and Methodology
APPENDIX C – Agency Comments
APPENDIX D – Unified Consultants Group’s Most Frequently Identified Field Office Security Issues
APPENDIX E – Social Security Administration’s Tier Security Enhancements
APPENDIX F – OIG Contacts and Staff Acknowledgments
Acronyms

AIMS  Administrative Instructions Manual System
CCTV  Closed Circuit Television System
CPSPM Center for Personnel Security and Project Management
FY  Fiscal Year
GAM  General Administration Manual
MRM  Materiel Resources Manual
ODAR  Office
OFM  Office of Facilities Management
OIG  Office of the Inspector General
OPSS  Office of Protective Security Services
PSAP  Physical Security Action Plan
PSC  Physical Security Coordinator
PSFR  Physical Security Facility Review
SAFE  Security Assessments and Funded Enhancements
SAS  Space Allocation Standards
SSA  Social Security Administration
UCG  Unified Consultants Group, Incorporated
Scope and Methodology

To accomplish our objectives, we:

- Reviewed the Unified Consultants Group, Inc., (UCG) contract SS00-05-60015 and contract modifications for Fiscal Years (FY) 2006 through 2008. Also, we reviewed the Social Security Administration’s (SSA) Administrative Instructions Manual System sections related to physical security.

- Reviewed the Office of Protective Security Services’ physical security facility review (PSFR) site selection list.

- Sampled 55 PSFR reports and reviewed the findings and recommendations. Additionally, we assessed the reported information to ensure compliance with the contract.

  - The base year contract included the requirement for 100 physical security surveys. The subsequent option years require 106 physical security surveys per option year.

  - For FYs 2006 and 2007, we sorted the sites visited by Region. We selected the first two sites visited in each Region. For FY 2006, 9 Regions were visited; therefore, we reviewed 18 site reports. For FY 2007, 10 Regions were visited; therefore, we reviewed 20 site reports.

  - Additionally, we ensured each report contained the items required by the contract and the required number of PSFRs were completed.

  - For FY 2008, we used December 1st as the cut-off date (since this year was on-going). We reviewed the reports for all 17 sites visited during the first 2 months of FY 2008.

- Evaluated internal controls at UCG and SSA’s Offices of Protective Security Services, Acquisition and Grants, and Finance to determine if the processes were functioning properly, such as, contract invoices were properly reviewed and paid.

- Interviewed staff at UCG and SSA’s Offices of Protective Security Services, Acquisition and Grants, and Finance.
Evaluated OPSS’ oversight of UCG to ensure the contractor’s compliance with the contract, which included OPSS’ examining and approving of UCG’s invoices for our sample group.

Obtained written responses from the Regional and Office of Disability Adjudication and Review physical security coordinators on their monitoring process and the status of corrective actions for our sample group.

Conducted interviews with selected site managers a week after UCG completed reviews at SSA field office sites. We obtained information on the contractor actions and the site manager’s receptiveness to the findings.

Visited seven field offices in our sample and observed the corrective actions.

We performed our audit at the SSA Headquarters and field offices in Boston, New York, Philadelphia, Atlanta, and Kansas City from November 2007 through May 2008. We found the data used for this audit were sufficiently reliable to meet our objectives. The entities audited were the Offices of Acquisition and Grants, and Protective Security Services under the Deputy Commissioner for Budget, Finance and Management.

We conducted this 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 objectives. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our objectives.
Agency Comments
MEMORANDUM

Date: September 18, 2008

To: Patrick P. O'Carroll, Jr.
Inspector General

From: David V. Foster /s/
Executive Counselor to the Commissioner


We appreciate OIG’s efforts in conducting this review. Attached is our response to the recommendations.

Please let me know if we can be of further assistance. Please direct staff inquiries to Ms. Candace Skurnik, Director, Audit Management and Liaison Staff, at (410) 965-4636.

Attachment
Thank you for the opportunity to review and provide comments on this draft report.

**Recommendation 1**


**Comment**

We agree. We will monitor and resolve all outstanding fiscal year 2006 and 2007 Physical Security Facility Review recommendations.

**Recommendation 2**

Revise policy to require that the regions enter all remedial action into Security Assessments and Funded Enhancements (SAFE) promptly. Also, remind all field office managers, assistant managers, and area directors on the use of SAFE and ensure recommendations are addressed timely.

**Comment**

We agree. On August 22, 2008, we issued the Administrative Instructions Manual System (AIMS) 12.06, which mandates SAFE usage. We are working to update AIMS 12.06 to include timeframes for remedial actions. By March 31, 2009, we will complete updates to SAFE. This update will remind users of pending actions that need handling, to update Physical Security Action Plans/Occupant Emergency Plans, of pending remedial actions, etc. Any pending items that do not require funding will be corrected within 30 days of the security review report. Deficiencies identified that require funding will be corrected within 12 months of the security review report or an extension must be requested.

**Recommendation 3**

Ensure all contractor personnel, (including subcontractors), who work on the Unified Consultants Group, Incorporated (UCG) contract, have a favorable suitability determination.

**Comment**

We agree. We have identified a single point of contact to review and monitor all persons working under the UCG contract. We will ensure all UCG employees have proper suitability determinations prior to performing duties.
Unified Consultants Group’s Most Frequently Identified Field Office Security Issues

**Reception:**
1. Reception area chairs/Other objects are not secured.

**Access:**
1. Keys are not stamped "Do not duplicate."

**Doors:**
1. No deadbolt equivalent lock on perimeter doors.

**Intrusion Detection Systems and Duress:**
1. Intrusion detection system or sensors are inadequate.
2. Install/improve closed-circuit television system.
3. Install/improve duress alarm system.

**Lighting:**
1. Inadequate or inoperative exterior lighting.
2. Emergency lighting is not tested monthly.
3. Inadequate or inoperative emergency lighting/no flashlight.

**Plans, Policies and Procedures:**
1. Update and test the Physical Security Action Plan (PSAP) and Occupant Emergency Program.
2. Revise the PSAP/provide employees copies.

**Guard Services:**
1. Guard post orders are inadequate/ No Contract Guard Manual.

**Exterior:**
1. Utilities are not protected.
Social Security Administration’s Tier Security Enhancements

Tier 1 Security Enhancements

Management is to ensure that, in Social Security Administration (SSA) offices dealing with the public, the following mandatory Tier 1 security enhancements are in place:

1. Duress (panic) alarms at all workstations used for interviewing the public. This also includes the reception counter and the private interview room in field offices.

2. Peepholes in exterior and interior doors as needed (and installed at wheelchair height if appropriate). Office of Disability Adjudication and Review (ODAR) hearing rooms are to have peepholes which look into the rooms.

3. Locks and panic bars on exterior and interior doors as needed. Locks are to meet the security locking requirements in the current SSA or ODAR Space Allocation Standards (SAS). Due to technology developments, types of locks may be changed as long as the intent of the SAS is met. Locks are to be installed in accordance with local fire and building codes.

4. Intrusion detection system.

5. Security lighting (interior and exterior) at building entrances and in parking areas controlled by SSA for employee and visitor safety.

Tier 2 Security Enhancements

Although not mandated, management is to consider the following Tier 2 enhancements:

1. Emergency lighting to provide sufficient lighting for employees to safely evacuate the office during power failures and other emergencies.

2. Emergency power back-up systems for critical security systems such as the intrusion detection system.

1 Administrative Instructions Manual System (AIMS), General Administration Manual (GAM) § 12.06.07 C, Tier 1 Security Enhancements.

2 AIMS, GAM § 12.06.07 D, Tier 2 Security Enhancements.
3. Closed circuit television (CCTV) systems (Refer to OFM memorandum dated April 25, 2000 entitled “Use of CCTVs Within SSA/ODAR Offices”, available by contacting OPSS (410) 965-4544).

4. Physical modifications to the space, such as the installation of barrier walls, Plexiglas reception windows, separate restrooms for the public, etc.
OIG Contacts and Staff Acknowledgments

OIG Contacts

Kristen Schnatterly, Acting Director, Financial Audit Division, (410) 965-0433

Mark Meehan, Acting Audit Manager, (410) 966-7147

Acknowledgments

In addition to those named above:

Sig Wisowaty, Senior Auditor

Tonia Hill, Auditor

For additional copies of this report, please visit our web site at www.socialsecurity.gov/oig or contact the Office of the Inspector General’s Public Affairs Staff Assistant at (410) 965-4518. Refer to Common Identification Number A-15-08-18033.
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Overview of the Office of the Inspector General

The Office of the Inspector General (OIG) is comprised of an Office of Audit (OA), Office of Investigations (OI), Office of the Counsel to the Inspector General (OCIG), Office of External Relations (OER), and Office of Technology and Resource Management (OTRM). To ensure compliance with policies and procedures, internal controls, and professional standards, the OIG also has a comprehensive Professional Responsibility and Quality Assurance program.

Office of Audit

OA conducts financial and performance audits of the Social Security Administration’s (SSA) programs and operations and makes recommendations to ensure program objectives are achieved effectively and efficiently. Financial audits assess whether SSA’s financial statements fairly present SSA’s financial position, results of operations, and cash flow. Performance audits review the economy, efficiency, and effectiveness of SSA’s programs and operations. OA also conducts short-term management reviews and program evaluations on issues of concern to SSA, Congress, and the general public.

Office of Investigations

OI conducts investigations related to fraud, waste, abuse, and mismanagement in SSA programs and operations. This includes wrongdoing by applicants, beneficiaries, contractors, third parties, or SSA employees performing their official duties. This office serves as liaison to the Department of Justice on all matters relating to the investigation of SSA programs and personnel. OI also conducts joint investigations with other Federal, State, and local law enforcement agencies.

Office of the Counsel to the Inspector General

OCIG provides independent legal advice and counsel to the IG on various matters, including statutes, regulations, legislation, and policy directives. OCIG also advises the IG on investigative procedures and techniques, as well as on legal implications and conclusions to be drawn from audit and investigative material. Also, OCIG administers the Civil Monetary Penalty program.

Office of External Relations

OER manages OIG’s external and public affairs programs, and serves as the principal advisor on news releases and in providing information to the various news reporting services. OER develops OIG’s media and public information policies, directs OIG’s external and public affairs programs, and serves as the primary contact for those seeking information about OIG. OER prepares OIG publications, speeches, and presentations to internal and external organizations, and responds to Congressional correspondence.

Office of Technology and Resource Management

OTRM supports OIG by providing information management and systems security. OTRM also coordinates OIG’s budget, procurement, telecommunications, facilities, and human resources. In addition, OTRM is the focal point for OIG’s strategic planning function, and the development and monitoring of performance measures. In addition, OTRM receives and assigns for action allegations of criminal and administrative violations of Social Security laws, identifies fugitives receiving benefit payments from SSA, and provides technological assistance to investigations.