Objective
To determine whether the Social Security Administration (SSA) followed its policy to identify and expeditiously process veteran and military casualty disability claims.

Background
SSA policy provides for disability claims filed by current and former military service members to be expedited. SSA identifies these claims as Military Casualty/Wounded Warrior (MC/WW) and Veterans Affairs 100 Percent Permanent and Total (VAPT) disability claims. MC/WW claims involve any current or former member of a military service who sustained an illness, injury, or wound; alleged a physical or mental impairment, regardless of how or where the impairment occurred (that is, in the United States or on foreign soil); and sustained the impairment while on active duty status on or after October 1, 2001. VAPT is a claim involving any veteran of a military service who has a VAPT disability compensation rating and is alleging a physical or mental impairment, regardless of how the impairment occurred. VAPT classifications do not guarantee an allowance for SSA disability benefits. VAPT recipients must meet SSA’s disability medical eligibility and entitlement requirements.

Findings
SSA does not define “expeditious” for processing MC/WW and VAPT claims, have processing time goals, or perform regular analysis of the MC/WW and VAPT claims to identify trends. Therefore, to assess the MC/WW and VAPT processing times, we compared them to the average processing time for all disability claims at the various stages of review nationally and by State. We found the following.

- At the initial claims level, SSA processed MC/WW and VAPT claims only 1 day faster than it processed all disability claims.
- SSA processed MC/WW and VAPT claims from 37 to 315 days more quickly than all disability claims at the reconsideration, hearing office, and Appeals Council levels.
- Average processing times varied across States.
- There were processing delays attributable to SSA as well as delays outside SSA’s control.

Finally, SSA designed and implemented internal controls to identify and flag MC/WW and VAPT claims to prioritize the processing of those claims. However, SSA could not provide us evidence that it followed its policies and procedures to ensure staff and management properly tracked or monitored MC/WW and VAPT claims.

Recommendations
We recommend SSA:

1. Define “expeditious” for processing MC/WW and VAPT claims and measure processing time pursuant to the definition.

2. Implement controls to monitor, track, and measure the processing of MC/WW and VAPT claims.

SSA agreed with our recommendations.