

**Annual Report on the Results of Periodic
Representative Payee Site Reviews
and Other Reviews**



Social Security Administration

Fiscal Year 2023

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Annual Report on the Results of Periodic Representative Payee Site Reviews and Other Reviews

October 1, 2022, through September 30, 2023

Background

The Social Security Act requires the Social Security Administration (SSA) to report the results of site reviews of specific types of representative payees (payee) and any other reviews of payees conducted during the prior fiscal year (FY).¹ This report provides the results of the reviews of payees who manage the benefits of Social Security, Special Veterans Benefits, and Supplemental Security Income (SSI) beneficiaries. This FY 2023 report is our 20th annual report.

This report includes a description of review findings, corrective actions, and the following additional information:

1. The number of reviews.
2. The results of the reviews.
3. The number of cases in which the payee was changed and why.
4. The number of reviews conducted in response to allegations or concerns about the performance or suitability of the payee.
5. The number of cases in which there was a misuse of funds.
6. The total dollar amount of benefits determined to have been misused by a representative payee.
7. The number of cases in which misuse of funds resulted from the negligent failure of SSA to investigate or monitor a representative payee.
8. The final disposition of misuse cases, including any criminal, civil or administrative penalties imposed, the total dollar amount of misused benefits repaid to beneficiaries, and the total dollar amount of misused benefits repaid and recovered.
9. Any updates to prior years' report(s) necessary to reflect recoveries and repayments pertaining to misuse determinations in prior years.
10. Other information, as deemed appropriate.

We presume that a legally competent adult beneficiary can manage or direct someone else to manage their benefits unless there are indicators or evidence to the contrary. We pay legally incompetent adult beneficiaries and most children under age 18 through a payee. A payee is a third party who manages the benefits of a beneficiary to meet the beneficiary's needs such as food, clothing, shelter, medical care, and personal comfort items. After meeting the beneficiaries' current and reasonably foreseeable needs, the payee must conserve or invest any remaining Social Security benefits for the beneficiary's future use.

In all payee selections, our primary concern is the beneficiary's best interests. Our policies reflect our commitment to ensuring that payees use benefits to promote the physical, mental, and emotional well-being of beneficiaries in a manner that preserves the dignity and protects the

¹ Sections 205(j)(12), 807(k)(2), and 1631(a)(2)(G)(ii) of the Act, 42 U.S.C. §§ 405(j)(12), 1007(k)(2), and 1383(a)(2)(G)(ii). Section 105(a) of the SPSSBA amended section 205(j) of the Act, 42 U.S.C. § 405(j).

basic rights of our beneficiaries. Most payees carefully and compassionately provide much-needed help to beneficiaries on a volunteer basis.

There are approximately 5.6 million payees serving 7.7 million beneficiaries.² Payees manage \$77.9 billion in annual benefits. Fifty-one percent of the beneficiaries with payees are minor children. The payee program relies heavily upon family relationships. Family members, primarily parents or spouses, serve 86.0 percent of the beneficiaries who have payees.³

Capable applicants and beneficiaries may designate up to three people to serve as their representative payee should the need arise. In FY 2023, approximately 1.9 million people designated someone. If we determine that a beneficiary needs a payee, we use their advance designee list as the first lead in developing for potential payees. Designees must be willing to serve and apply to be payee, and as with other applicants, we determine whether designees are suitable before appointing them. We issue annual notices to beneficiaries with the information we have on record regarding their designees, and beneficiaries can modify, update, or withdraw their advance designation at any time.

In general, when a beneficiary does not have a relative, legal guardian, or close friend suitable to serve as payee, we may appoint an organizational payee. There are 30,231 organizational payees (less than one percent of all payees) serving approximately 806,446 beneficiaries. Of these organizational payees, 1,236 are fee-for-service (FFS) payees authorized to collect a fee for providing payee services. FFS payees serve approximately 194,649 beneficiaries.⁴

Our responsibility does not end when we appoint a payee. We monitor payees through our annual accounting and site review processes to ensure they remain suitable and are appropriately managing benefits on behalf of the beneficiary.

We require payees to account annually for how they used the benefits they received. Section 102 of the Strengthening Protections for Social Security Beneficiaries Act (SPSSBA) of 2018 exempts certain payees from this annual payee accounting process:

- Spouses;
- Parents of minor children in their custody and parents of disabled individuals who primarily reside in the same household; and
- Legal guardians of children who primarily reside in the same household.

Certain State mental institutions are also exempt from annual payee accounting, as discussed on page 4 of this report.

In the FY 2022 and prior reports, we were unable to report accounting data for the same FY as the report due to system limitations, so we reported accounting data for the prior fiscal year. As we continue to work on improving our representative payee processes, we have made improvements to our accounting data collection. As a result of these improvements, we are now

² Electronic Representative Payee System (eRPS) – September 11, 2023. In the FY 2018 and prior reports, these figures included beneficiaries who received their benefits directly but previously had a representative payee. We started excluding these categories in the FY 2019 and later reports. This figure may be lower than in prior reports.

³ Office of Research, Evaluation & Statistics (ORES) – December 2022.

⁴ Data Source: eRPS – October 19, 2023

able to gather accounting data sooner and report it for the same fiscal year as the other information contained in the report. For the FY 2023 report we are providing accounting data for FYs 2022 and 2023. Beginning with the FY 2024 report and going forward, we will provide same year accounting data.

From October 2021 through September 2022, we mailed 3,002,996 accounting reports. Of the reports mailed, 2,249,416 were initial accounting requests and 753,580 were follow-up or final requests mailed to representative payees who did not reply to an initial request. During FY 2022, approximately 391,326 payees (about 13.0 percent) failed to complete the accounting forms in a timely manner.

From October 2022 through September 2023, we mailed 2,691,696 accounting reports. Of the reports mailed, 2,185,481 were initial accounting requests and 506,215 were follow-up or final requests mailed to representative payees who did not reply to an initial request. During FY 2023, approximately 180,107 payees (about 7.7 percent) failed to complete the accounting forms in a timely manner.⁵

If a payee does not respond to our requests for an accounting report, the appropriate field office (FO) makes all reasonable attempts to contact the payee; this could include redirecting payments to the FO as our final attempt to ensure the beneficiary has access to their benefits. Once we make contact, we advise the payee of the importance of this annual accounting, secure a completed accounting report, and determine if the payee remains suitable or if we should find a new payee or pay the beneficiary directly.

In addition to the annual accounting process, we monitor payees' fiduciary performance through site reviews. Site reviews protect beneficiaries from misuse of benefits and help ensure these payees carry out their duties and responsibilities in compliance with our policies and procedures. State Protection and Advocacy (P&A) organizations receive grants for performing site reviews on behalf of SSA under Section 101 of the SPSSBA, and they report their review findings to SSA. We immediately investigate any indications of misuse of funds or poor performance by a payee and take all appropriate actions to protect the beneficiary's best interests.

The COVID-19 pandemic presented significant challenges to completing site reviews in the latter part of FY 2021 through FY 2022. For those periods, we revised our business processes to temporarily allow the P&As to use alternative interview methods, specifically phone interviews and video conferences, to complete site reviews. We have continued to monitor these processes to ensure that they remain effective and necessary. On May 11, 2023, the COVID-19 Public Health Emergency Declaration ended, and we determined the use of alternative interview methods are no longer necessary. Therefore, effective August 1, 2023, we discontinued these alternative interview methods. All reviews scheduled from that date forward have been completed onsite.

⁵ Data Source: All accounting report data derived from Representative Payee Accounting Database. Due to systems limitations, we reported FY 2021 accounting data on the FY 2022 report.

Type of Payees⁶

Below we define the different payee types:

1. **Organizational Volume Payee:** An organization serving 50 or more beneficiaries. This category of payee does not include FFS payees or certain State mental institutions. We review volume payees every four years. See sections 205(j)(6)(iii) and 1631(a)(2)(G)(i)(III) of the Act. Examples of payees included in this category are State and local social service agencies, private non-profit social service agencies, and nursing homes.
2. **State Mental Institutions:** A State-operated psychiatric hospital providing care and treatment. As of October 2023, 196 State mental institutions participate in our onsite review program established under sections 205(j)(3)(B) and 1631(a)(2)(C)(ii) of the Act.⁷ These sections of the statute do not require participating State mental institutions to provide an annual accounting form for each of the beneficiaries they serve. Instead, we conduct a site review of each institution at least once every three years. Institutions deciding not to participate in this onsite review program must complete annual accounting forms for each beneficiary they serve and are still subject to periodic site reviews. (See “State Onsite Reviews” in the section titled “Type of Payee Reviews.”)
3. **FFS Payee:** A State or local government agency or a certified community-based nonprofit social service organization we authorize to collect a fee for payee services. The agency or organization must regularly serve five or more beneficiaries. We review FFS payees every three years. See sections 205(j)(4), 205(j)(6)(ii), 1631(a)(2)(D), and 1631(a)(2)(G)(i)(II) of the Act.
4. **Other Organizational Payee:** Government agencies, and organizations, other than those described above, serving 49 or fewer beneficiaries. We use a predictive model to select organizations for review. The model selects payees for review based on payee and beneficiary characteristics that indicate a higher likelihood of potential misuse.
5. **Individual Volume Payee:** An individual who serves 15 or more beneficiaries. We review individual volume payees every four years, like organizational volume payees. See sections 205(j)(6)(i) and 1631(a)(2)(G)(i)(I) of the Act. Examples of payees in this category include individual community advocates who work in conjunction with local agencies, or individuals who offer guardianship services.
6. **Individual Family Payee:** An individual who serves 14 or fewer beneficiaries and is a relative. We use a predictive model to select individual non-volume family payees serving 14 or fewer beneficiaries for review. The model selects payees for review based

⁶ In the FY 2018 and prior reports, the “Individual Payee” type consisted of counts for the subtypes of “Individual Volume,” “Individual Family,” and “Individual Non-Family” payees. In the FY 2019 and later reports, we provide counts for these as separate types to comply with the requirements of the SPSSBA.

⁷ Data Source: Number of State mental institutions taken from the Representative Payee Monitoring Tool (RPMT) on 10/24/2023.

on payee and beneficiary characteristics that indicate a higher likelihood of potential misuse.

7. **Individual Non-Family Payee:** An individual who serves 14 or fewer beneficiaries and is a non-relative. We use a predictive model to select individual non-family payees serving 14 or fewer beneficiaries for review. The model selects payees for review based on payee and beneficiary characteristics that indicate a higher likelihood of potential misuse. See section 205(j)(6) of the Act. Examples of payees in this category could be a friend, an unrelated guardian, or an unrelated volunteer payee.

Types of Payee Reviews

Below we define our payee reviews. We also report the results of our reviews and the findings of the reviews. Please see *Appendix A*, which provides detailed descriptions of some of these findings.

1. **Periodic Site Review:** At least once every 3 or 4 years, we monitor the performance of individual volume payees, organizational volume payees, and FFS payees, through a face-to-face meeting with the payee and an examination of the payee's records. We assess the payee's recordkeeping and interview beneficiaries. We complete these reviews according to sections 205(j)(6) and 1631(a)(2)(G)(i) of the Act.
2. **Targeted Review:** A targeted review is a site review conducted in response to an event that raises a question about the payee's performance or suitability. To initiate a targeted review, the event must meet certain criteria. Examples of events that may trigger a targeted review include allegations of misuse or improper use of benefits from a beneficiary or third party, reports of employee theft, adverse media coverage, and an investigation of the payee by another governmental agency. We categorize targeted reviews according to who initiated the review. A targeted review initiated by SSA staff is a Quick Response Check, while a targeted review initiated by a P&A grantee is a P&A Initiated Review.
3. **Educational (Edu.) Visit:** We visit all new FFS payees six months we authorize them to collect a fee. The purpose of Edu. visits is to ensure the payees fully understand their responsibilities and are capable of recordkeeping and reporting. We may also conduct Edu. visits to any type of payee at any time. For example, we may make an Edu. visit to a volume payee if we learn the payee had changes in key personnel or need to evaluate their recordkeeping practices.
4. **State Onsite Reviews:** We conduct onsite reviews at least once every three years to evaluate the fiduciary performance of State mental institutions serving as payees for our beneficiaries, pursuant to sections 205(j)(3)(B) and 1631(a)(2)(C)(ii) of the Act. P&A grantees go to the institution to conduct financial accountings and to observe and visit the beneficiaries served by the institution.
5. **Predictive Model Reviews:** We use a predictive model to select organizational payees serving 49 or fewer beneficiaries and individual payees serving 14 or fewer beneficiaries for review. This model selects organizational and individual payees based on payee and beneficiary characteristics that indicate a higher likelihood of potential misuse.

Results of Our Reviews

Section 101 of the SPSSBA transformed our site review process. Instead of our staff completing these reviews, State P&A organizations complete the reviews on our behalf and report their findings to us. We implemented this new site review process in FY 2019, which includes awarding grants to the P&A grantees, training the grantees, and developing new business processes, systems, and security protocols for the grantees.

All P&A site reviews include the examination of the payee's financial records and supporting documentation as well as beneficiary's living conditions. P&A grantees develop and implement corrective action plans to ensure payees remedy fiduciary findings, such as incorrect titling of bank accounts, recordkeeping findings, and overdue accounting reports. P&A grantees conducted 3,982 payee site reviews in FY 2023 and notified us of possible misuse, payee suitability concerns, and other sensitive findings. In addition, P&A grantees made referrals to outside agencies for immediate health and safety threats, financial exploitation, and other identified beneficiary needs.

Although this report covers reviews conducted in FY 2023, some reviews and corrective actions span multiple years. For example, a payee reviewed late in the year may not have finished correcting the titles on payee bank accounts by the end of the FY, or we may need several months to review records in a case of widespread misuse.

Table 1 provides the total number of reviews performed by type of review and payee category. We included a detailed description of the findings discovered throughout the review process and the corrective actions taken in *Appendix A*.

Tables 2-6 describe findings identified during the different types of reviews.⁸ If a particular payee type is excluded from a table, there were no site reviews of that category conducted for that payee type.

⁸ Data from tables 1-6 derived using our RPMT. In FY 2019, deficiency categories may have represented multiple errors by the same payee from a single review, resulting in more deficiencies than reviews. Beginning in FY 2020 we only count one deficiency per review, even if multiple instances of the same deficiency occur.

Table 1: Number of Reviews by Review Type and Payee Type

	Review Types					
Payee Types	Periodic	Targeted	Edu. Visit	State Onsite	Predictive Model	Total
Organizational Volume Payees	792	44	2	0	2	840
State Mental Institutions	0	0	0	85	0	85
FFS Payees	536	4	42	0	0	582
Other Organizational Payees	0	105	2	0	1,672	1,779
Individual Volume Payee	102	47	0	0	1	150
Individual Family Payee	0	46	0	0	334	380
Individual Non-Family Payee	0	49	0	0	117	166
Total	1,430	295	46	85	2,126	3,982

Table 2: Findings Identified During 1,430 Periodic Site Reviews by Payee Type

Findings	Payee Types			Total
	Org. Volume	FFS	Indiv. Volume	
Over SSI Resource Limit	218	188	23	429
Failure to Report Changes	172	173	47	392
Recordkeeping Findings (e.g., minor math errors, weak internal controls)	395	280	55	730
Potential Payee Suitability Finding – Financial	388	297	59	744
Potential Payee Suitability Issue – Non-Financial	97	143	26	266
Bank Account Issues	333	219	47	599
Annual Accounting Forms Not Returned	205	150	10	365
Same Deficiencies from Previous Reviews Found	134	99	26	259
Dedicated Account Funds Misapplied	1	2	0	3
Payee Did Not Exercise Oversight of Benefits (Conduit Payee)	18	36	8	62
Total	1,961	1,587	301	3,849

Table 3: Findings Identified During 295 Targeted Reviews by Payee Type

Findings	Payee Types						Total
	Org. Volume	FFS	Other Org.	Indiv. Volume	Indiv. Family	Indiv. Non-Family	
Over SSI Resource Limit	17	2	17	8	1	8	53
Failure to Report Changes	19	2	41	18	19	25	124
Recordkeeping Findings (e.g., minor math errors, weak internal controls)	27	4	76	29	40	40	216
Potential Payee Suitability Issue – Financial	27	4	71	25	24	32	183
Potential Payee Suitability Issue – Non-Financial	9	2	22	9	15	19	76
Bank Account Issues	21	2	55	24	24	23	149
Annual Accounting Forms Not Returned	11	1	32	3	2	3	52
Same Deficiencies from Previous Reviews Found	8	1	21	0	0	0	30
Dedicated Account Funds Misapplied	0	0	0	2	0	0	2
Payee Did Not Exercise Oversight of Benefits (Conduit Payee)	2	1	11	7	3	7	31
Total	141	19	346	125	128	157	916

Table 4: Findings Identified During 46 Educational Visits by Payee Type

Findings	Payee Types			Total
	Org. Volume	FFS	Other Org.	
Over SSI Resource Limit	1	12	0	13
Failure to Report Changes	0	3	1	4
Recordkeeping Findings (e.g., minor math errors, weak internal controls)	1	14	2	17
Potential Payee Suitability Issue – Financial	0	17	1	18
Potential Payee Suitability Issue – Non-Financial	0	7	0	7
Bank Account Issues	1	19	2	22
Annual Accounting Forms Not Returned	1	2	0	3
Same Deficiencies from Previous Reviews Found	0	2	0	2
Dedicated Account Funds Misapplied	0	0	0	0
Payee Did Not Exercise Oversight of Benefits (Conduit Payee)	0	3	0	3
Total	4	79	6	89

Table 5: Findings Identified During 85 State Onsite Reviews

Findings	State Mental Institutions Total
Over SSI Resource Limit	15
Failure to Report Changes	7
Recordkeeping Findings (e.g., minor math errors, weak internal controls)	13
Potential Payee Suitability Issue – Financial	18
Potential Payee Suitability Issue – Non-Financial	3
Bank Account Issues	9
Annual Accounting Forms Not Returned	0
Same Deficiencies from Previous Reviews Found	7
Dedicated Account Funds Misapplied	0
Payee Did Not Exercise Oversight of Benefits (Conduit Payee)	1
Total	73

Table 6: Findings Identified During 2,126 Predictive Model Reviews by Payee Type

Findings	Payee Types			Total
	Other Org.	Indiv. Family	Indiv. Non-Family	
Over SSI Resource Limit	396	2	2	400
Failure to Report Changes	419	44	24	487
Recordkeeping Findings (e.g., minor math errors, weak internal controls)	1,147	282	95	1,524
Potential Payee Suitability Issue – Financial	979	80	38	1,097
Potential Payee Suitability Issue – Non-Financial	374	30	16	420
Bank Account Issues	1,114	80	46	1,240
Annual Accounting Forms Not Returned	380	6	15	401
Same Deficiencies from Previous Reviews Found	63	1	0	64
Dedicated Account Funds Misapplied	0	1	0	1
Payee Did Not Exercise Oversight of Benefits (Conduit Payee)	83	6	9	98
Total	4,955	532	245	5,732

Outside Agency Referrals

If the reviewers observed certain situations affecting the beneficiary’s well-being, they made a referral to the appropriate agency. **Table 7** provides the counts for outside agency referrals for all review types. We include a detailed description of these referrals in *Appendix B*.

Table 7: Outside Agency Referrals Resulting from All Review Types

Referrals	Total
Immediate health or safety threat to the beneficiary	81
Possible financial exploitation	36
Beneficiary identified needs	1,887
Total	2,004

Change of Payee Situations

When the payee under review was determined unsuitable to continue serving in this role, we removed them. In these instances, the FO conducted a capability determination to evaluate the continued need for a payee for each affected beneficiary. Based on the results of the capability determinations, the FO initiated direct payment to beneficiaries determined to be capable and assigned a new payee to beneficiaries deemed incapable. **Table 8** provides the reasons for payee changes resulting from all onsite reviews. For additional information on payee changes involving misuse cases, see the *Findings of Misuse* section, page 15.

Table 8: Payee Change Reasons for All Review Types⁹

Change Reasons	Payee Types							Total
	Org. Volume	State Mental Inst.	FFS	Other Org.	Indiv. Volume	Indiv. Family	Indiv. Non-Family	
Business Closed or Sold	2	0	0	6	0	0	1	9
Payee Uncooperative	0	0	0	2	2	0	0	4
Payee Withdrew	1	0	0	4	0	0	1	6
Poor Performance	1	0	0	7	0	1	8	17
Misuse Investigation	3	0	2	4	0	11	1	21
Total	7	0	2	23	2	12	11	57

⁹ RPMT. We derived payee changes due to misuse investigations or misuse findings from FY 2023 regional misuse reports based on completed site reviews that had a concurrent misuse investigation. Those changes were a result of either a completed misuse determination in FY 2023, or by identifying poor payee performance during FY 2023.

Findings of Misuse

Misuse allegations come in many forms, including self-reporting by the payee, adverse media reports, referrals from state P&A grantees or other agencies and law enforcement, and allegations made directly by beneficiaries or members of the public. Although we can discover misuse at any site review, we often initiate targeted site reviews from misuse allegations.

For allegations of misuse, we review the financial records of all beneficiaries served by the payee during the period of misuse, make a final misuse determination, share our findings with the Office of the Inspector General (OIG) for potential criminal investigation, and complete administrative actions such as recovery and repayment of misused funds. It may take months to several years until the case reaches final resolution, depending on the complexity of the allegation and OIG's criminal investigation. We retain a payee *only* if the payee continues to be suitable *and* makes restitution or has a definite plan to make restitution. An example would be an isolated instance of employee theft by an employee of an otherwise well-performing organization.

In FY 2023, we carried 128 pending cases of misuse over from the last year's report. Our FY 2023 reviews found that most payees used beneficiaries' funds properly. Out of 3,982 completed reviews, we initiated new misuse investigations on only 63 cases. We closed 42 cases with all actions complete and 149 cases remained pending further misuse development. For the 42 closed cases, 40 were initiated in prior fiscal years and two were initiated in FY 2023. We removed the payee in nine cases and retained the payee in 32 cases. We also made misuse determinations on 28 pending cases and referred them to the OIG for review. Of the 28 cases, 16 were organizational payees and 12 were individual payees. We removed the payee in 12 cases and retained the payee in 16 cases.

Ultimately, we finalized misuse determinations totaling \$768,204. We also repaid or reissued \$293,202 of misused funds to affected beneficiaries. We recovered \$241,291 from payees and wrote off \$0.00 as uncollectable under our policy.¹⁰ The recovery and repayment totals include recoveries and repayments from prior years' misuse determinations.

Tables 9-10 provide data that breaks down all suspected misuse referrals and those only related to charging fees from the P&A reviewers to SSA by review and payee type.

Table 11 provides a summary of site review misuse cases including total new, completed, and pending cases, as well as dollar amounts for misuse found, repayment, and recovery actions.

Tables 12-13 display new misuse cases by review and payee type, and final misuse determinations by payee type only since we completed many of those reviews in prior years.

¹⁰ All misuse dollar amounts derived from FY 2023 regional misuse reports of determinations, repayments, reissuances, and recoveries.

Pages 19 to 60 of this report contain narratives that describe misuse identified during FY 2023 site reviews along with updates on misuse identified in prior fiscal years that are still pending.¹¹ Each misuse narrative details the circumstance surrounding the misuse allegation, whether the misuse investigation is ongoing or complete, whether we retained or removed the payee, and whether the case has yet been referred to OIG.

For individual payees who served 14 or fewer beneficiaries at the time misuse occurred, SSA is required to make a negligence determination. This determination is necessary to document whether SSA followed established procedures to investigate and monitor the payee and if SSA will repay the misused benefits pending payee restitution. On cases where SSA is found negligent, reimbursement of the misused funds to affected beneficiaries is not delayed pending recovery from the payee. For these cases, we indicate that we repaid the beneficiary while recovery from the payee is outstanding. Where SSA is not negligent, reimbursement of the misused funds to affected beneficiaries occurs as we recover those funds from the payee. SSA is required to repay benefits on all misuse cases involving organizational payees or individual payees who served more than 14 beneficiaries at the time misuse occurred.

On cases where we made a final determination of the misuse that occurred, we annotate in the narrative the amount of misuse, the amount that has been repaid to the affected beneficiaries, and the amount that has been recovered from the payee. In cases that involved federal prosecution we also annotate criminal and civil penalties. Recovery efforts may be prolonged against payees who have closed or are no longer serving as payee. We also establish debt records to collect future benefits from individual payees and for tracking purposes.

Table 9: Site Review Total Suspected Misuse¹²

Payee Types	Review Types					Total
	Periodic	Targeted	Edu. Visits	State Onsite	Predictive Model	
Org. Volume	22	2	0	0	0	24
State Mental Institutions	0	0	0	0	0	0
FFS	33	0	1	0	0	34
Other Org.	0	11	0	0	65	76
Indiv. Volume	5	3	0	0	0	8
Indiv. Family	0	7	0	0	5	12

¹¹ All misuse narratives derived from annual regional misuse reports and OIG status updates. A case is resolved when we recover all misused funds or exhaust all recovery options (both internal and external collection methods).

¹² RPMT – Table 9 shows all new instances of suspected misuse based on site review findings. There can be multiple instances of suspected misuse for a single site review, and some result with no misuse being found. The report narratives contain pending and complete misuse found investigations only. Table 10 contains the same findings related only to incorrect or unauthorized fees. The P&As refer these findings to SSA for evaluation and appropriate action.

Indiv. Non-Family	0	16	0	0	11	27
Total	60	39	1	0	81	181

Table 10: Site Review Suspected Misuse Related to Charging Fees

	Review Types					
Payee Types	Periodic	Targeted	Edu. Visits	State Onsite	Predictive Model	Total
Org. Volume	0	1	0	0	0	1
State Mental Institutions	0	0	0	0	0	0
FFS	17	0	0	0	0	17
Other Org.	0	1	0	0	4	5
Indiv. Volume	1	2	0	0	0	3
Indiv. Family	0	0	0	0	0	0
Indiv. Non-Family	0	3	0	0	2	5
Total	18	7	0	0	6	31

Table 11: Site Review Misuse Summary¹³

Category	Total
Site Review Total Suspected Misuse	181
Site Review Suspected Misuse Related to Charging Fees	31
New Misuse Investigations from Suspected Misuse	63
Misuse Found Determinations ¹⁴	28
Misuse Unfounded or Not Found Determinations	29
Total Dollars of Misuse Found	\$768,204
Total Dollars Recovered from Payees ¹⁵	\$241,291
Total Dollars Repaid or Reissued to Affected Beneficiaries	\$293,202

¹³ Data on Tables 11, 12 and 13 derived from FY 2023 regional misuse reports.

¹⁴ Total includes completed misuse determinations in FY 2023 regardless of the year we initiated an investigation.

¹⁵ Total includes funds recovered in FY 2023 toward misuse determinations finalized in FY 2023 and those finalized in prior fiscal years but still in recovery.

Table 12: New Misuse Investigations by Review and Payee Type¹⁶

	Review Types					
Payee Types	Periodic	Targeted	Edu. Visits	State Onsite	Predictive Model	Total
Org. Volume	11	0	0	0	0	11
State Mental Institutions	0	0	0	0	0	0
FFS	6	0	0	0	0	6
Other Org.	0	3	0	0	23	26
Indiv. Volume	0	2	0	0	0	2
Indiv. Family	0	9	0	0	4	13
Indiv. Non-Family	0	2	0	0	3	5
Total	17	16	0	0	30	63

Table 13: Misuse Found Determinations by Payee Type¹⁷

	Payee Types							
Misuse Found	Org. Volume	State Mental Inst.	FFS	Other Org.	Indiv. Volume	Indiv. Family	Indiv. Non-Family	Total
Total	7	0	3	11	0	5	2	28

¹⁶ New misuse investigations associated with site reviews conducted in FY 2023. See *Table 1* on page 8.

¹⁷ Totals include misuse found determinations closed in FY 2023 regardless of the year we initiated an investigation.

FY 2023 New Misuse Allegations

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Premier Fiduciary Services Inc, Pocatello, ID. During the site review, we discovered the payee was charging excessive fees. We initiated a misuse investigation and retained the payee pending the outcome. We determined the payee misused \$3,026, affecting one beneficiary. The

payee repaid the full amount to the affected beneficiary and provided proof to SSA. We referred the case to OIG. OIG took appropriate action based upon available information. We determined the payee remains suitable to serve. All case actions are complete.

Progressive Behavior Systems, Twin Falls, ID. During the site review, the payee reported a prior incident of employee theft. We initiated a misuse investigation and retained the payee pending the outcome. The payee had already terminated the employee who committed the theft. We made a final misuse determination of \$5,549, affecting five beneficiaries. The payee reimbursed the full misuse amount to the affected beneficiaries and provided proof. We referred the case to OIG. OIG took appropriate action based upon available information. We determined the payee remains suitable to serve. All case actions are complete.

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Updates for 2022 Misuse Allegations

A Fair Choice, Arlington TX. During a site review, a beneficiary made an allegation of misuse. The estimated amount of misuse is unknown, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee, and continued suitability is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. However, we removed the payee for other reasons and took appropriate action for all beneficiaries, either finding new payees or transitioning beneficiaries to direct payment. All case actions are complete.

Adid Care, Albuquerque, NM. During the site review, we uncovered poor recordkeeping practices and that cash was held at an employee's home. We initiated a misuse investigation to look further into the findings. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Aspire Human Services, Pocatello, ID. During the site review, the payee reported a prior instance of employee theft. The payee terminated the responsible employee. We initiated a misuse investigation. The estimated amount of misuse is \$7,353, affecting two beneficiaries. The payee repaid the full amount to all affected beneficiaries. We referred the case to OIG. OIG took appropriate action based upon available information. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: We made a final misuse determination of \$7,353, affecting two beneficiaries and determined the payee remained suitable to serve. All case actions are complete.

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Burtree Residential Facility, La Puente, CA. During the site review, we discovered undocumented cash disbursements. The estimated amount of misuse is \$6,839, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Catholic Social Services, Scranton, PA. During the site review, we discovered the payee was potentially charging unauthorized fees. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Developmental Services Inc, Columbus, OH. During the site review, we uncovered poor recordkeeping practices at this facility and initiated a misuse investigation to look further into the findings. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: We made a final misuse determination of \$952.34, affecting four beneficiaries. The payee directly reimbursed the affected beneficiaries for the full amount of misuse and showed proof of reimbursement. We referred the case to OIG. OIG took appropriate action based upon available information. We determined the payee remains suitable to serve. All case actions are complete.

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Guardian Care Inc, Southfield, MI. During the site review, we discovered this payee charged unauthorized fees. The estimated amount of misuse is unknown, affecting one beneficiary. We referred the case to OIG. OIG took appropriate action based upon available information. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Highland Park Guest Home, Los Angeles, CA. During the site review, the payee could not account for all beneficiary funds. The estimated amount of misuse is \$960, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Hudson Milestones, Jersey City, NJ. During a site review, we discovered an isolated incident of employee theft. The estimated amount is \$275, affecting five beneficiaries. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination. The misuse investigation is ongoing.

Update: We made a final misuse determination of \$275, affecting six beneficiaries. The payee reimbursed the affected beneficiaries directly and provided proof to SSA. We

referred the case to OIG. OIG took appropriate action based upon available information. We determined the payee remains suitable to serve. All case actions are complete.

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Individual Family Payee, (b) (6), (b) (7)(C) During the site review, a beneficiary made an allegation of misuse. The estimated amount of misuse is unknown, affecting one beneficiary. We referred the case to OIG. OIG took appropriate action based upon available information. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits, but we still removed the payee and appointed a successor payee for the beneficiary. All case actions are complete.

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(b) (7)(A), (b) (6), (b) (7)(C) [Redacted] (b) (7)(A) [Redacted]

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(b) (7)(A), (b) (6), (b) (7)(C) [Redacted] (b) (7)(A) [Redacted]

[Redacted]

(b) (7)(A), (b) (6), (b) (7)(C) [Redacted] (b) (7)(A) [Redacted]

[Redacted]

Individual Volume Payee, (b) (6), (b) (7)(C). During the site review, we discovered that the payee may have charged unauthorized fees. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued

suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

(b) (7)(A), (b) (6), (b) (7)(C) (b) (7)(A)

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Isaiah’s House, Richmond, TX. During the site review, we uncovered poor recordkeeping practices at this facility and initiated a misuse investigation to look further into the findings. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We referred the case to OIG. OIG took appropriate action based upon available information. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Jewish Board of Family and Children’s Services, Far Rockaway, NY. During the site review we discovered an incident of potential employee theft. The estimated amount is \$700, affecting one beneficiary. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We referred the case to OIG. OIG took appropriate action based upon available information. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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People in Progress, Jonesboro, GA. During the site review, we discovered this payee charged unauthorized fees. We made a final misuse determination of \$387, affecting two beneficiaries. These fees were accidentally charged prior to the payee’s approval of FFS status. The payee has cooperated with the investigation. We retained the payee, and continued suitability is contingent on their cooperation and repayment of any misused funds. We are working on referring the case to OIG and initiated recovery and repayment actions.

Update: We recovered the full misuse amount and reimbursed all affected beneficiaries. We referred the case to OIG. OIG took appropriate action based upon available information. All case actions are complete.

Perfecting Lifestyles, Bloomfield Hills, MI. During a site review, a beneficiary made an allegation of misuse, and disputed cable and fast-food charges. The estimated amount of misuse is unknown, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee, and continued suitability is contingent on their cooperation and repayment of any misused funds. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Royal Personal Care, Houston, TX. During a site review, we discovered undocumented cash disbursements from beneficiary funds. The estimated amount of misuse and number of affected beneficiaries are presently unknown. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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SCO Family of Services, Glen Cove, NY. Immediately after the site review, the payee contacted SSA to report an incident of employee theft. The estimated misuse amount is \$20,620, affecting 23 beneficiaries. We confirmed the payee directly repaid the affected beneficiaries the estimated amount of misuse, but this amount is subject to change based on the outcome of our investigation. We retained the payee, but continued suitability is contingent on their cooperation and repayment of any additional misused funds. We will refer the case to OIG after completing the misuse determination.

Update: We made a final misuse determination of \$21,119, affecting 23 beneficiaries. We confirmed that the payee reimbursed the affected beneficiaries the full amount of misuse. We referred the case to OIG. OIG took appropriate action based upon available information. We determined the payee remains suitable to serve. All case actions are complete.

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Shore Community Services, Skokie, IL. During a site review, we discovered an incident of potential employee theft. The estimated misuse amount is \$10,795, affecting 11 beneficiaries. The payee repaid part of the estimated misuse to the beneficiaries, but this amount may change pending the final misuse determination. We referred the case to OIG. OIG took appropriate action based upon available information. We retained the payee, and continued suitability is contingent on their cooperation and repayment of any misused funds.

Update: We made a final misuse determination of \$10,795, affecting 11 beneficiaries. The payee repaid the remaining misuse amount directly to the affected beneficiaries and provided proof to SSA. We determined the payee remains suitable. All case actions are complete.

Spanish Oaks Center Inc, Anna, IL. During a site review, we discovered that a beneficiary may have been double charged the monthly cost of care for the same month. The misuse investigation is ongoing and the estimated amount of misuse is unknown, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee, and continued suitability is contingent on their cooperation and repayment of any misused funds.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Staten Island DDSO, Staten Island, NY. During the site review, we discovered an incident of potential employee theft. The estimated amount is \$200, affecting an unknown number of beneficiaries. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

The Advocacy Alliance, Scranton, PA. During the site review, we discovered that the payee might be charging unauthorized fees. The estimated amount of misuse and is unknown, affecting one beneficiary. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We referred the case to OIG. OIG took appropriate action based upon available information. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Thrive Community Options, Aurora, CO. During the site review, we identified a large, unaccounted cash withdrawal. The estimated amount of misuse is unknown, affecting one beneficiary. We will refer the case to OIG after completing the misuse determination. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Updates for 2021 Misuse Allegations

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Ayong Healthcare LLC, Houston TX. During the site review, we discovered there was a prior incident of employee theft. The number of affected beneficiaries and the amount of misused funds is not yet available while the misuse investigation is ongoing. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

(b) (7)(A) [REDACTED] (b) (7)(A) [REDACTED]
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(b) (7)(A) [REDACTED] (b) (7)(A) [REDACTED]
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Hill Country Community MHMR Center, Kerrville, TX. During the site review, we discovered an incident of employee theft. We initiated a misuse investigation. The organization terminated the individual with access to the misused funds and referred the issue to local law enforcement. We retained the payee pending the outcome of the investigation. We made a final

misuse determination of \$799, affecting two beneficiaries. The payee repaid the full amount to all affected beneficiaries. The OIG referral and suitability determination are pending.

Update: We referred the case to OIG. OIG took appropriate action based upon available information. We revised the final misuse determination to \$340, affecting one beneficiary. We determined the payee remains suitable to serve. All case actions are complete.

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Individual Family Payee, (b) (6), (b) (7)(C) . During a site review, we discovered the payee is allegedly paying themselves for expenses not related to the care of the beneficiary. The amount of estimated misuse funds is unknown, affecting one beneficiary. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their

cooperation and repayment of any misused funds. We referred the case to OIG. OIG took appropriate action based upon available information. The misuse investigation is ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Individual Non-Family Payee, (b) (6), (b) (7)(C). During the site review, we discovered this individual charged unauthorized fees for payee services. The current estimate of misuse is \$46,730, affecting 36 beneficiaries. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on cooperation and repayment of any misused funds. We referred the case to OIG. OIG took appropriate action based on available information. We made a final misuse determination of \$21,233, affecting 32 beneficiaries. We removed the payee and took appropriate action for all beneficiaries, finding them a new payee. Recovery and repayment are ongoing. To date, we have recovered \$13,508 from the payee and are pursuing recovery of the remaining \$7,725.

Update: We recovered the remaining \$7,725 and repaid the affected beneficiaries the full misuse amount. All case actions are complete.

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Louison House Inc, North Adams, MA. During the site review, we discovered this organization may have charged unauthorized fees for payee services. The number of affected beneficiaries and the amount of misused funds is not yet available while the investigation is ongoing. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Premiere Genesee Center for Nursing, Syracuse, NY. During the site review, we discovered an isolated incident of employee theft. The facility terminated the employee involved in the incident. We retained the payee pending the outcome of the investigation. We made a final misuse determination in the amount of \$92, affecting five beneficiaries. We confirmed the payee repaid the full amount to the affected beneficiaries. The OIG referral and final suitability determination are pending.

Update: After further investigation, the field office determined the facility was not handling cash withdrawals properly which made it appear the funds had been stolen. However, we ultimately determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Sutton Foundation Inc, Irvine, CA. Based on the findings of a site review, it appears the payee is overcharging for housing and is unable to account for conserved funds. The estimated amount of misuse is \$13,325, affecting 10 beneficiaries. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

Tri Valley Inc, Dudley, MA. During the site review, we discovered this organization may have charged unauthorized fees for payee services. The original estimate of misuse was \$61, affecting one beneficiary, but we revised that amount to \$540. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Updates for FY 2020 Misuse Allegations

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Amazing Home Community Service, San Antonio, TX. During the site review, we discovered an incident of employee theft. The number of affected beneficiaries and the amount of misused funds is not yet available with the misuse investigation ongoing. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on their cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination. The misuse investigation was ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Michigan Ability Partners, Jackson, MI. During the site review, we discovered that this organization might have charged unauthorized fees. The estimate of misused funds is not yet available, but we believe there is one affected beneficiary. We retained the payee pending the outcome of the investigation. Continued suitability of the payee is contingent on its cooperation and repayment of any misused funds. We will refer the case to OIG after completing the misuse determination. The misuse investigation is still ongoing.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Sunrise Guest Home, Lynwood, CA. During the site review, the payee could not account for how it used a beneficiary's funds. The misuse investigation is ongoing, with potentially one affected beneficiary. The amount of misused funds is not yet available. We retained the payee pending the outcome of the investigation. We referred the case to OIG. OIG took appropriate action based upon available information.

Update: The investigation determined that there was no misuse of SSA benefits. The payee remains suitable to serve. All case actions are complete.

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Updates for FY 2019 Misuse Allegations

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Individual Family Payee, (b) (6), (b) (7)(C) We discovered this payee did not have a beneficiary in their care while receiving funds on the beneficiary's behalf. The payee could not show how they used the benefits. We determined the final amount of misused funds to be \$5,071, affecting one beneficiary. We removed the payee and took appropriate action for the two beneficiaries remaining under the payee's care, either finding a new payee or transitioning the beneficiary to direct payment. We referred the case to OIG. OIG took appropriate action based upon available information. We recovered \$1,613 from the payee. We repaid \$541 to the affected beneficiary.

Update: We recovered the remaining misused funds and reimbursed the remainder due to the affected beneficiaries. All case actions are complete.

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Elder Services of the Merrimack Valley, Lawrence, MA. The organization charged unauthorized fees. We made a final misuse determination of \$12,874, affecting 57 beneficiaries. We referred the case to OIG. OIG took appropriate action based upon available information. The payee returned the misused funds. We repaid \$9,430 to affected beneficiaries, and repayment actions for \$3,444 are still pending.

Update: We collected the full misuse amount from the payee and completed repayment actions to the remaining affected beneficiaries. The organization changed ownership and

remains suitable to serve as payee under its new name, Agespan. All case actions are complete.

Individual Non-Family Payee, (b) (6), (b) (7)(C). The former payee admitted to depositing funds from (b) (6) personal account into the beneficiary's account, because (b) (6) misused the beneficiary's funds. We removed the payee, and took appropriate action for all beneficiaries, either finding a new payee or transitioning the beneficiary to direct pay. We originally estimated the payee misused \$24,347, affecting four beneficiaries. After reviewing further evidence, we revised that determination and estimated total misuse at \$83,000, affecting seven beneficiaries. We referred the case to OIG. OIG took appropriate action based upon available information. The court ordered the payee to return \$256,336 to the victims. Based on additional evidence, we found \$24,347 in misuse. We took action to withhold and repay the misused funds from the payee's Social Security benefits.

Update: We completed recovery and repayment of the full misuse amount. All case actions are complete.

Updates to FY 2016 Misuse Allegations

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Updates to FY 2014 Misuse Allegations

Artrip Health Care, Ashland, KY: We were informed by another agency that the payee appeared to have falsified records and used benefits for personal gain. We conducted a targeted review and misuse investigation and removed the payee. We took appropriate action for all beneficiaries, either finding a new payee or transitioning them to direct pay. The final misuse determination was \$189,339, affecting 45 beneficiaries. We referred the case to OIG. OIG took appropriate action based upon available information. The owner pleaded guilty to payee fraud and misusing funds. The court ordered restitution to SSA for \$97,806. Based on additional evidence from the court case, we revised the final misuse amount to \$102,444.79 and repaid all affected beneficiaries. Initial recovery efforts have been unsuccessful.

Update: The owner sold the personal care home, and we recovered the full amount due. All case actions are complete.

Updates to FY 2013 Misuse Allegations

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Conclusion

Individuals who need payees are among our most vulnerable beneficiaries. We carefully follow statute and regulations when deciding to appoint a payee, and when we do, we make every effort to choose one who is well qualified.

The results of our site reviews give us confidence that our monitoring efforts protect these beneficiaries by:

- Deterring payee misconduct;
- Providing a strong oversight message to payees;
- Ensuring that FFS payees continue to be qualified under the law;
- Establishing open lines of communication between our agency and the payees; and
- Promoting good payee practices.

As stewards of public funds, we take our responsibility to our beneficiaries and the taxpayers seriously. We look forward to continuing to work with Congress on measures to improve our programs.

Appendix A – Descriptions of Findings and Corrective Actions Taken

Description of Payee Findings		Corrective Action Taken
Over SSI Resource Limit	SSI recipients acquire or accumulate countable resources that exceed \$2,000 for an individual or \$3,000 for a couple, thus causing ineligibility.	We reminded payees of the resource limit and the requirement to report when recipients exceed the limit. We recommended the payees put controls in place to flag accounts nearing this limit. In addition, we sent overpayment notices to begin the recovery process.
Incorrect or Unauthorized Fee Charged	In some cases, the payees charged a fee that we did not authorize. In other situations, we authorized the payees to charge a fee, but the payees charged fees in excess of the statutory limit.	We reviewed the P&A grantees findings. If we determined unauthorized fees were charged, we instructed payees who were not FFS payees to stop charging fees and developed for misuse. We also instructed the approved FFS payees to stop charging a fee in excess of the statutory limit. Regardless of the length of time or amount of the erroneous fees charged, the payee must refund the excess amounts to the beneficiary immediately upon discovery. If unable to resolve the excess fees, the FO should initiate development for a new payee, investigate, and develop for possible misuse of benefits.
Failure to Report Changes	Payees failed to comply with reporting responsibilities for both Social Security and SSI beneficiaries. The most common findings in this area were a failure to report a change in a beneficiary’s residence address or change in income.	We reviewed reporting responsibilities with payees who did not report the changes and updated each beneficiary’s record.

<p>Payee Did Not Exercise Oversight of Benefits (Conduit Payee)</p>	<p>Payees did not use the beneficiaries' benefits for their current needs, but rather gave the funds directly to the beneficiaries.</p>	<p>We completed capability determinations for the beneficiaries who received their benefits in full directly from the payees to determine if the beneficiaries could manage their own money. For those beneficiaries we found capable, we began paying them directly. We evaluated the payee's continued suitability to serve and changed payees when appropriate. We reminded retained payees to report whenever they believe a beneficiary in their care is capable of managing his or her money.</p>
<p>Annual Accounting Forms Not Returned</p>	<p>Payees did not complete annual accounting forms to account for how they used beneficiaries' funds.</p>	<p>We obtained outstanding accounting forms from payees. If the payee did not cooperate with these efforts, we determined them unsuitable to continue serving and transitioned beneficiaries to new payees or direct payment.</p>
<p>Recordkeeping Findings (e.g., minor math errors, weak internal controls)</p>	<p>Payees had poor recordkeeping practices or made bookkeeping errors.</p>	<p>We instructed payees on how to improve their recordkeeping, and we worked diligently with payees to ensure they improved.</p>
<p>Misuse Suspected</p>	<p>There was an allegation of misuse during the review, or there was an indication of misuse during review of financial records.</p>	<p>We reviewed the P&A grantee's findings. If the allegation was unfounded, we closed out the finding. If further investigation was needed, we made a misuse determination, notified the payees, and pursued recovery of funds when a misuse investigation substantiated the allegation; or we are still investigating the misuse allegations.</p>

<p>Potential Payee Suitability Finding – Financial</p>	<p>A financial finding brought into question the suitability of the payee to serve, such as failure to properly and effectively administer beneficiary funds or failure to meet insurance or financial obligations.</p>	<p>We determined the payees were unsuitable to continue serving after investigation of the finding and transitioned beneficiaries to new payees or direct payment if appropriate, or we are still looking into these findings. In other cases, we determined the payee remained suitable, and instructed these payees on how to improve their performance as payee and worked with them to ensure they improved.</p>
<p>Potential Payee Suitability Finding – Non-Financial</p>	<p>A non-financial finding brought into question the suitability of the payee to serve, such as a potential conflict of interest or failure to provide information requested during the review.</p>	<p>We determined the payees were unsuitable to continue serving after investigation of the finding and transitioned beneficiaries to new payees or direct payment if appropriate, or we are still looking into these findings. In other cases, we determined the payee remained suitable, and instructed these payees on how to improve their performance as payee and worked with them to ensure they improved.</p>
<p>Bank Account Issues</p>	<p>Issues with Bank Account could involve the following:</p> <ol style="list-style-type: none"> 1. Incorrect Titling of Bank Accounts - Bank accounts did not clearly reflect that the beneficiary, rather than the payee, was owner of the account, or the payee did not title the account in such a way to prevent the beneficiary from gaining direct access to the account. The bank account(s) in question may be an individual or collective account. 2. Bank Account Not Interest Bearing - Payees did not use interest-bearing accounts for beneficiaries' funds. 3. Collective Account Not Approved by SSA - Payees did 	<ol style="list-style-type: none"> 1. At our direction, payees re-titled their accounts. 2. We directed the payees to move beneficiaries' funds to interest-bearing accounts. 3. We reviewed the accounts to ensure each met our requirements. 4. We directed payees to move beneficiaries' funds into correctly titled accounts.

	<p>not obtain our approval before they deposited a beneficiary's funds in a collective bank account. Payees must ask for and receive permission before depositing a beneficiary's funds to ensure the account is properly titled, account records are clear and up-to-date, and the payee has agreed to make account and supporting records available.</p> <p>4. Beneficiary Funds in Agency Operating Account - Payees deposited beneficiaries' funds in an operating account that did not reflect beneficiaries' ownership of funds</p>	
Same Deficiencies from Previous Reviews Found	Payee repeated the same deficiencies found in a previous review.	Conduct a suitability determination of the payee according to established policy.
Dedicated Account Funds Misapplied	The site review findings determined the payee may have knowingly misapplied funds from a dedicated bank account.	Investigate the finding and seek repayment from the payee for the misapplied amount on a dollar-for-dollar basis.

Appendix B – Descriptions of Types of Referrals

Referrals to appropriate local, state, or federal agency for health or safety findings to the beneficiary

If the reviewer becomes aware of a serious risk of harm to the beneficiary, for example:

- Immediate health and safety threat
 - Flagged for immediate action by SSA;
 - Evidence of physical abuse (e.g., bruises, burns, scars, etc.);
 - Malnourishment;
 - Unsafe housing and living conditions; or
 - Worker exploitation.
- Noncritical health or safety finding.

Referrals to appropriate local, state, or federal agency for possible financial exploitation by individuals other than the representative payee

If the reviewer becomes aware of possible financial exploitation of a beneficiary by someone other than the representative payee (e.g., by family, friends, neighbors, caregivers, acquaintances, employers, or strangers), for example:

- Taking the beneficiary's money without permission;
- Failing to repay borrowed money or return property;
- Charging too much for services or not being responsive to requests the beneficiary paid the individual, agency, or company to do;
- Purchasing new or unusual "gifts"; or
- Exerting pressure on the beneficiary to change his or her will, life insurance, retirement annuity, etc.

Referrals to appropriate resource for beneficiary identified needs

The reviewer may refer the beneficiary to available resources in the beneficiary's community to assist with any beneficiary identified need, only with written consent of the beneficiary or legal guardian, including:

- Community resources;
- Employment-related services;
- Housing assistance;
- Occupational/vocational skills or services; and
- Any other needs the reviewer identifies that will assist the beneficiary.