

Agency Activities to Fight Fraud

March 2016
Social Security Administration



	Activity	Definition
1	Increase Continuing Disability Reviews (CDR)	While the primary purpose of a CDR is to determine if a beneficiary is still entitled to benefits because of his or her medical condition, the ability to perform additional CDRs may allow SSA to detect potentially fraudulent or suspicious activities.
2	Expand Cooperative Disability Investigation (CDI) Units	CDI units obtain evidence of material fact to resolve questions of fraud in our programs. According to the Office of the Inspector General (OIG), CDI units contributed more than \$1 billion to agency savings over the last three fiscal years.
3	Anti-Fraud Training	SSA requires mandatory anti-fraud training for all agency and disability determination services (DDS) employees. Our employees remain the best and first line of defense in detecting and preventing fraud, and we remain committed to improving our training. We provide ad hoc training related to handling claims associated with the disability fraud clusters. We also continuously and periodically train on application and outcomes of fraud and similar fault policy, procedures, and processes to determine opportunities to program integrity.
4	Data Analytics	Data analytics enhance fraud detection and help develop analytical tools to determine common characteristics and patterns. We apply these tools to help us uncover potential fraud or other suspicious behavior when we review applications or existing data on beneficiaries. OIG is participating in this initiative.
5	Fraud Prevention Units (FPU)	FPU are specialized fraud units comprised of examiners dedicated to redetermine and act on probable fraud cases, as well as compile data from the cases to help us further develop analytical tools to identify potential fraud.
6	National Anti-Fraud Committee (NAFC)	The NAFC's mission is to support national and regional strategies to combat fraud, waste, and abuse. The NAFC supports our goal to balance our service and stewardship work and promotes accountability to taxpayers by ensuring superior financial performance, budget management, and integrity in all payments, records, and processes.
7	Submission of Evidence Regulation	We revised our regulations to require claimants to inform us about, or submit all evidence known to them that relates to their disability claim – both favorable and unfavorable. We also revised our regulations to require a representative help the claimant obtain the information or evidence that the claimant must submit. On a sub-regulatory level, to help ensure representative compliance, we established a system for referring noncompliant representatives to OGC for potential sanctions.

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8	Fraud Prosecution Project	The goal of this project is to increase the number of prosecutions for crimes involving Social Security matters. To support this project, the Office of General Counsel (OGC) has provided attorneys to serve as Special Assistant United States Attorneys (fraud prosecutors) in many of the Federal districts where we have regional offices and at our headquarters in Baltimore, MD.
9	Symptom Evaluation Research Effort	Our objective in entering into a contract with the Administrative Conference of the United States (ACUS) was to commission a study of the Social Security Act; our ACUS issued their final report in March 2015. We convened a workgroup to address their recommendations and drafted a Social Security Ruling (SSR) to make the changes they have suggested. We expect the SSR to publish in FY 2016.
10	Psychological Testing Research Effort	We asked the Institute of Medicine (IOM) to perform a comprehensive review of psychological testing, including symptom validity testing. The IOM released the report entitled "Psychological Testing in the Service of Disability Determinations on April 10, 2015." Currently the Social Security Administration uses psychological testing where appropriate to inform the decision making process. The committee verified that, where appropriate, there is value in standardized psychological testing, including both non-cognitive measures and cognitive tests. In their recommendations, the committee emphasized useful testing as administered, interpreted, and validated by qualified providers. Validation of the test results could include validity testing at the time of the psychological testing. Standardized psychological tests assess typical behavior (non-cognitive tests) or maximal performance (cognitive test). Non-cognitive test require individuals to answer questions regarding typical behavior or psychological symptoms and complaints; examples of such tests include depression, anxiety, and personality inventories. Cognitive tests require individuals to answer questions or solve problems (that usually have correct answers) as well as they possibly can; examples of these tests include intelligence and memory tests.
11	Office of Anti-Fraud Programs (OAFP)	We established OAFP in November 2014 to serve as a centralized anti-fraud office within our agency. OAFP has the lead for developing and implementing our agency's comprehensive anti-fraud initiatives in consultation and collaboration with OIG and other internal agency components as appropriate.
12	Administrative Sanctions	Effective September 23, 2013, we implemented a new, streamlined process for imposing administrative sanctions that facilitates national focuses agency resources on cases that OIG investigated but declined for criminal prosecution or civil monetary penalty (CMP).

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13	Anti-Fraud Communications Campaign (AFCC)	AFCC is a multi-year campaign to convey the agency’s anti-fraud messaging and promote the agency’s continued expansion of our anti-fraud capabilities.
14	Anti-Fraud Language on Notices	To help communicate our anti-fraud message, we are adding new Anti-fraud and reporting responsibility language to our notices.
15	Disability Case Review	We continue to complete disability fraud redeterminations for a number of beneficiaries. In addition, the agency is also handling appeals and updating guidance for technicians.
16	Impose Civil Monetary Penalties (CMP)	Section 1129 of the Social Security Act (the “Act”) authorizes imposition of a CMP against anyone who makes false statements, misrepresentations, or material withholding in connection with obtaining or retaining benefits or payments under Titles II, VIII, or XVI of the Act. In addition, under section 1129A of the Act, OIG may impose CMPs against representative payees for wrongful conversion of payments to their own use, or a failure to notify SSA of a material change in the beneficiary’s living arrangements or work activity.
17	Quality Review - Field Office Adjudications	In order to strengthen the quality of field office adjudications, we established a new review process to ensure the accuracy of work completed by field office technicians. One of the primary areas we review is the disability case processing accuracy in field offices, with a concentration on the accuracy of how we determine the applicant’s disability onset date.
18	eServices Fraud Prevention	To improve fraud prevention and detection, we develop and use tools to identify and track suspicious or potentially fraudulent eService transactions and take appropriate preventive and corrective actions to contact the beneficiary and revert records to their pre-fraud state.