

Individual Performance Indicator Results

This section reports SSA's FY 2003 performance for each individual GPRA performance indicator and PART measure. Additionally, this section reports final FY 2002 data for those performance indicators that did not have final data when the FY 2002 Performance and Accountability Report (PAR) was issued. Performance indicators and workload measures are organized under the Strategic Goal and Strategic Objective that they support. For each GPRA performance measure, SSA includes the definition and data source and indicates whether the goal was met. If the goal was not met, an explanation is included explaining why and what actions the Agency will take toward improvement.

A discussion of SSA's 17 Key Performance Indicators (KPIs) can be found in the "Performance Goals and Results" section (page 29), and therefore is not repeated in this section. Appropriate page references are made to the KPIs in the discussion of the other GPRA performance measures.

Strategic Goal A: To deliver high quality, citizen-centered Service

Strategic Objective 1: Make the right decision in the disability process as early as possible

The following lists six KPIs for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators	See page for detailed discussion
1.1 Number of initial disability claims (Title II and Title XVI) processed	See page 33
1.2 Number of hearings processed	See page 33
1.3 Average processing time for initial disability claims (days)	See page 34
1.4 Average processing time for hearings (days)	See page 34
1.5 Number of initial disability claims (Title II and Title XVI) pending	See page 35
1.6 Number of hearings pending	See page 36

The following describes the four non-KPI performance measures for Strategic Objective 1:

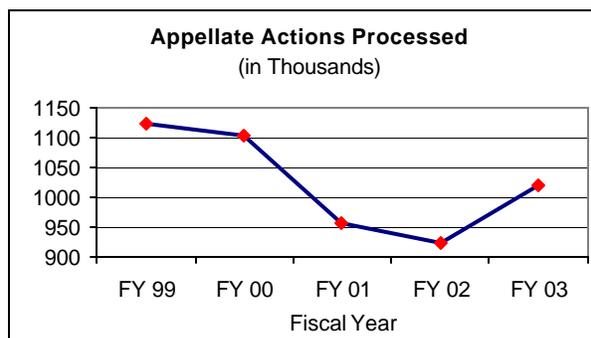
1.7 — Number of Appellate Actions Processed

FY 2003 Goal: 950,500

Actual FY 2003 Performance: 1,019,815

SSA met its goal. This performance measure includes four workloads: reconsiderations, appeals council cases, new court cases and court remands. Substantial resources and staff were redirected to increase output and reduce existing backlogs at the beginning of FY 2003.

FY 1999: 1,124,442 **FY 2000:** 1,102,922
FY 2001: 957,858 **FY 2002:** 923,636



Trend: This trend line is increasing as SSA continues to meet its projected goal.

Data Definition: Counts of reconsiderations, Appeals Council cases, new court cases and court remands are included in this count.

Data Source: Appeals Council Automated Processing System & SSA-Level Cost Accounting System.

1.8 — DDS Net Accuracy Rate (allowances and denials combined)

FY 2003 Goal: 98.0% allowances; 96.2% denials

FY 2003 Goal: 97%

Actual FY 2002 Performance: 98.5% allowances; 95.1% denials

SSA did not meet its FY 2002 goal. The Agency did not meet this ambitious goal. SSA and the Disability Determination Services (DDS) continued to focus on denial accuracy as a problematic area. However, during the year, the DDSs were dealing with a number of internal issues including inexperienced or newly trained examiners, early retirements, and an inability to fill a large number of vacancies that likely impacted their ability to maintain acceptable denial accuracy.

This performance indicator was discontinued in FY 2003 and incorporated into a more meaningful performance indicator “DDS net accuracy rate (allowances and denials combined)”. Net accuracy is a truer measure of the correctness of DDS decision-making and therefore, provides the public with a more accurate picture of the correctness of initial disability claims decisions. SSA expects to maintain high levels of adjudication quality.

Actual FY 2003 Performance: Not Available

The FY 2003 actual performance data will not be available because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 PAR. This is a very aggressive goal and it will be a challenge to achieve it. SSA and the DDS continue to focus on denial accuracy as the most problematic area.

FY 1999: 98.0% allowances; 95.8% denials

FY 2000: 98.4% allowances; 95.2% denials

FY 2001: 98.3% allowances; 94.7% denials

Trend: The definition for this measure changed in 2002. As a result, SSA cannot make comparisons between 2002 and previous years.

Data Definition: Net accuracy is an alternative method of reporting state agency accuracy based upon the “correctness” of the DDS disability determination. Net accuracy is based upon the net error rate defined as the number of corrected deficient cases with changed disability decisions, plus the number of deficient cases not corrected within 90 days from the end of the period covered by the report. Prior to 2003, SSA reported allowances and denials as separate numbers.

Data Source: Disability Quality Assurance Data Bases.

1.9 — Hearings Decisional Accuracy Rate

FY 2003/2004 Goal: 89%

Actual FY 2003 Performance: Not Available

The Office of Hearings and Appeals (OHA) expects to meet the FY 2003 goal of 89 percent due to continuing Administrative Law Judge (ALJ) participation in quality reviews of hearing decisions and involvement in the pre-effectuation reviews of allowances. This data is derived from the Biennial Disability Quality Review Process Report. FY 2001-2002 data will not be available until December 2003.

FY 1999 & 2000: 88%

Trend: The hearings decisional accuracy rate remained stable between 1999 and 2000.

Data Definition: The decisional accuracy rate is the percent of disability hearing decisions (both favorable and unfavorable) supported by “substantial evidence”. This is the standard used by the federal courts to evaluate accuracy of decisions, and by the Appeals Council in determining which hearing decisions to review.

Data Source: Biennial Disability Hearings Quality Review Process Peer Review Reports.

1.10 — Average Processing Time for Decisions on Appeals of Hearings (days)

FY 2003 Goal: 300 days

Actual FY 2003 Performance: 294 days

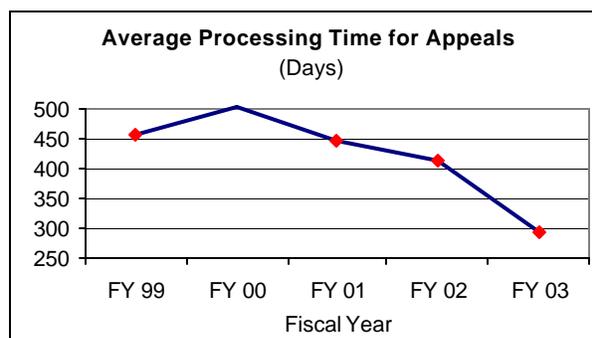
SSA met its goal. In FY 2003, SSA devoted substantial resources and attention to this workload. The Agency closely monitored aged cases and focused on processing the oldest cases. SSA used differential case management, reviewing incoming cases and placing them on appropriate tracks for processing. The Agency also temporarily reassigned staff to assist with new court cases, prepare certified court records, and process court transcripts. All of this resulted in lower processing time.

FY 1999: 458 days **FY 2000: 505 days**
FY 2001: 447 days **FY 2002: 412 days**

Trend: This measure has a very positive trend line. SSA believes that processing time will continue to decline in FY 2004.

Data Definition: Effective FY 2001, this measure represents the 12-month average processing time for dispositions issued during the report period. Processing time begins with the date of the request and ends with the disposition date.

Data Source: Actual processing time for each case is maintained by the Appeals Council Automated Processing System (ACAPS). Percentages will be calculated from information extrapolated from ACAPS.



Strategic Objective 2: Increase employment for people with disabilities

The following describes the two non-KPI performance measures for Strategic Objective 2:

2.1 — Percent Increase in the Number of DI and SSI Beneficiaries, with Tickets Assigned, Who Work

FY 2003 Goal: Establish a baseline

Actual FY 2003 Performance: Not completed.

SSA did not meet its goal. The data for the baseline will not be available until spring 2004. SSA fully expects to establish a baseline in FY 2004 and establish a FY 2004/FY 2005 goal based on baseline information.

Trend: Not applicable until baseline is established and FY 2004/FY 2005 results are available.

Data Definition: In 2003, SSA will establish a preliminary baseline and a FY 2004 goal for this new outcome measure. Actual performance levels will be based on all recorded earnings information from various data sources for beneficiaries who have assigned their tickets to Employment Networks (EN), i.e., signed an agreement with the EN for services. The data will be provided on a calendar basis.

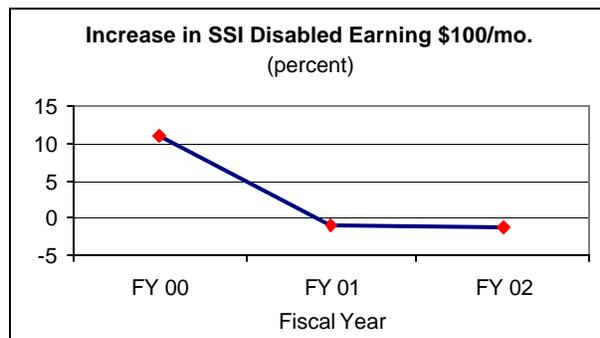
Data Source: eWorkCDR DB2, Disability Control File (VERN or Work and Earnings Reports field), OCSE, MEF.

2.2 — Percent Increase in the Number of SSI Disabled Beneficiaries Earning at least \$100 per Month

FY 2003 Goal: 8% (269,109)

Actual FY 2003 Performance: Not Available

The FY 2003 actual performance data will not be available for reporting in the FY 2003 PAR. However, early indications are that the Agency will not meet its goal. While the Ticket-to-Work program should eventually have a significant impact on return-to-work among SSI recipients, it may take several years to see the full impact. Many policy changes and new structures are still in development phases. The Ticket-to-Work program will not be completely rolled out until late in 2004. In addition, disabled SSI recipients face a number of barriers to employment. Such barriers, like insufficient education and training or the lack of a full understanding by employers of the productive capacity of people with disabilities, will not be affected by SSA's programs.



FY 1999: Not Available **FY 2000:** 10.9% (255,129)
FY 2001: -1.1% (252,219) **FY 2002:** -1.2% (249,175)

Trend: It appears that the number of SSI disabled beneficiaries earning \$100/month continues to decline. However, it is difficult to identify a trend because the actual performance is measured just once each year and does not reflect performance throughout the year.

Data Definition: Beginning FY 2003, the Agency goal will be for annual increases in the number of working SSI disabled beneficiaries earning at least \$100 per month. This is a new measure meant to better reflect the impact of all work incentives for SSI disabled beneficiaries.

Data Source: “SSI Disabled Recipients Who Work” report.

Strategic Objective 3: Improve service with technology

The following lists three KPIs for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators		See page for detailed discussion
3.1	Percent of retirement claims initiated via the Internet	See page 38
3.2	Percent of employee reports (W-2s) filed electronically	See page 39
3.3	Percent of people who do business with SSA rating the overall service as “excellent,” “very good,” or “good”	See page 40

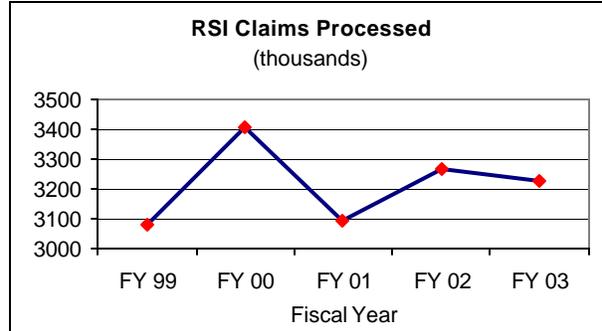
There are also four non-KPI performance measures for Strategic Objective 3:

3.4 — Retirement Survivor Insurance (RSI) Claims Processed

FY 2003 Goal: 3,229,000

Actual FY 2003 Performance: 3,238,871.

SSA met its goal. One of SSA’s most visible programs and major responsibilities is to process the Retirement Survivor Insurance (RSI) claims it receives. Each year SSA estimates the RSI claims it expects to receive based on actuarial estimates, prior year’s claims receipts, legislative or policy changes and other factors. The result indicates that the estimates are accurate and that sufficient resources are devoted to the workload to process it.



FY 1999: 3,076,987

FY 2000: 3,404,938

FY 2001: 3,092,743

FY 2002: 3,265,473*

* Note: Based on updated Agency Data, final FY 2002 total for RSI claims processed was 3,266,297

Trend: SSA has met the goal every year except 1999, when it was narrowly missed. While the number of RSI claims processed remained relatively consistent over the last 5 years, SSA expects significant increases over the next 10 years as the baby boomers begin to retire.

Data Definition: All retirement, survivors, and Medicare initial claims processed by field offices and central operations components. Includes totalization claims.

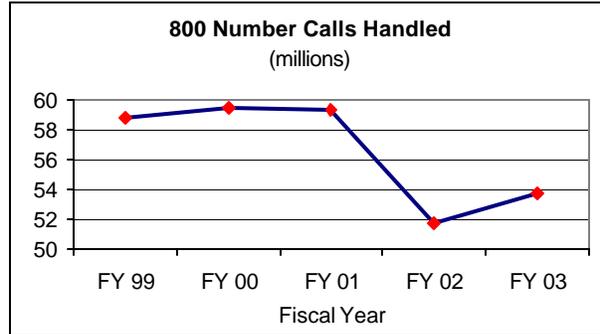
Data Source: The MIICR System.

3.5 — 800-number Calls Handled

FY 2003 Goal: 55,000,000

Actual FY 2003 Performance: 53,700,000

SSA did not meet its projection. The Agency's national 800 number handled 53.7 million calls in FY 2003. This represents 1.9 million more calls handled than in FY 2002. Of the total calls handled, 42.4 million were handled by agents (an increase of 3.6 million calls when compared to FY 2002) and 11.3 million calls were handled by automation (a decrease of 1.7 million calls when compared to FY 2002). The number of calls handled by agents increased because SSA experienced the first full year of maximum efficiencies gained from the Call Center Network Solution (CCNS), completed in FY 2002. The number of calls to automation decreased due to fewer callers requesting Medicare Replacement Cards. This occurred as a result of an Agency restriction limiting the use of the Pin/Password application to those individuals who were sent notices with Pin/Password information, and because of the removal of the Internet message from the automated options menu.



The CCNS allows the routing of calls to the next available agent at any site of the Network. This enables the Network to handle the optimum number of calls per agent; therefore, handling more calls with the same number of agents. The gain in efficiency from CCNS was realized in FY 2003. Increased network efficiency combined with answering calls faster, expanded automated telephone services, handling more calls to completion through immediate claims-taking units, an easier to navigate options menu, and other enhancements continue to improve service and prepare the Network to meet future increases in workload demands.

FY 1999: 58,800,000 **FY 2000:** 59,500,000
FY 2001: 59,300,000 **FY 2002:** 51,800,000

Trend: The number of calls handled by the 800-number has decreased during the past 2 years. However, growing workload demands, projected by actuaries, are expected to slightly increase the number of calls handled by the 800-number in future years.

Data Definition: The number of calls (either live or automated service) handled by SSA's 800 number

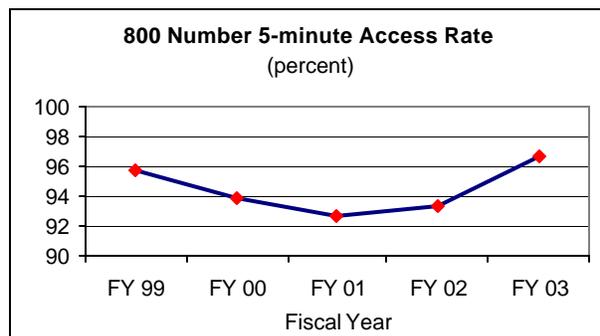
Data Source: National 800 number network.

3.6 — Percent of Callers who Successfully Access the 800-number within 5 Minutes of their First Call

FY 2003 Goal: 94%

Actual FY 2003 Performance: 96.7%

SSA met its goal. The higher percentage of callers who access the 800-number within 5 minutes of their first call is primarily due to increased network efficiencies gained from the CCNS. (See prior performance indicator 3.5.)



FY 1999: 95.8% **FY 2000:** 92.9%
FY 2001: 92.7% **FY 2002:** 93.3 %

Trend: FY 2003 shows an upward trend over FY 2001 and FY 2002.

Data Definition: This is the percent of unique call attempts that successfully “connect” within 5 minutes of the first attempt within a 24-hour period. A successful “connection” occurs when a caller selects either an automated service or a live agent and is connected with that option within 5 minutes of first dialing the 800-number.

Data Source: Automatic number identification records provided by WorldCom.

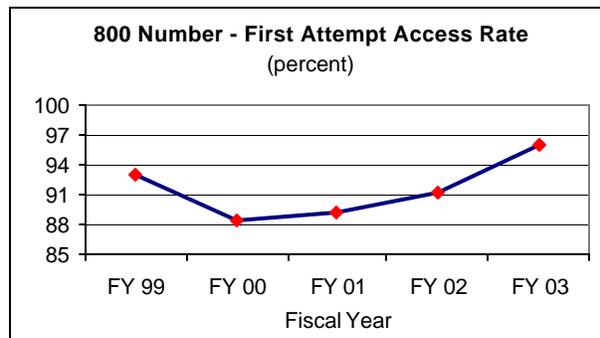
3.7 — Percent of Callers who get through to the 800-number on their First Attempt

FY 2003 Goal: 87%

Actual FY 2003 Performance: 95.9%

SSA met its goal. SSA was able to provide improved access as a result of increased network efficiencies gained from CCNS which was completed in FY 2002. (See performance discussion in section 3.5 for more details.)

FY 1999: 92.9% **FY 2000:** 88.4%
FY 2001: 89.2% **FY 2002:** 91.3%



Trend: Continued improvement.

Data Definition: The percent is the number of individuals who reach the 800-number (either live or automated) service on their first attempt, divided by the number of unique telephone numbers dialed to the 800-number. An “attempt” is defined as the first attempted call of the day, or a subsequent attempt after a previously successful call.

Data Source: Automatic number identification records provided by WorldCom.

Strategic Goal B: To ensure superior Stewardship of Social Security programs and resources

Strategic Objective 4: Prevent fraudulent and erroneous payments and improve debt management

The following lists four KPIs for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators	See page for detailed discussion
4.1 SSI non-disability redeterminations	See page 43
4.2 Continuing Disability Reviews (CDR) processed	See page 44
4.3 Percent of outstanding SSI debt in a collection arrangement	See page 44
4.4 Percent of outstanding OASDI debt in a collection arrangement	See page 45

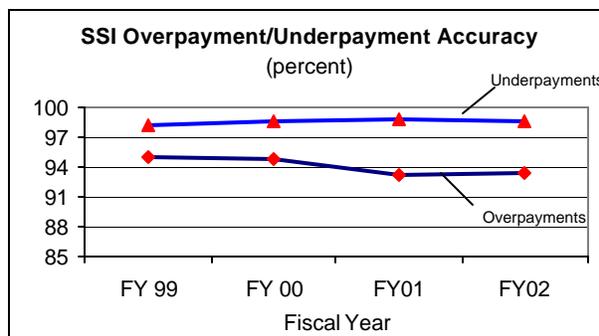
There are also three non-KPI performance measures for Strategic Objective 4:

4.5 — Percent of SSI Payments Free of Preventable Error (overpayments and underpayments)

FY 2002 Goal: Overpayment accuracy: 94.7%
Underpayment accuracy: 98.8%

FY 2003 Goal: Overpayment accuracy: 95.4%
Underpayment accuracy: 98.8%

Actual FY 2002 Performance:
Overpayment accuracy: 93.4%
Underpayment accuracy: 98.6%



SSA did not meet its FY 2002 goal. Although SSA’s accuracy rate improved slightly over FY 2001, the Agency did not meet the extremely ambitious FY 2002 goal. Meeting the goal would have translated to making \$490 million less in erroneous payments over FY 2001. SSA’s actual performance did prevent approximately \$35 million more in erroneous payments than in FY 2001. The Agency continues to take action to improve its payment accuracy to reach future goals. Reaching the accuracy goal will not happen overnight. Each 1 percent increase in payment accuracy equates to \$350 million of error prevented.

In FY 2002, SSA implemented a Corrective Action Plan (CAP) to improve the accuracy of the SSI program. Based on that plan, the GAO removed the SSI program from its “High Risk” list. SSA is committed to making program improvements that will enable the Agency to meet the accuracy goals. As part of that effort, SSA is focusing on projects that will result in error prevention rather than just detection and collection. For example, one of the leading causes of error is unreported financial institution accounts. The Agency is preparing to test a process to automatically verify the financial account balances. If this process is successful, SSA expects to prevent approximately \$85 million per year in erroneous payments. The CAP includes other such projects aimed at reducing erroneous payments. The Agency is also exploring ways to improve the eligibility redetermination process to further reduce error.

Actual FY 2003 Performance: The FY 2003 actual performance data will not be available for reporting in the FY 2003 PAR because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 PAR. However, in this PAR, SSA is reporting on the FY 2002 actual data.

FY 1999: Overpayment: 94.9%; Underpayment: 98.3%

FY 2000: Overpayment: 94.7%; Underpayment: 98.6%

FY 2001: Overpayment: 93.3%; Underpayment: 98.8%

Trend: The percent of SSI payments free of preventable error did not change in a statistically significant way from the previous year.

Note: For FY 2002, statistical precision at the 95 percent confidence level is ± 1.1 for overpayments and ± 0.3 for underpayments.

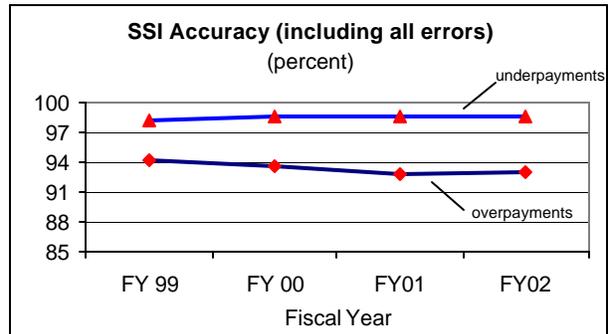
Data Definition: The SSI payment accuracy rate free of preventable errors is determined by an annual review of a statistically valid sample of the beneficiary rolls. The rate is computed by first subtracting the amount of “unpreventable” incorrect payments from the dollars overpaid or underpaid in a fiscal year, and then dividing these dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. The current measuring system captures the accuracy rate of the non-medical aspects of eligibility for SSI payment outlays.

Data Source: SSI Stewardship report.

4.6 — SSI Overpayment and Underpayment Accuracy Rate (including both preventable and unpreventable error)

FY 2002 Goal: Overpayment accuracy: 94.0%
Underpayment accuracy: 98.8%
FY 2003 Goal: Overpayment accuracy: 93%
Underpayment accuracy: 98.8%

Actual FY 2002 Performance:
Overpayment accuracy: 93.0%
Underpayment accuracy: 98.6%



SSA did not meet its FY 2002 goal. Although SSA’s accuracy rate improved slightly over FY 2001, the Agency did not meet the extremely ambitious FY 2002 goal. Meeting the goal would have translated to making \$420 million less in erroneous payments over FY 2001. SSA’s actual performance did prevent approximately \$35 million more in erroneous payments than in FY 2001. The Agency continues to take action to improve its payment accuracy to reach future goals. Reaching the accuracy goal will not happen overnight. Each 1 percent increase in payment accuracy equates to \$350 million of error prevented.

In FY 2002, SSA implemented a Corrective Action Plan (CAP) to improve the accuracy of the SSI program. Based on that plan, the GAO removed the SSI program from its “High Risk” list. SSA is committed to making program improvements that will enable the Agency to meet the accuracy goals. As part of that effort, SSA is focusing on projects that will result in error prevention rather than just detection and collection. For example, one of the leading causes of error is unreported financial institution accounts. The Agency is preparing to test a process to automatically verify the financial account balances. If this process is successful, SSA expects to prevent approximately \$85 million per year in erroneous payments. The CAP includes other such projects aimed at reducing erroneous payments. The Agency is also exploring ways to improve the eligibility redetermination process to further reduce error.

Actual FY 2003 Performance: The FY 2003 actual performance data will not be available for reporting in the FY 2003 PAR because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 PAR. However, in this PAR, SSA is reporting on the FY 2002 actual data.

FY 1999: Overpayment: 94.3%; Underpayment: 98.3%
FY 2000: Overpayment: 93.6%; Underpayment: 98.6%
FY 2001: Overpayment: 92.8%; Underpayment: 98.6%

Trend: The SSI overpayment accuracy rate did not change in a statistically significant way from the previous year. There was no change in SSI underpayment accuracy for 2001 and 2002.

Note: For FY 2002, statistical precision at the 95 percent confidence level is +/-1.2 percent for overpayments and +/-0.3 percent for underpayments.

Data Definition: The SSI payment accuracy, including both preventable and unpreventable errors, is determined by an annual review of a statistically valid sample of the beneficiary rolls. The overpayment accuracy rates and underpayment accuracy rates are determined separately. The overpayment accuracy rate is computed by first subtracting the total amount of overpaid dollars from the total dollars paid for a fiscal year, and then dividing these dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. The underpayment accuracy rate is computed by first subtracting the total amount of underpaid dollars from the total dollars paid for a fiscal year, and then dividing these dollars by

the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. The current measuring system captures the accuracy rate of the non-medical aspects of eligibility for SSI payment outlays.

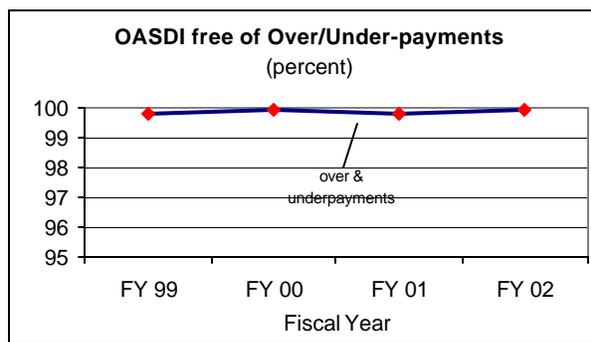
Data Source: SSI Stewardship report.

4.7 — Percent of OASDI Payments Free of Overpayments and Underpayments

FY 2002 Goal: Overpayment accuracy: 99.8%
Underpayment accuracy: 99.8%

FY 2003 Goal: Overpayment accuracy: 99.8%
Underpayment accuracy: 99.8%

Actual FY 2002 Performance:
Overpayment accuracy: 99.9%
Underpayment accuracy: 99.9%



SSA met its goal. The 0.03 percent increase in overpayment accuracy from FY 2001 is not statistically significant, while the 0.16 percent increase in underpayment accuracy does represent a statistically significant change. The underpayment error rate in FY 2001 was largely caused by one unusually large date-of-birth error. There were no date-of-birth errors in FY 2002 and this resulted in the decrease in underpayment error dollars. Because of the small sample and infrequency of these errors, this type of variation is not unusual.

Actual FY 2003 Performance: The FY 2003 actual performance data will not be available for reporting in the FY 2003 PAR because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 PAR. However, in this PAR, SSA is reporting on the FY 2002 actual data.

FY 1999: Overpayment: 99.8%; Underpayment: 99.9%
FY 2000: Overpayment: 99.9%; Underpayment: 99.9%
FY 2001: Overpayment: 99.8%; Underpayment: 99.8%

Trend: We continue to maintain a high level of dollar accuracy of OASDI payment outlays.

Note: Overall, statistical precision at the 95% confidence level ranges from 99.60% to 99.99% for overpayments and 99.88% to 99.99% for underpayments.

Data Definition: The Old Age, Survivors and Disability Insurance (OASDI) payment accuracy rate is determined by an annual review of a statistically valid sample of the beneficiary rolls. Separate rates are determined for the accuracy of payments with overpayment dollars and the accuracy of payments with underpayment dollars. The rates are computed by dividing these dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. Prior to FY 2001, the accuracy of only OASI outlays was included. Effective FY 2001, the non-medical accuracy of DI outlays was added to the measure. GAO raised a concern that combining payment accuracy data from the OASI and the DI programs may affect SSA's ability to sufficiently monitor and manage performance. While the PAR combines data from these two programs, Stewardship Reports continue to include the accuracy of OASI and DI payment outlays separately.

Data Source: OASDI Stewardship Report.

Strategic Objective 5: Strengthen the integrity of the Social Security Number (SSN)

The following describes the two non-KPI performance measures for Strategic Objective 5:

5.1 — Social Security Numbers (SSNs) Processed

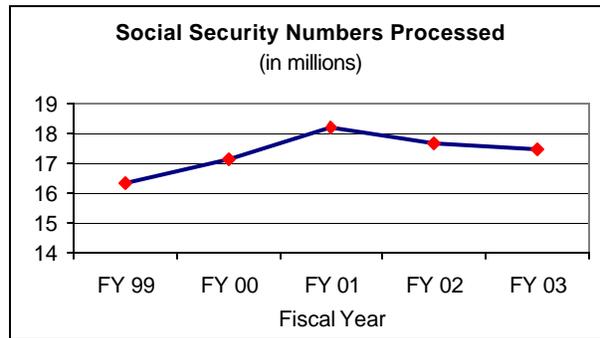
FY 2003 Goal: 16,000,000

Actual FY 2003 performance: 17,523,560

SSA exceeded its projection. One of SSA's most visible and ongoing operational responsibilities is to process the requests it receives for original or duplicate Social Security Numbers (SSN).

FY 1999: 16,322,588 **FY 2000:** 17,128,073

FY 2001: 18,179,115 **FY 2002:** 17,679,490



Trend: SSA has met the goal for SSNs issued every year. Each year the Agency estimates the SSN request volume it expects to receive. The number of SSNs processed is entirely dependent on the number of people who need an original or replacement SSN, and who meet citizenship or residency requirements.

Data Definition: SSN issuance for duplicate or original numbers processed by field offices and central office components, plus enumeration-at-birth (EAB) activity. It also includes the count of fraud investigations that do not result in the issuance of an SSN or EAB.

Data Source: FOSSNER, EAB, year-to-date processing statistics.

5.2 — Percent of SSNs Issued that are Free of Critical Error

FY 2003 Goal: 99.8%

Actual FY 2003 Performance: Not Available

FY 2003 data will not be available until the end of the calendar year. These data will be reported in the FY 2004 PAR. SSA's FY 2002 performance on the indicator "Percent of SSNs issued accurately," is discussed on page 96.

Trend: Since the data definition is new for FY 2003, there is no trend discussion or chart.

Data Definition: The rate is based on an annual review of SSN applications to verify that: 1) the applicant did not receive an SSN that belonged to someone else; 2) if the applicant had more than one SSN, the numbers were cross-referenced; and 3) the applicant was entitled to receive an SSN based on supporting documentation, i.e., the field office verified appropriate documentation—Bureau of Citizenship and Immigration Services, formerly Immigration and Naturalization Services, document for foreign born and birth certificate for U.S. born—and made a correct judgment of entitlement to an SSN.

Note: For GPRA purposes, only the first two criteria will be used to measure against the FY 2003 goal because baseline data has not been established using the third criterion. However, during FY 2003, all three criteria will be measured internally in order to obtain baseline data. All three criteria will be used for measuring SSN accuracy effective FY 2004.

Data Source: Enumeration Process Quality Review.

Strategic Objective 6: Increase the accuracy of earnings records

The following describes the three non-KPI performance measures for Strategic Objective 6:

6.1 — Annual Earnings Items Processed

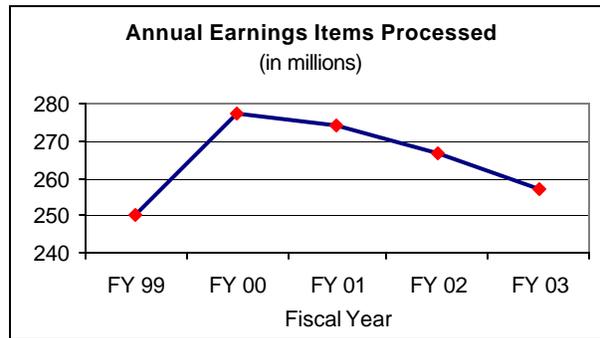
FY 2003 Goal: 260,000,000

Actual FY 2003 Performance: 257,188,087

SSA did not meet its projection. SSA's original projection of Annual Earnings Items was too high. In August, the Agency's Office of the Actuary lowered the projection of tax year 2002 W-2's by 9 million.

FY 1999: 249,867,974 **FY 2000:** 277,145,696

FY 2001: 274,427,394 **FY 2002:** 266,777,009



Trend: The number of Annual earnings items processed is dependent on the number of earnings items reported. That number has decreased since the year 2000.

Data Definition: Annual earnings items include the total number of electronic and paper annual wage items processed through the balancing operation, plus the total number of magnetic media and self-employment items posted in a fiscal year.

Data Source: MIICR system and Agency records.

6.2 — Reduction in the Size of the Earnings Suspense File

FY 2003 Goal: 18,000,000

Actual FY 2003 Performance: 2,400,000

SSA did not meet its goal. The approach to successfully complete the project – remove and post 30 million items by FY 2004 – follows a logical progression in development of decisionmaking capacity. It is not related to month-by-month volumes of items that the decision system identifies for posting or removal and this performance indicator should not be prorated. Based on the steady progress being made in developing matching techniques for the various subgroups into which the suspense file has been divided to organize this initiative, the Agency still expects to remove approximately 30 million items from the suspense file by the end of fiscal year 2004.

FY 1999: Not Available **FY 2000:** Not Available

FY 2001: Not Available **FY 2002:** Not Available

Trend: Trend data is not available as this is a new indicator beginning in FY 2003

Data Definition: This goal relates to suspense file items for years prior to 2001. The Agency goal is that before 2005, SSA will find the correct earnings record and post 30 million or more suspense items for years 2000 and earlier. New processes being developed by the Office of Quality Assurance (OQA) will be used.

Data Source: Office of Quality Assurance records of items removed from suspense and posted to the correct earnings records. Also, a comparison of the current suspense file will be made to the suspense file at the end of FY 2003.

6.3 — The Percent of Incoming Earnings Items Removed from the Suspense File at the end of the Annual Earnings Posting Cycle

FY 2003 Goal: 2%

Actual FY 2003 Performance: Not Available

The FY 2003 actual performance data will not be available for reporting in the FY 2003 PAR because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 PAR.

FY 1999: Not Available **FY 2000:** Not Available
FY 2001: Not Available **FY 2002:** Not Available

Trend: Trend data is not available as this is a new indicator beginning in FY 2003

Data Definition: Earnings remaining in suspense after the annual posting cycle are wage or self-employment earnings that are not matched to an earnings record after all routine matching operations are complete. The FY 2004 five percent reduction goal will be achieved by using new matching routines currently being developed by OQA that use earnings records as the basis for the match to the employer/self-employment report. The OQA process is used after all other matching attempts fail. The percentage is determined by comparing the number of items added to suspense during a full posting cycle to the number later removed in the new process. The first earnings cycle to which the indicator will be applied will be in 2002, therefore, the 2003 goal applies to the 2002 cycle. The FY 2004 goal of 5 percent represents the cumulative effect of the FYs 2003 and 2004 efforts.

Data Source: Items in the suspense file at the end of the full 2002 cycle compared to items removed by the new process.

Strategic Objective 7: Efficiently manage Agency finances and assets, and effectively link resources to performance outcomes

The following lists two KPIs for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators		See page for detailed discussion
7.1	Disability Determination Service (DDS) cases processed per workyear (PPWY)	See page 49
7.2	“Get to green” on all PMA initiative plans for “progress”	See page 50

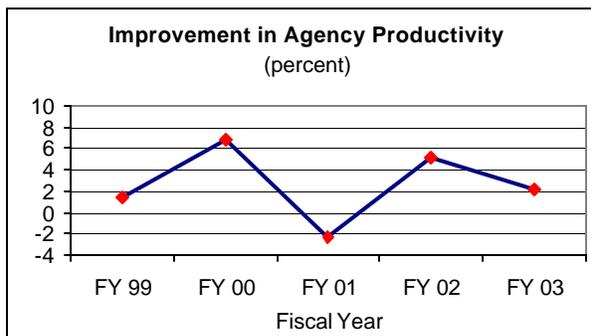
There are also six non-KPI performance measures for Strategic Objective 7:

7.3 — Percent Improvement in Agency Productivity

FY 2003 Goal: 2%

Actual FY 2003 Performance: 2.1%

SSA met its goal. As part of the FY 2004 President’s Budget, SSA committed to an average annual productivity improvement of 2 percent. SSA met the commitment in FY 2003 with a productivity improvement of 2.1 percent. This is in addition to the 5.1 percent productivity improvement achieved in FY 2002 for an average of 3.6 percent over the 2 year period. The FY 2003 increase is due primarily to the continued automation efforts and streamlining of the Agency’s business processes.



FY 1999: 1.4% **FY 2000:** 6.8%
FY 2001: -2.3% **FY 2002:** 5.1%

Trend: The Agency expects to continue to meet the goal of an average of 2 percent productivity improvement per year. Continued improvement in actual performance, along with the numerous initiatives the Agency is pursuing, lends credence to achieving this goal.

Data Definition: The percent change in productivity is measured by comparing the total number of SSA and DDS workyears that would have been expended to process current year workloads at the prior year’s rates of production to the actual SSA and DDS workyear totals expended.

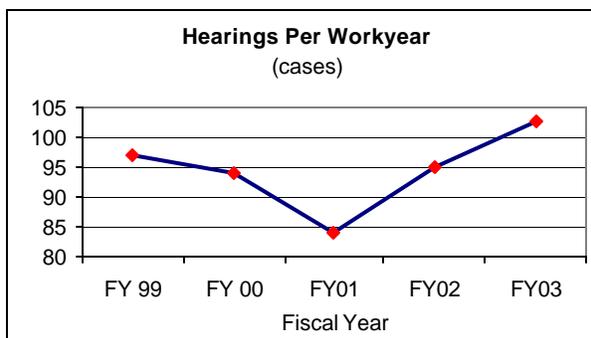
Data Source: Agency Cost Accounting System.

7.4 — Number of SSA Hearings Cases Processed per Workyear (PPWY)

FY 2003 Goal: 101

Actual FY 2003 Performance: 102.7.

SSA met its goal. In FY 2003, SSA displayed record-breaking productivity of 2.35 cases per ALJ per day and processed almost 40,000 more requests for hearings than it did in FY 2002. The Agency accomplished this by focusing efforts on improvement and productivity.



FY 1999: 97 **FY 2000:** 94
FY 2001: 84 **FY 2002:** 95

Trend: The trend for this measure is very positive as productivity continues to increase for hearings cases.

Data Definition: This indicator represents the average number of hearings cases processed per “direct” workyear expended. A direct workyear represents actual time spent processing cases. It does not include time spent on training, travel, leave, holiday, etc.

Note: The FY 2003 target includes only SSA hearings, as is the case with actual data reported in FY 1999-2002. SSA’s plan is to transfer the Medicare hearings function to the Department of Health and Human Services starting with FY 2004. The FY 2003 target including Medicare hearings is 112.

Data Source: OHA Monthly Activity Reports, the Hearing Office Tracking system (HOTS), Payroll Analysis Recap Report, Time and Attendance Management Information System, OHA Bi-weekly Staffing Report, Training Reports, and Travel Formula.

7.5 — Percent of Commercial Positions Competed or Converted

FY 2003 Goal: 15%

Actual FY 2003 Performance: 0.4%

SSA did not meet its goal. To reach the 15 percent goal, SSA must compete all the functions identified in the Agency's competitive sourcing plan for 2002/2003. SSA's first competitive sourcing study from the 2002/2003 plan was completed in June 2003 and resulted in an in-house win for the Agency. Two full competition studies are currently in progress with completion expected in early 2004. As these studies are completed, SSA's percentage will significantly increase. SSA is planning for additional studies to begin in FY 2004, which are expected to take 12 to 18 months to complete after announcement. It is important to note that OMB has given SSA a "green" in Progress for Competitive Sourcing. OMB has recognized SSA's efforts to establish the necessary infrastructure to initiate competitive sourcing activities in the Agency.

Trend: Trend data is not available as this measure was adopted in FY 2003.

Data Definition: This performance measure represents the percentage of SSA's commercial activities competed with commercial sources or directly converted to contract by the end of each fiscal year.

Data Source: Total commercial positions: Year 2000 Federal Activities Inventory Reform (FAIR) Act inventory; Commercial positions competed per Competitive Sourcing Plan.

7.6 — Maintain Zero Outside Infiltrations of SSA's Programmatic Mainframes

FY 2003 Goal: 0 infiltrations

Actual FY 2003 Performance: 0 infiltrations

SSA met its goal. SSA has reviewed and implemented industry "best practices" where applicable and performed due diligence to ensure that information security is commensurate with the criticality and sensitivity of information processed and maintained. To this end, SSA employs its own internal "red" teams, the Intrusion Protection Team (IPT) and Agency-wide Security Response Team (SSASRT).

The IPT and SSASRT have routine contact with the Federal Computer Incident Response Center (FedCIRC) to exchange up-to-date information on threats and countermeasures. In FY 2003, the Agency continued to improve internal response to impending threats by having centralized management and reporting of the Agency's virus and threat management infrastructure. The Agency has also joined the Government-wide Patch Authentication and Distribution program sponsored by FedCIRC to further strengthen the effort to counter threats and apply patches in a timely manner. Several incidents in FY 2003 had major impact on various business organizations, but have not had any measurable impact on SSA due to the Agency's preparedness management and proactive approach to Enterprise IT Security.

1999-2002: 0

2003: 0 thru May

Trend: SSA has never had an outside infiltration of its programmatic mainframes.

Data Definition: SSA's mainframes store information critical to the completion of the Agency mission, including master files, such as enumeration, earnings and beneficiary/recipient payment files. The goal is to prevent any unauthorized access and/or alteration of critical data that would result in improper disclosure, incorrect information or lack of data availability. An infiltration is an unauthorized access that requires a cleanup or restoration of back-up files to a state prior to the infiltration. This would include an authorized user who obtains elevated privileges and performs unauthorized actions resulting in infiltration.

Data Source: Count of the times mainframes are infiltrated, obtained from Change Asset and Problem Reporting System.

7.7 — By 2005, Substantially Complete the most Significant Projects in the Social Security Unified Measurement System (SUMS) and Managerial Cost Accountability System (MCAS) Plan, and Complete the Plan by the end of 2008

FY 2003 Goal:

SUMS

1. Use of the SUMS Title XVI Posteligibility Operational Data Store (PEODS) and SUMS Work Measurement Data Warehouse (WMDW) as the sole source of Agency information for managing the redeterminations and limited issue workloads. Complete corrections to the cases in the data warehouse.
2. Complete the first stage of the national rollout of the Customer Service Record (CSR) through the Visitor Intake Process (VIP) system in SSA field offices. The Customer Service Query (CSQ) will contain an extract of data from eight databases and will be displayed in VIP.
3. Data contained in the Title II Integrated Workload Management System (IWMS) will be moved to the Title II Operational Data Store (ODS) and will be the basis for the new processing time reports and SUMS counts.
4. Data on Title XVI Initial Claims processing time from the SSI Claims Report (SSICR) will be moved to the WMW and accessed from the Common Front End to provide web-based processing time reports.

MCAS

5. Cost Analysis System (CAS) Renovation – OHA Work Counts: Release 7 of the CAS Renovation project under the umbrella MCAS project will substantially automate the manual processes currently used to compute basic workload count and work time by workload information for the Office of Hearings and Appeals and to enter that data to SSA's Cost Analysis System. This project will reduce the time and effort required to produce these data and will enhance the accuracy and integrity of SSA's managerial cost accounting processes.
6. Complete Vision and Scope Document for Time Allocation. This document will complete the user planning and analysis phase of the Time Allocation project and will provide the basis for development of detailed requirements and project plans for time allocation.

Actual FY 2003 Performance: SSA substantially completed the most significant projects in SUMS and MCAS

SSA met its goal.

1. PEODS has been implemented as the sole source of Agency information on managing redeterminations and limited issue workloads. Data warehouse corrections have been completed and accepted by Operations.
2. The CSQ, containing an extract of data from eight databases, is now displayed in VIP and is nationally available.
3. The software is in place to accomplish the move to the Title II ODS user acceptance was finalized October 24, 2003. The Title II counts will continue to be derived from MIICR while corrections to the SUMS counts are being made. Corrections to SUMS counts are expected to be completed by November 2003. The FY 2004 Title II counts will then be added to the Title II ODS and it will become the official source of Title II initial claims and appeals counts.

4. The SUMS Supplemental Security Income Processing Time application available through the SUMS/MCAS MI Central website has been in production since September 29, 2003 and is the official source of Title XVI processing time reports beginning FY 2004.
5. Release 7 of the CAS Renovation Project was completed in May 2003.
6. The planning document for worktime measurement and allocation efforts has been completed.

Trend: This is a milestone performance indicator and trend data is not applicable.

Data Definition: This is a milestone measure and data is defined by the milestone goals.

Data Source: SSA's Office of Finance Assessment and Management.

7.8 — Receive an Unqualified Opinion on SSA's Financial Statements from the Auditors

FY 2003 Goal: Receive an unqualified opinion

Actual FY 2003 Performance: Received an unqualified opinion

SSA met its goal. In accordance with the Chief Financial Officer's Act of 1990, SSA's financial statements were independently audited by PricewaterhouseCoopers LLP (PwC). An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. In their audit, PwC found that SSA's financial statements as contained in the FY 2003 Performance and Accountability Report were presented fairly in all material respects and were in conformity with accounting principles generally accepted in the United States of America.

Trend: SSA has received an unqualified opinion every year since 1994.

Data Definition: An unqualified opinion on the financial statements is provided when an independent auditor determines that the financial statements are presented fairly and, in all material respects, in conformity with accounting principles generally accepted in the United States.

Data Source: Auditors' report.

Strategic Goal C: To achieve sustainable Solvency and ensure Social Security programs meet the needs of current and future generations

Strategic Objective 8: Through education and research efforts, support reforms to ensure sustainable solvency and more responsive retirement and disability programs

The following is the one KPI for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators	See page for detailed discussion
8.1 Provide support to the Administration and Congress in developing legislative proposals to achieve sustainable solvency for Social Security and implementing reform legislation	See page 51

There is also one non-KPI performance measure for Strategic Objective 8:

8.2 — Percent of Adult Americans Knowledgeable about Social Security Programs and Related Issues, Including Long-range Financing

FY 2003 Goal: Develop a baseline

Actual FY 2003 performance: Developed baseline for measure

SSA met its goal. In FY 2003, a new Public Understanding Measurement System (PUMS) survey was conducted. This survey included additional questions about the public’s knowledge of long-range financing issues. Survey findings provided baseline data upon which future goals for this measure will be established and communications activities will be designed.

Trend: Baseline established in FY 2003. Trend data will be analyzed in future years.

Data Definition: This is the percent of Americans (adults age 18 and over) determined as “knowledgeable” in the Public Understanding Measurement System (PUMS) survey.

Data Source: Revised PUMS survey.

Strategic Goal D: To strategically manage and align staff to support SSA’s mission

Strategic Objective 9: Recruit, develop and retain a high-performing workforce

The following is the one KPI for this strategic objective. Below is the location of the text describing whether or not the goal has been met.

Key Performance Indicators	See page for detailed discussion
9.1 Percent improvement in the new hire retention rate	See page 53

There are also three non-KPI performance measures for Strategic Objective 9:

9.2 — Milestones in Developing New Performance Management Systems

FY 2003 Goal: Implement new Senior Executive Service system

Actual FY 2003 Performance: Implemented a new SES system

SSA met its goal. The five-tier Senior Executive Service (SES) performance management system was implemented on October 1, 2002.

Trend: The SES system was the first milestone. A performance management system for non-bargaining unit GS-15 employees will follow in FY 2004.

Data Definition: Implementation of a five-level appraisal system for performance for SES-level employees in FY 2003 and formulation of an enhanced assessment system for GS-15 level employees in FY 2004. Note: Development of new SES standards was completed in early FY 2003. Those standards are now fully incorporated in each individual SES performance plan.

Data Source: Office of Human Resources records.

9.3 — Number of Job Enrichment Opportunities (includes headquarters components and regional development programs)

FY 2003 Goal: 3% of workforce

Actual FY 2003 Performance: 4.2% of workforce

SSA met its goal. The Agency had 2,726 employees representing 4.2 percent of the workforce participating in a developmental or job enrichment experience. There were 222 employees participating in the formal national-level developmental programs, 195 employees engaged in component-level programs, and 274 employees active in regional-level programs. Additionally, 2,035 employees participated in a job enrichment experience.

Trend: Trend data is not available as this measure was adopted beginning in FY 2003.

Data Definition: Percent of the Agency workforce participating in one of the formal national development programs or experiences (formal career development training of 1 to 2 weeks), a component program, or a regional-level program.

Data Source: Office of Training records.

9.4 — Provide the Equivalent of 40 Hours of Training Annually to All Employees

FY 2003 Goal: Provide the equivalent of 40 hours of training per employee

Actual FY 2003 Performance: Provided an average of 68 hours of training per employee

SSA met its goal. SSA provides employees with career enhancement and individual growth opportunities through its OnLine University. Originally begun with a limit of 16 hours being available to employees, the initiative was expanded in January 2003 to allow employees to take up to 32 hours of training annually. Additionally, employees are provided a chance to improve their automation skills through eight generic lessons repeatedly broadcast over the Agency's Interactive Video Teletraining (IVT) network, up to 24 hours annually. SSA also provides 3 hours of technical transmittal and program training geared to specific employee audiences monthly, plus general training of 1 hour monthly on topics such as diversity, lifestyle planning, sexual harassment, stress management, etc. SSA's

Office of Training also offers training in a traditional classroom setting of 1 to 3 days for courses from its general training curriculum.

Trend: Trend data is not available as this measure was adopted beginning in FY 2003.

Data Definition: Success is defined as having demonstrated that SSA provided on average the equivalent of 40 hours training per employee annually through the many venues available, e.g., IVT, the OnLine university, traditional government-sponsored training courses, and/or training conferences and seminars.

Data Source: Office of Training records and the Human Resources Management Information System.

Program Assessment Rating Tool (PART) Measures

The PART is a diagnostic tool designed by OMB to examine different aspects of program performance to identify the strengths and weaknesses of a given federal program. The DI and SSI Aged programs were selected for the initial assessment period and the results were published in the FY 2004 President's budget. The same two programs were reevaluated in the summer of 2003 and the results will be published in the FY 2005 President's budget.

OMB's findings from the initial assessment of the DI and SSI Aged program are consistent with the areas SSA has identified that require attention:

DI Program

- Improve the disability claims process, in part, by investing in technology to eliminate the need to store, locate, and mail millions of paper files.
- Better connect DI beneficiaries with expanding employment opportunities for individuals with disabilities.
- Strengthen the link between the DI administrative budget and performance measures.

SSI Aged Program

- Address payment accuracy issues by aggressively pursuing strategies outlined in SSA's Corrective Action Plan, such as simplifying income reporting requirements.
- Strengthen the link between the SSI Aged administrative budget and performance measures.

SSA's Strategic Plan, Annual Performance Plan (APP), and budget request all address OMB's findings. In addition, the performance measures and targets below were provided by SSA and used by OMB and SSA to evaluate the effectiveness of the DI and SSI Aged programs. It should be noted that of the eight PART measures, six were also GPRA measures in the FY 2004 APP and Revised Final FY 2003 APP. For the joint PART/GPRA measures, see the pages listed below for a more detailed discussion.

PART Measures which are also GPRA Measures	See page for detailed discussion
Average processing time for initial disability claims (DI and SSI)	See page 34
Average processing time for hearings	See page 34
Disability Determination Services (DDS) cases processed per workyear (PPWY)	See page 49
Number of SSA hearings cases processed per workyear (PPWY)	See page 85
DDS net accuracy rate (allowances and denials combined)	See page 73
SSI overpayment and underpayment accuracy rate (preventable error)	See page 79

The following describes the two non-GPRA PART performance indicators are:

PART Measure – 1: Percent of SSI Aged Claims Processed by the Time the First Payment is Due or within 14 Days of the Effective Filing Date

FY 2003 Goal: 75%

Actual FY 2003 Performance: 83%

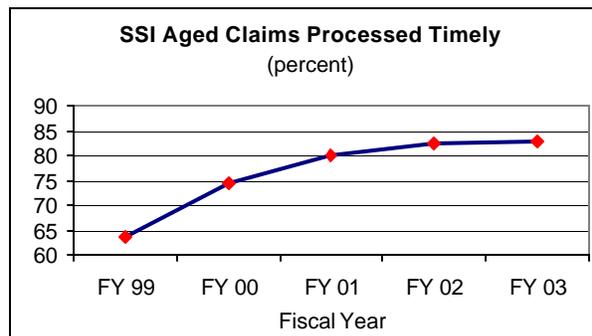
SSA met its goal. The goal was raised from 70 percent to 75 percent this year because SSA has demonstrated increased performance over the past years. SSA's performance reflects a national commitment to make timely and accurate payments to SSI Aged recipients.

FY 1999: 63.5%

FY 2000: 74.4%

FY 2001: 79.9%

FY 2002: 82.6%



Trend: SSA has steadily improved the timeliness of SSI Aged claims processing.

Data Definition: This rate reflects the number of SSI Aged applications completed through the SSA operational system (i.e., award or denial notices are triggered) before the first regular continuing payment is due or not more than 14 days from the effective filing date, if later, divided by the total number of SSI Aged applications processed. The first regular continuing payment due date is based on the first day of the month that all eligibility factors are met and payment is due. This definition came into effect beginning FY 2001.

Data Source: The SSI ODS System.

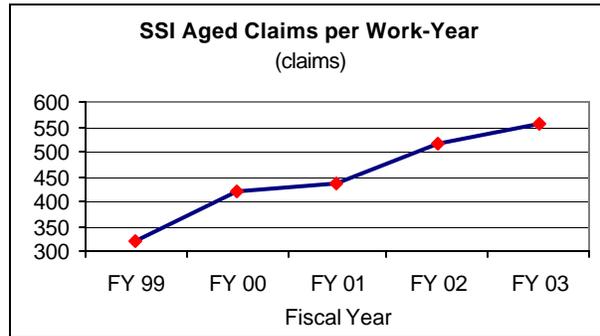
PART Measure - 2: SSI Aged Claims Processed per Workyear (PPWY)

FY 2003 Goal: 497

FY 2003 Performance Discussion: 556

SSA met its goal. SSA's performance indicates that sufficient resources were allocated to the processing of SSI Aged claims. SSA will continue to give this vulnerable population the best service possible.

FY 1999: 322	FY 2000: 421
FY 2001: 436	FY 2002: 515



Trend: PPWY for SSI Aged claims has improved every year.

Data Definition: The number of SSI Aged Claims processed per workyear (i.e., total SSI Aged claims processed divided by the total workyears expended by field offices on this workload). A workyear represents both direct and indirect time, including overhead (time spent on training, travel, leave, holidays, etc.).

Data Source: Agency Cost Accounting System.

FY 2002 Performance Indicators

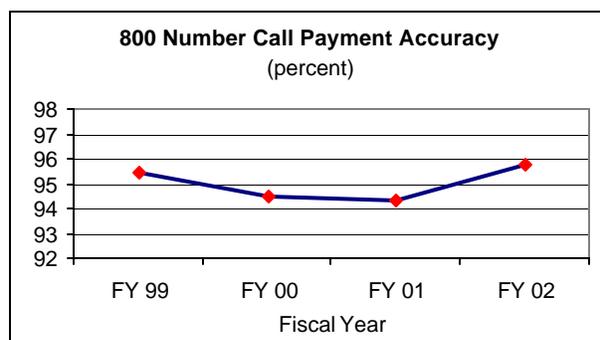
The following FY 2002 Performance Indicators are no longer external GPRA measures as of FY 2003. However, SSA will continue to monitor these measures internally. The FY 2002 final data for these measures was not available in time for publication of the FY 2002 PAR. Therefore, FY 2002 results are included in the FY 2003 PAR.

FY 2002 Performance Indicator: 800-number Call Payment Accuracy

FY 2002 Goal: 95%

Actual FY 2002 Performance: 95.8%

SSA met its FY 2002 goal. Overall accuracy improvements are due in large measure to the mandated use of the Customer Help and Information Program (CHIP), effective November 2001. This program, which is based on the Teleservice Center Operating Guide and provides access to online instructions, has helped guide agents to provide more accurate service. Errors in handling of potential claims leads and failure to develop living arrangements that may affect benefit payments were the major causes of payment accuracy errors. SSA is continuing improvements in employee training and mandated use of CHIP to further increase payment accuracy.



FY 1999: 95.4%	FY 2000: 94.5%
FY 2001: 94.3%	FY 2002: 95.8%

Trend: Call payment accuracy is expected to continue improving in future FYs.

Data Definition: Payment accuracy is a measure of whether 800-number representatives respond correctly to inquiries related to eligibility and payment of benefits. Note: Generally, there is about a one year lag before quality data are available due to the review and validation of study data input in the data base, allowing time for rebuttals of errors, obtaining universe counts, and running/validating report tables.

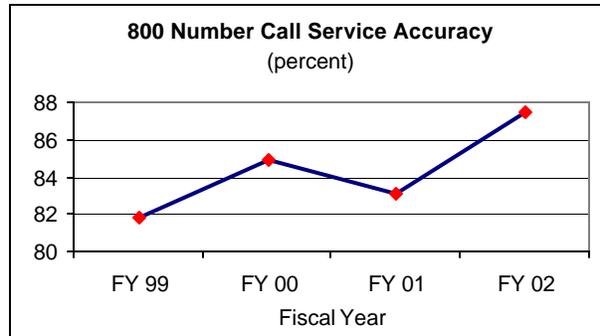
Data Source: 800-number Service Evaluation Findings.

FY 2002 Performance Indicator: 800-number Call Service Accuracy

FY 2002 Goal: 90%

Actual FY 2002 Performance: 87.5%

SSA did not meet its FY 2002 goal. Although the FY 2002 goal was not met; call service accuracy rose significantly over previous years and is expected to continue increasing towards the 90 percent goal in FY 2003. Significant improvements by agents in following access and disclosure procedures contributed to the increase in service accuracy. The most common service errors were related to training issues: following procedures for access/disclosure, interpreting record queries and correctly referring callers to other SSA offices. Overall accuracy improvements are due in large measure to the mandated use of CHIP, effective November 2001. As telephone agents make optimum use of CHIP and online instructions, accuracy rates are expected to increase.



FY 1999: 81.8%

FY 2000: 84.9%

FY 2001: 83.1%

FY 2002: 87.5%

Trend: Service accuracy significantly improved in FY 2002 over FY 2001. It is expected to continue improving in future years due to nationwide improvements in efficiency and call-handling procedures.

Data Definition: Service accuracy is a measure of whether 800-number representatives respond correctly to inquiries related to issues other than payment eligibility. Service errors include major service delivery failures that do not have a reasonable potential to improperly affect payment of eligibility. Note: Generally, there is about a one year lag before quality data are available due to the review and validation of study data input in the data base, allowing time for rebuttals of errors, obtaining universe counts and running/validating report tables.

Data Source: 800 number Service Evaluation Findings.

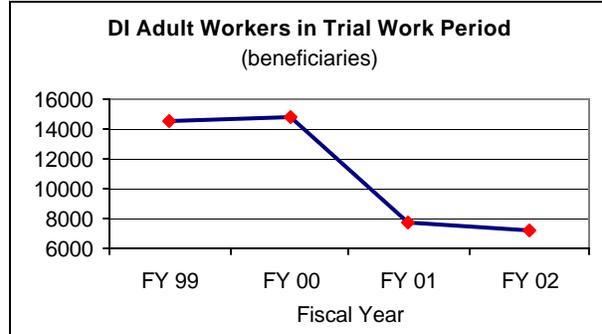
FY 2002 Performance Indicator: Increase in the Number of DI Adult Worker Beneficiaries who began a Trial-Work-Period

Note: This is the last year this measure will be reported. In future years, the new measure, "Increase in the Number of DI & SSI beneficiaries who work," will be used.

FY 2002 Goal: 5% (8,099)

Actual FY 2002 Performance: 7,162

SSA did not meet its FY 2002 goal. The number of DI adult worker beneficiaries who started work after being allowed benefits and began to accrue Trial-Work-Period (TWP) months declined in FY 2002 for the second year in a row. People with disabilities often experience difficulties in obtaining jobs and often need the support of employment services to find acceptable work. The Ticket-to-Work program was designed to provide such support, but it did not begin rollout until February 2002. The benefits of the Ticket program may not show up in TWP starts until it is fully implemented nationally.



FY 1999: 14,525 (baseline)

FY 2000: 1.8% (14,789)

FY 2001: -52.2% (7, 713)

Trend: The number of DI beneficiaries who began a Trial-Work-Periods decreased from FY 2001 to FY 2002.

Data Definition: For FY 2000, this indicator represented the annual percentage increase in the number of DI adult worker beneficiaries who begin a Trial-Work-Period during CY 2000, as compared to the base year 1997, where there were 16,000 TWP starts. SSA's CY 2000 goal was for a 10 percent increase over the base year performance. Effective FY 2001, this indicator represents the annual percentage increase over the prior CY actual level of 14,789, equivalent to 15,528 TWP starts. SSA's CY 2002 goal is a 5 percent increase over CY 2001 actual performance.

Data Source: Master Beneficiary Record

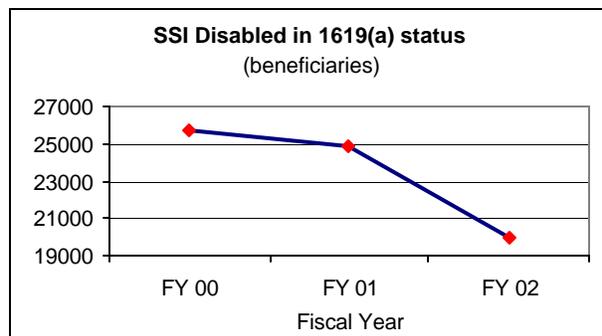
FY 2002 Performance Indicator: Increase in the Number of SSI Disabled Beneficiaries, Aged 18-64, Participating in 1619(a) Status

Note: This is the last year this measure will be reported, because the Agency does not believe this goal adequately measures the effect of return to work efforts. In future years, the new measure, "Increase in the Number of DI & SSI beneficiaries who work" will be used.

FY 2002 Goal: 5% (26,057)

Actual FY 2002 Performance: 19,956.

SSA did not meet its FY 2002 goal. While the Ticket-to-Work program should eventually have a significant impact on return-to-work among SSI recipients, it may take several years to see the full impact. Many of the policy changes and new structures are still in development phases. In FY 2002, SSA was only in the early stages of the rollout of the Ticket-to-Work



Program, which began in February 2002.

FY 1999: Not Available

FY 2000: 25,772

FY 2001: 24,816

Trend: The number of SSI disabled beneficiaries participating in 1619(a) status has declined each year from 2000 through 2002.

Data Definition: Effective 2001, SSA's goal is a 5 percent annual increase over the prior year's performance in the number of SSI disabled beneficiaries aged 18-64 who are participating in 1619 (a), i.e., working at the Substantial Gainful Activity level, but still receiving benefits (for FY 2001, the equivalent of 27,061). SSA's FY 2002 goal is a 5 percent increase over FY 2001, the equivalent of 28,414.

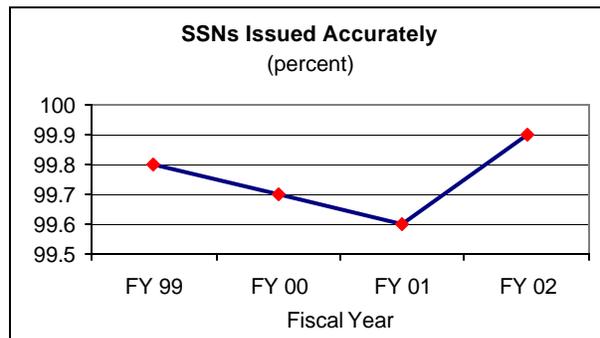
Data Source: SSI Disabled Recipients Who Work Report.

FY 2002 Performance Indicator: Percent of SSNs Issued Accurately

FY 2002 Goal: 99.8%

Actual FY 2002 Performance: 99.9%

SSA met its FY 2002 goal. SSA made statistically significant improvement in the accuracy of the issuance of SSNs, from 99.6 percent in FY 2001 to 99.9 percent in FY 2002. In FY 2001 the Agency implemented a training initiative targeting areas in which critical errors had occurred. In addition, during FY 2002 SSA implemented a number of procedural changes to resolve issues identified by an internal Enumeration Response Team, including verifying documents presented as proof of birth, citizenship status and identity. Continued focus in this area is having positive results.



FY 1999: 99.8%

FY 2000: 99.7%

FY 2001: 99.6%

Trend: Performance for this measure has improved from FY 2001 to FY 2002. We expect to maintain this high level of accuracy.

Data Definition: The percent of SSNs issued accurately is based on an annual review of a sample of approximately 2,000 SSN applications to verify that the applicant has not been issued an SSN that belongs to someone else, or that multiple SSNs assigned to the same applicant have been cross-referred. The data excludes SSNs assigned via the Enumeration-at-Birth process and major errors identified by the Office of Quality Assurance that do not result in an SSN card being issued erroneously. This measure was replaced in FY 2003 with "Percent of SSNs issued that are free of critical error" which has a different data definition. See page 82 for the FY 2003 measure.

Data Source: Enumeration Process Quality Review Report.