

AGENCY PERFORMANCE

INTRODUCTION

Despite overall agency resource constraints and increased workloads in FY 2008, we met 18 of our 20 performance measure targets for which we had end-of-year data. Although we will not have data on six performance measures until FY 2009, at the end of FY 2008, we were on track to meet the targets for these performance measures. We were able to meet our targets because of our dedicated staff, innovative technology initiatives, streamlined procedures, and increased productivity. In FY 2008, we focused our attention and resources on nine strategic objectives that support our four overarching strategic goals to accomplish our mission. We developed 26 performance measures and related targets to track our progress in meeting our goals and objectives. We explained these goals, objectives, measures, and targets in our *Annual Performance Plan for Fiscal Year 2009 and Revised Final Plan for Fiscal Year 2008*. This section of the *Performance and Accountability Report* documents our performance and provides detailed discussions of the actions that enabled us to attain our goals for FY 2008.

The performance data presented in this section comply with the Office of Management and Budget's guidance provided in Circulars A-11 and A-136. The *Data Quality* discussion in the *Overview of our FY 2008 Goals and Results* section (page 22) describes our continuing efforts to enhance the quality and timeliness of our performance data to increase its value to agency management and other interested parties. Our executives routinely use these performance data to improve the quality of program management and to demonstrate accountability in achieving program results.

STATUS OF FY 2008 PERFORMANCE MEASURES BY GOAL AND OBJECTIVE

We list our FY 2008 performance measures in this section and have organized them by strategic goal and objective. Each performance measure listed includes the FY 2008 goal, actual performance, discussion about the measure and target, data definition, and data source. We also include historical data and trend charts for the past 4 years when available. In measures where final FY 2008 data are not yet available, we indicate when they will be available and that we will report our FY 2008 performance in the *Fiscal Year 2009 Performance and Accountability Report*. In addition, we provide data for performance measures discussed in our *Fiscal Year 2007 Performance and Accountability Report* where final FY 2007 data were not available when published, and we report FY 2008 results or provide the status on each Program Assessment Rating Tool measure (pages 71-75). Last in this section we discuss our program evaluations (pages 76-85).

Strategic Goal 1: To deliver high-quality, citizen-centered service
Strategic Objective 1.1: Make the right decision in the disability process as early as possible

1.1a – Percent of initial disability claims receipts processed by the Disability Determination Services up to the budgeted level

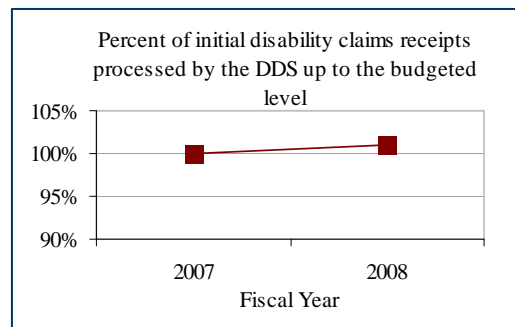
FY 2008 Goal: 100% (of receipts up to the budgeted level= 2,582,000)
 Performance: 101%* (2,607,282)
 Goal Achieved: Yes

Discussion: Our disability-related workload consumes over half of our operational workyears and is arguably the most complex component of our programs. In FY 2008, we made significant progress in streamlining and improving our disability process to provide more timely and accurate service. For example, for almost all disability claims, we no longer assemble and mail paper folders. By completing the rollout of electronic folders in each step of the disability process, we have eliminated the cumbersome process of printing, filing, and archiving paper folders. We now collect critical case data earlier in the claims process, which allows us to receipt cases and request medical evidence more quickly. We also propagate, validate, and share data electronically throughout all stages of the disability process.

In addition to the electronic disability process, we implemented an initiative that expedites the disability decision. The Quick Disability Determination process accelerates cases where there is a high probability the individual will be approved. In FY 2008, we implemented the Quick Disability Determination process in each of the 54 state and territorial Disability Determination Services, processing more than 44,000 such cases in an average of 8 days. We also prepared for another initiative – Compassionate Allowances – and implemented the first of three phases in October 2008. This initiative will allow for the quick identification of individuals who are clearly disabled by the nature of their disease or condition. In many of these cases, we will allow benefits as soon as the diagnosis is confirmed. Since these initiatives are new territory for us, we do not know the eventual mix of Quick Disability Determination and Compassionate Allowance cases. However, we expect we will be able to ultimately fast-track 6 to 9 percent of our initial disability applications which will benefit nearly 250,000 individuals each year. (Refer to *Agency Priorities as We Move Forward*, page 26, for more information on the Quick Disability Determination process and Compassionate Allowances.)

Trend: This was a new measure for FY 2007.

Fiscal Year	Goal	Performance	Goal Achieved?
2007	100%	100%*	↑
2008	100%	101%*	↑



Data Definition: In the Disability Determination Services, the number of Social Security and Supplemental Security Income initial disability claims receipts processed, including disabled dependents, compared to the number of initial disability claims received in a fiscal year up to the budgeted level.

Data Source: National Disability Determination Services System and the Disability Operational Data Store.

Remarks:

* The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

1.1b – Minimize average processing time for initial disability claims to provide timely decisions*

FY 2008 Goal: 107 days
 Performance: 106 days**
 Goal Achieved: Yes

Discussion: The timely processing of initial disability claims is a critical aspect of our service delivery to the public. With the implementation of the electronic disability process and increased employee familiarity with the electronic system, we made considerable progress over the past several years in reducing the time it takes to process initial disability claims. To achieve this high level of performance, we continued to improve the disability claims process in both the field offices and the state and territorial Disability Determination Services, including such initiatives as Quick Disability Determinations and updating the *Listings of Impairments* as discussed in the *Agency Priorities as We Move Forward*, page 27. These improvements help us curtail costly and time-consuming development, which in turn enables us to make disability determinations in a more timely fashion.

Trend: This was a new measure for FY 2008.

Fiscal Year	Goal	Performance	Goal Achieved?
2008	107 days	106 days**	↑

Data Definition: This is the fiscal year average processing time for Social Security and Supplemental Security Income disability claims combined. Processing time is measured from the application date (or protective filing date, if applicable) to either the date of the denial notice or the date the system completes processing an award. This includes “revised time,” “transit time,” and “field office, Disability Determination Services, and Disability Quality Branch times,” as well as protective filing times for awarded and medically denied claims.

Note: In FY 2008, only claims that require a medical determination are included in the computation. In prior years, the computation also included claims that were technically denied (e.g., the individual was not insured for benefits). Disability claims that are technically denied at the field office, or claims sent to the Disability Determination Services that are subsequently returned to the field office to be technically denied, are not included in the count. Technical denials are relatively quick decisions and including them unrealistically lowered average processing times. This change provides us with a more accurate count of how long it takes an individual to receive a decision on a disability claim that requires a medical determination. Excluding these technical denials increases average processing time by approximately 20 days. Also excluded are disability claims processed by the Disability Processing Branches in the Program Service Centers and disability claims processed by the Office of Central Operations, the Office of Medical and Vocational Expertise, and the Disability Determination Services in Guam and the U.S. Virgin Islands.

Data Source: Social Security Unified Measurement System.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

1.1c – Disability Determination Services (DDS) net accuracy rate for combined initial disability allowances and denials*

FY 2007 Goal: 97%
 Performance: 97%** ***
 Goal Achieved: Yes

FY 2008 Goal: 97%
 Performance: Data available January 2009**
 Goal Achieved: To Be Determined (TBD)

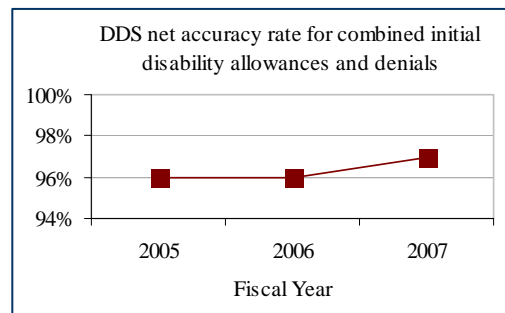
Discussion: We devote substantial resources to improving the accuracy of the initial state Disability Determination Services decisions. The rules and instructions for administering the disability process are very complex, requiring years of experience before a disability examiner becomes fully proficient at evaluating claims. Innovative and electronic enhancements have improved our ability to continue providing accurate and timely disability determinations.

In FY 2008, we began a new process called *Request for Program Consultation* as part of our efforts to improve disability decisional consistency and accuracy. Through this process, we resolve programmatic disagreements between state Disability Determination Services disability examiners and federal quality reviewers on complex policy issues. In cases where there is a substantive disagreement, inter-component panels of staff experts examine the issue and reach consensus. This process allows us to identify issues where training is needed or where policies may not be clear. Once issues are resolved, we post outcomes to an electronic repository that employees can access for future reference. We also implemented the *Enhanced Program Operations Manual System*, a web-based application designed to assist Disability Determination Services employees in obtaining up-to-date policy and procedural information.

In addition, we conducted ongoing quality reviews by randomly selecting both Social Security and Supplemental Security Income disability claims and checking them for consistency and quality. We met the accuracy target for FY 2007 and are on track to meet the FY 2008 target.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	97%	96%***	↓
2006	97%	96%***	↓
2007	97%	97%***	↑
2008	97%	Available January 2009	TBD



Data Definition: Net accuracy is the percentage of correct initial State disability determinations and is based on the net error rate (i.e., 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, divided by the number of cases reviewed.

Note: Deficient cases corrected after the 90-day period are still counted as a deficiency.

Data Source: Disability Quality Assurance Databases.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The performance data shown for FY 2007 was not available at the time we published the *Fiscal Year 2007 Performance and Accountability Report*. Therefore we are reporting the results in the *Fiscal Year 2008 Performance and Accountability Report*. Actual data for FY 2008 will not be available until January 2009, and we will report it in the *Fiscal Year 2009 Performance and Accountability Report*.

*** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

1.1d – Achieve the budgeted goal for SSA hearings processed (at or above the FY 2008 goal)

FY 2008 Goal: 559,000

Performance: 575,380

Goal Achieved: Yes

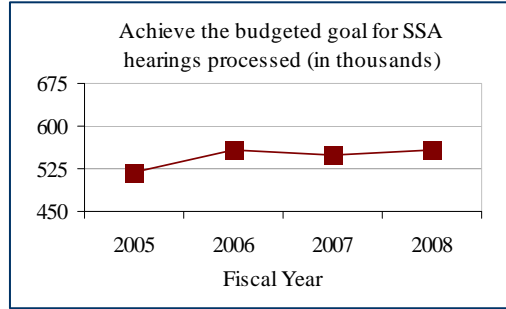
Discussion: Since the issuance of our plan to eliminate the hearings backlog, we have taken an aggressive approach to implementing numerous initiatives focused on improving hearing office procedures, increasing adjudicatory capacity, and increasing efficiency with automation and improved business processes. In FY 2008, although challenged by receipts above projected levels and the loss of administrative law judges through attrition, we met this goal by processing over 16,000 more hearings requests than projected. We continued to improve our hearing level efficiency by:

- Hiring 190 new administrative law judges;
- Increasing use of video hearings to minimize travel to hearing sites for individuals, their representatives, and administrative law judges;
- Operating a fully electronic National Hearing Center to provide flexibility in addressing our backlog and targeting assistance to heavily backlogged areas across the country;
- Creating a centralized administrative law judge staff to conduct video hearings for offices with the largest backlog of work;
- Authorizing attorney adjudicators to review cases early in the hearings process and issue favorable decisions when appropriate;
- Establishing individual annual expectations for administrative law judges, asking each judge to issue 500 to 700 hearing decisions each year;
- Rolling out a centralized printing and mailing process for all hearing level notices;
- Implementing the *Findings Integrated Template*, a decision-writing tool that offers a detailed decisional outline for a wide variety of claims; and
- Developing numerous enhancements to hearing office electronic processing systems.

Refer to *Agency Priorities as We Move Forward*, pages 24-26, for more information about improving hearing office procedures and reducing the hearings backlog. In addition, our *Plan to Reduce the Hearings Backlog and Improve Public Service at the Social Security Administration* is available at <http://www.ssa.gov/hearingsbacklog.pdf>, and the *Plan to Eliminate the Hearing Backlog and Prevent Its Recurrence Semiannual Report for Fiscal Year 2008* is located at http://www.ssa.gov/appeals/Backlog_Reports/Semiannual_Report%20FY%2008b.pdf.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	525,000	519,359	↓
2006	560,000	558,978	↓
2007	555,000	547,951	↓
2008	559,000	575,380	↑



Data Definition: SSA hearings processed by the Office of Disability Adjudication and Review.

Note: The *Annual Performance Plan for Fiscal Year 2009 and Revised Final Performance Plan for Fiscal Year 2008* did not specify that SSA hearings processed included Appeals Council remands. We will include clarifying language to the *Revised Final Performance Plan for Fiscal Year 2009*.

Data Source: Case Processing and Management System.

1.1e – Maintain the number of SSA hearings pending (at or below the FY 2008 goal)

FY 2008 Goal: 752,000
 Performance: 760,813
 Goal Achieved: No

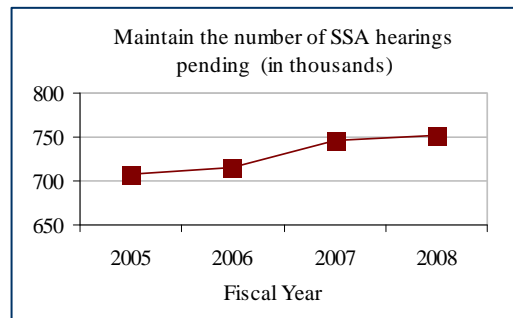
Discussion: In FY 2008, we received more hearing requests than ever (589,449) and exceeded our projected receipts by more than 26,000 requests. In addition to receiving more hearing requests than expected, other factors, such as attrition of administrative law judges and reduced productivity resulting from the training and mentoring of 190 new administrative law judges, affected our ability to keep up with the pace of new hearing requests. Furthermore, our first priority was to concentrate on processing our large number of aged pending cases. These cases require a significantly greater amount of time to develop, analyze, and process than cases that have been pending for shorter periods because of the amount of time that has elapsed between the date the individual filed for benefits and the date of hearing. In FY 2008, we expended substantial resources to process the most aged cases before the close of the fiscal year by focusing on 135,160 hearings that would be pending 900 days or more by the end of the fiscal year. Our efforts resulted in the successful processing of 99.8 percent of these aged cases.

In FY 2008, we also implemented new initiatives, such as allowing attorney adjudicators to issue fully favorable decisions and realigning our hearing office service areas, increasing our abilities to process more hearings. These initiatives, along with others we introduced in FY 2007, such as streamlining the folder assembly process for pending paper cases to expedite case preparation for hearing, as well as remanding cases to the state Disability Determination Services to re-open cases and issue fully favorable determinations where appropriate, enabled us to further increase our hearing dispositions.

Refer to 1.1d – *Achieve the budgeted goal for SSA hearings processed*, as well as *Agency Priorities as We Move Forward*, pages 24-26, for more information about how we addressed this performance measure.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	714,000	708,164	↑
2006	756,000	715,568	↑
2007	738,000	746,744	↓
2008	752,000	760,813	↓



Data Definition: SSA hearings pending in the Office of Disability Adjudication and Review.

Note: The data definition was stated incorrectly in the *Annual Performance Plan for Fiscal Year 2009 and Revised Final Performance Plan for Fiscal Year 2008* as “SSA hearings processed by the Office of Disability Adjudication and Review.” We will correct this in the *Annual Performance Plan for Fiscal Year 2010 and Revised Final Performance Plan for Fiscal Year 2009*.

Data Source: Case Processing and Management System.

1.1f – Achieve target percentage of hearing level cases pending over 365 days*

FY 2008 Goal: 56%

Performance: 37%

Goal Achieved: Yes

Discussion: Eliminating the hearings backlog and preventing its recurrence is our highest priority. In addition, we were very committed to processing our aged hearings cases (pending 900 days or more) in FY 2008, discussed in 1.1e – *Maintain the number of SSA hearings pending* and 1.1g – *Achieve target percentage of hearing level cases pending 900 days or more*, while at the same time, reducing cases pending over 365 days to prevent additional cases from becoming backlogged and aged. Our FY 2008 budget allowed us to hire additional administrative law judges and hearing office support staff to process more hearings and focus on cases pending over 365 days. We continued to build on successful strategies (as described in measures 1.1d – *Achieve the budgeted goal for SSA hearings processed*, and 1.1e) that contributed to reducing the percentage of cases pending over 365 days to 37 percent at the end of FY 2008 as compared to our target level of 56 percent.

Refer to *Agency Priorities as We Move Forward*, pages 24-26, for more information about our initiatives for eliminating the hearings backlog and reducing aged cases.

Trend: This was a new measure for FY 2008.

<u>Fiscal Year</u>	<u>Goal</u>	<u>Performance</u>	<u>Goal Achieved?</u>
2008	56%	37%	↑

Data Definition: Measured from the date of request for hearing, this represents the number of cases that have been pending for more than 365 days as a percentage of the total number of cases pending at the hearing level. Included in the pending caseload would be remands as well as postentitlement actions. Remands are measured from the remand order date. A remand is an order by either the Appeals Council or a Federal Court returning a claim to a previous level decision-maker for further action. Cases may be remanded for various reasons including: new evidence submitted with an appeal; a change in regulations; an error of law by the previous decision-maker; or an abuse of discretion.

Data Source: Case Processing and Management System and Disability Adjudication Reporting Tools.

Remarks:

* This is a Program Assessment Rating Tool measure.

1.1g – Achieve target percentage of hearing level cases pending 900 days or more

FY 2008 Goal: Less than 1% of universe of over 900 day cases pending

Performance: 0.2%

Goal Achieved: Yes

Discussion: We redefined our aged case goal for FY 2008 to cases that would be 900 or more days old by the end of the year and began the year with 135,160 cases that met the criteria. Through continuing emphasis and monitoring, as of September 30, 2008, we reduced the number of hearing cases pending 900 or more days to 281 or 0.2 percent, thereby meeting our target.

This performance measure links to performance measures 1.1e – *Maintain the number of SSA hearings pending* and 1.1f – *Achieve target percentage of hearing level cases pending over 365 days*. Refer to the *Discussion* section of these performance measures for additional information.

Trend: This was a new measure for FY 2008.

Fiscal Year	Goal	Performance	Goal Achieved?
2008	<1%	0.2%	↑

Data Definition: Cases pending over 900 days or more include all cases which are, or will be, pending over 900 days during FY 2008, measured from request for hearing date or date of remand (whichever is later), except those cases that fall within an exception, such as prison cases.

Data Source: Case Processing and Management System.

1.1h – Achieve the budgeted goal for average processing time for hearings*

FY 2008 Goal: 535 days

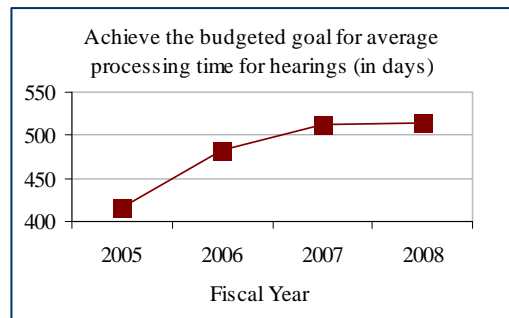
Performance: 514 days

Goal Achieved: Yes

Discussion: We recognized that our efforts to process our oldest cases would likely inflate overall hearings average processing time. To compensate for this, we modified our FY 2008 hearings average processing time goal to 535 days – 11 more days than our FY 2007 goal. However, as a result of our hearings reduction initiatives and our constant monitoring, average processing time did not increase in FY 2008 as projected and ultimately was 21 fewer days than our targeted goal.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	442 days	415 days **	↑
2006	467 days	483 days	↓
2007	524 days	512 days	↑
2008	535 days	514 days	↑



Data Definition: The average elapsed time, from the hearing request date until the date of disposition, for cases at the hearing level (disability and non-disability cases) processed during all months of the fiscal year. Remands are measured from remand order date.

Data Source: Case Processing and Management System.

Remarks:

* This is a Program Assessment Rating Tool measure.

** FY 2005 included Medicare hearings. Beginning in FY 2006, Medicare hearings were no longer included as the Centers for Medicare and Medicaid Services assumed this workload.

1.1i – Achieve the budgeted goal for average processing time for requests for review (appeals of hearing decisions)

FY 2008 Goal: 242 days

Performance: 238 days

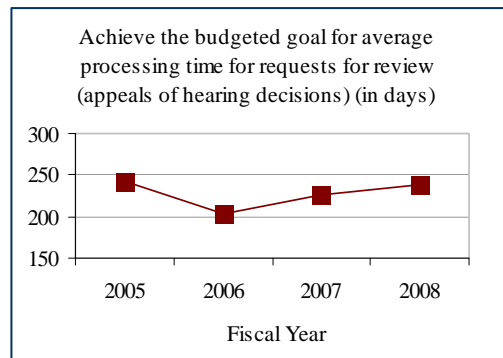
Goal Achieved: Yes

Discussion: As with hearings, in FY 2008 we focused on eliminating the oldest cases at the Appeals Council. Older cases negatively affect processing time since they are often more complex and take longer to process, but there is a positive trade-off in service to those who have been waiting the longest for a decision.

We were able to reach our target level by balancing workloads and identifying and clearing incoming cases ready for immediate processing. In addition, we developed and implemented the *Appeals Review Processing System*, which allows the Appeals Council to process electronic folder cases. We completed training staff and managers on this new system in February 2008. Major benefits of the new system include agency-wide access to the Appeals Council case control system and the ability of the Appeals Council to work in a fully electronic environment. This process change should maximize productivity and timeliness of Appeals Council decisions. Anticipating future increased workloads, the Appeals Council is concentrating on significantly reducing pending aged cases. As a result of these initiatives, the overall processing time was higher this fiscal year than last. However, by balancing workloads and triaging cases ready for immediate processing, the average processing time remained below the targeted level.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	250 days	242 days	↑
2006	242 days	203 days	↑
2007	242 days	227 days	↑
2008	242 days	238 days	↑



Data Definition: The 12-month average processing time for decisions on appeals of hearings. Monthly processing time is calculated as an average over the course of the fiscal year.

Processing time begins with the date of the request and ends when the date the disposition is entered into the *Appeals Council Automated Processing System*, which is the date the decision is date stamped, released, and mailed.

Data Source: *Appeals Review Processing System*. Prior to March 2008, the data source was the *Appeals Council Automated Processing System*.

1.1j – Decrease the number of pending requests for review (appeals of hearing decisions) over 365 days

FY 2008 Goal: 28%

Performance: 22%

Goal Achieved: Yes

Discussion: We have focused on eliminating the older cases at all levels of adjudication, including the Appeals Council level. As pointed out in measure 1.1i – *Achieve the budgeted goal for average processing time for requests for review*, older cases negatively affect processing time since they are often more complex and take longer to process. A slight decrease in appeals receipts between FYs 2007 and 2008, along with the conversion to the *Appeals Review Processing System*, helped us to reduce the number of requests for review pending over 365 days at the end of FY 2008 to 22 percent compared to our target level of 28 percent.

Trend: This was a new measure for 2008.

Fiscal Year Goal Performance Goal Achieved?

2008	28%	22%	↑
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Data Definition: The indicator is calculated by dividing the total number of aged requests for review by the total number of pending requests for review. Aged requests for review are those cases where more than 365 days have elapsed since the date of the request for review.

Data Source: *Appeals Review Processing System*. Prior to March 2008, the data source was the *Appeals Council Automated Processing System*.

Strategic Objective 1.2: Increase employment for people with disabilities by expanding opportunities

1.2a – Number of Disability Insurance and Supplemental Security Income beneficiaries, with Tickets in use, who work*

FY 2007 Goal: 44,611 (80% over calendar year 2004 baseline)

Performance: 59,443**

Goal Achieved: Yes

FY 2008 Goal: Establish a new baseline from which to measure future performance

Performance: On schedule**

Goal Achieved: To Be Determined

Discussion: Through the *Ticket to Work* program, individuals who receive disability benefits receive a voucher or ticket they can take to an Employment Network or State Vocational Rehabilitation agency that provides support services to help disabled individuals obtain and keep a job. For those months where cash benefits stop because of work or earnings, Employment Networks or State Vocational Rehabilitation agencies receive a payment based on a percentage of savings to the agency.

A critical element of our overall strategic objective to increase employment for individuals with disabilities by expanding opportunities is to educate employers and the public about our work incentives, employment support programs, and the benefits of the *Ticket to Work* program. One method of providing information to individuals receiving disability benefits is the Work Incentive Seminar Events hosted by our community-based *Work Incentives*

Planning and Assistance Programs. These outreach events bring together disabled individuals, our Area Work Incentive Coordinators, employment providers, and other public and private partners in local communities. We are also conducting general outreach and presenting information on our employment support programs at national and state conferences that bring together individuals receiving disability benefits, our *Work Incentives Planning and Assistance Programs*, our internal Area Work Incentive Coordinators, and other federal and state Employment Network partners. From April through August 2008, 952 people attended 61 Work Incentive Seminar Events in 25 states in which 207 Employment Networks participated. We also conducted 43 outreach and recruitment events through July 2008 and have planned 43 additional Work Incentive Seminar Events through November 2008. So far, these outreach and recruitment events have had close to 9,500 attendees at the live events and 2,429 at the teleconferences.

In July 2008, we implemented significant changes to our rules to improve the *Ticket to Work* program that will improve the effectiveness of the *Ticket to Work* program in assisting individuals with disabilities who want to become more economically self-sufficient through employment. We are undertaking a major recruitment effort to increase the number of organizations functioning as Employment Networks. The changes also are expected to result in significant increases in the number of individuals receiving disability benefits who use their Ticket and return to work. In order to evaluate these significant improvements, we are establishing a new baseline for the *Ticket to Work* program using calendar year 2008 data reported from the Internal Revenue Service. Because these data are reported in the summer of each year for the previous calendar year, data for calendar year 2008 will be available in July 2009 at which time we will establish the new baseline.

Refer to *Agency Priorities as We Move Forward*, page 27, for more information about our return to work initiatives and the *Ticket to Work* program.

Trend: This was a new measure for 2008.

Data Definition: Count the number of Disability Insurance, Supplemental Security Income, and concurrent beneficiaries who have used their Ticket to sign up with an Employment Network (EN) or State Vocational Rehabilitation (VR) agency and who have recorded earnings in the *Disability Control File* in any month of the calendar year. The data are provided on a calendar year basis and reported in June of the following year. Performance measure language has been changed from “assigned” to “in use” to be consistent with this data definition. Beginning with FY 2008, under new regulations, Tickets will be counted as “in use” when they are being used with an EN or State VR agency, whereas under the pre-FY 2008 system they were counted when assigned.

Data Source: The “*Verify Update Earnings Screen’s Work and Earnings Reports*” data field in the Disability Control File.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The data are provided on a calendar year basis and are available in July of the following year. Therefore, we are reporting FY 2007 performance data in the *Fiscal Year 2008 Performance and Accountability Report*. We will report actual data for FY 2008 in the *Fiscal Year 2009 Performance and Accountability Report*.

1.2b – Number of quarters of work earned by Disability Insurance and Supplemental Security Income disabled beneficiaries during the calendar year

FY 2008 Goal: Establish a new baseline from which to measure future performance

Performance: On Schedule*

Goal Achieved: To Be Determined

Discussion: Under the *Ticket to Work* program, quarters of work represent significant work and earnings milestones for disabled individuals in their effort to achieve self-sufficiency.

As pointed out in 1.2a – *Number of Disability Insurance and Supplemental Security Income beneficiaries, with Tickets in use, who work*, the changes made to the *Ticket to Work* program in 2008 are expected to result in significant increases in the number of individuals receiving disability benefits who use their Ticket and return to work. In order to evaluate these significant improvements, we are establishing a new baseline for the *Ticket to Work* program using calendar year 2008 data reported from the Internal Revenue Service. Because these data are reported in the summer of each year for the previous calendar year, data for calendar year 2008 will be available in July 2009 at which time we will establish the new baseline.

Refer to *Agency Priorities as We Move Forward*, page 27, for more information about our return-to-work initiatives and the *Ticket to Work* program.

Trend: This was a new measure for 2008.

Data Definition: Measures overall effectiveness of all work incentive programs and reflects results of Return-to-work education and outreach activities and improvements to the Ticket and other work incentive programs. It also reflects work by beneficiaries with disabilities at increasingly significant levels over a significant period of time. A "quarter" is earned for each \$1,050 earned in a year, up to a limit of four quarters in any calendar year. The value of a "quarter" will be tied to the threshold for any worker to earn a Social Security quarter of coverage in a given calendar year and will index year-to-year with the quarter of coverage.

Data Source: *Master Earnings File.*

Remarks:

* The data are provided on a calendar year basis and are available in July of the following year. Therefore, we will report actual data for FY 2008 in the *Fiscal Year 2009 Performance and Accountability Report*.

Strategic Objective 1.3: Improve service through technology, focusing on accuracy, security, and efficiency

1.3a – Percent of Retirement and Survivors Insurance claims receipts processed up to the budgeted level*

FY 2008 Goal: 100% (of receipts up to the budgeted level = 4,065,000)

Performance: 101% (4,236,455)

Goal Achieved: Yes

Discussion: As the number of individuals receiving retirement and survivors benefits continues to increase, we make every effort to use the benefits that technology can bring to managing and expediting the processing of applications. Nearly 80 million baby boomers will be filing for retirement over the next 20 years – an average of 10,000 per day. Innovative changes that focus on technology and simplified policy are vital to our ability to continue the level of service that we have provided over our 70-year history. In FY 2008, we finalized our *Ready Retirement* application that simplifies online filing for individuals applying for retirement benefits. A key

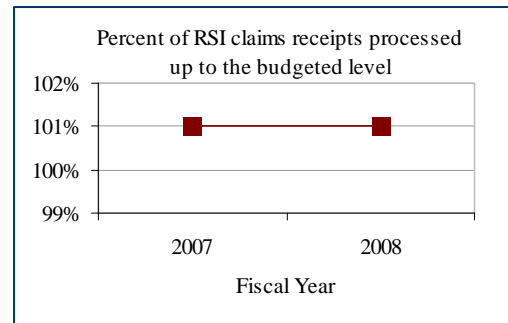
aspect of this effort is the simplification of policy. In FY 2008, we eliminated the need for most individuals to submit a birth certificate at the time they file for benefits, and we eliminated the need to obtain documentation of any marriages that are not material to any entitlement. We also worked on a host of other potential policy changes that will streamline and simplify filing for retirement benefits and assist us in handling increasing workloads. Additionally in FY 2008, we released our enhanced and secure online tool, the *Retirement Estimator*, which individuals can use to obtain highly accurate monthly retirement benefit estimates based on their actual earnings. We discuss both of these initiatives in *Agency Priorities as We Move Forward* on pages 28-29.

To increase the use of electronic service options, we will continue to market our online services to the public at both the national and local levels. In FY 2008, we saw an 82 percent increase over FY 2007 in the number of retirement applications filed online. We believe a large part of this increase is due to the automation, policy, and marketing initiatives highlighted in this discussion section.

Academy award winning actress, Patty Duke, has generously agreed to be Social Security’s spokeswoman to help encourage members of the baby boomer generation to file online for their retirement benefits. We will feature her in public service announcements early next year to promote our new, improved online *Ready Retirement* application.

Trend: This was a new measure in 2007.

<u>Fiscal Year</u>	<u>Goal</u>	<u>Performance</u>	<u>Goal Achieved?</u>
2007	100%	101%**	↑
2008	100%	101%**	↑



Data Definition: In the regional offices, field offices, teleservice centers, program service centers, and the Office of Central Operations, the number of initial claims for retirement, survivors, and Medicare processed compared to the number of initial claims for retirement, survivors, and Medicare received in a fiscal year up to the budgeted level. This includes Totalization claims.

Data Source: Social Security Unified Measurement System Operational Data Store.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

1.3b – Improve service to the public by optimizing the speed in answering 800 number calls

FY 2008 Goal: 330 seconds

Performance: 326 seconds

Goal Achieved: Yes

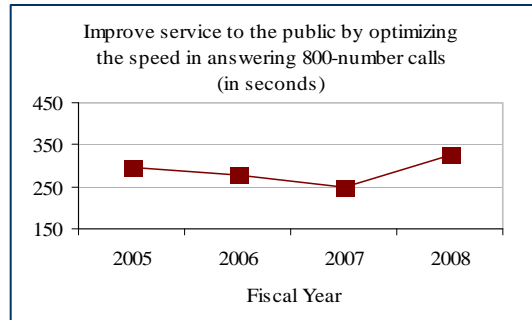
Discussion: Our National 800 Number call volume has increased annually, exceeding 57 million calls in FY 2008, and we expect this number to grow to 61 million by 2010. How quickly we can answer these calls is affected by a variety of factors, including the number of available agents, the average handle-time per call, and the wait tolerance of callers to remain on hold. Despite achieving our FY 2008 goal, the average speed of answering National 800 Number calls increased 30 percent from FY 2007.

To increase our capacity to handle these large call volumes, we are using a variety of technologies. For example, we use *Screen Splash*, a system that collects information from callers before talking to an agent. This helps reduce the length of a call thereby enabling agents to handle more calls. We also introduced *Scheduled Voice Callback* in FY 2008. This system offers National 800 Number callers, who have been on hold for more than 3 minutes, the

option to hang up without losing their place in queue. When the caller selects this option, we record the callers' names and telephone numbers and the system calls them back when their turn in queue is reached.

Trend:

<u>Fiscal Year</u>	<u>Goal</u>	<u>Performance</u>	<u>Goal Achieved?</u>
2005	330 seconds	296 seconds	↑
2006	330 seconds	278 seconds	↑
2007	330 seconds	250 seconds	↑
2008	330 seconds	326 seconds	↑



Data Definition: The answer wait time of all calls divided by the number of all calls answered by agents. Wait time begins from the time the call is placed in queue and ends when an agent answers. Calls that go straight to an agent without waiting in the queue have a zero wait time, but are included in the average speed of answer calculation. Average speed of answer does not include callers who hang up after being in queue. A lower average speed of answer and busy rate are indicators of better customer service.

Data Source: Report generated by Cisco router software.

1.3c – Improve service to the public by optimizing the 800 number busy rate for calls offered to Agents

FY 2008 Goal: 10%

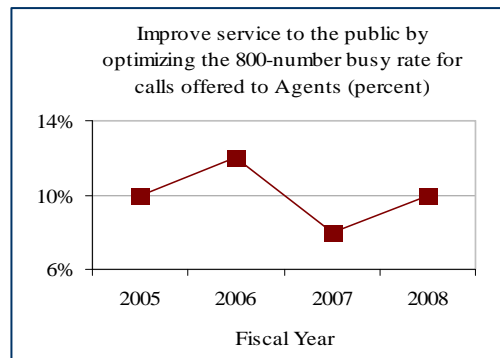
Performance: 10%*

Goal Achieved: Yes

Discussion: To reduce the National 800 Number busy rates, we must reduce the number of calls routed to agents. To accomplish this, we are using technologies to efficiently handle calls without the need for agent involvement. We continue to enhance our use of *Speech Recognition Technology*. This feature enables callers to speak their request into an interactive voice prompt system, thereby reducing the time callers spend navigating through menu prompts and error prone touch-tone commands. Callers can use *Speech Recognition Technology* to process an array of actions, including changes of address, benefit verification requests, and Medicare card replacements, without the assistance of an agent. We also released an enhanced *Customer Help and Information Program* to assist telephone agents by providing instant access to facts, policies, and reference material, thereby minimizing average handle-time per call and reducing busy rates.

Trend:

<u>Fiscal Year</u>	<u>Goal</u>	<u>Performance</u>	<u>Goal Achieved?</u>
2005	10%	10%*	↑
2006	10%	12%*	↓
2007	10%	8%*	↑
2008	10%	10%*	↑



Data Definition: Number of busy messages divided by number of calls offered to agents (displayed as a percentage). A busy message is the voice message a caller receives when no agent is available to answer the call

because the queue has reached its maximum capacity of waiting calls. When this happens, the person is asked to call back later. A lower busy rate and average speed of answer are indicators of better customer service.

Data Source: Report generated by Cisco router software.

Remarks:

* The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

1.3d – Percent of individuals who do business with SSA rating the overall service as "excellent," "very good," or "good" *

FY 2008 Goal: 83%
 Performance: 81%
 Goal Achieved: No

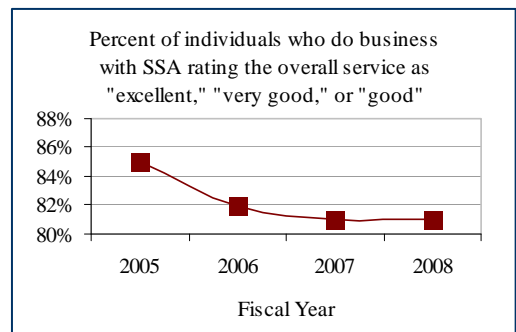
Discussion: We conduct several surveys during the fiscal year to evaluate various aspects of our service. The performance measure is based on the combined result of annual service satisfaction surveys of National 800 Number callers, field office callers, and office visitors, including both field office and hearings office visitors. The combined results of the surveys produce the overall service satisfaction score. We carefully monitor the public’s perception of the quality of service we provide. The results of these surveys allow us to identify the specific aspects of service where improvement would have the greatest impact on overall satisfaction.

We have not met this goal for the past 3 years. Our staffing level in 2007 was the lowest since 1972 and our workloads continue to increase in volume and complexity. Without additional staff, our primary strategy is to improve service through technology and simplification of our programs. We continue to improve use of technology in our business processes. For example, we have refined the speech recognition system on our National 800 Number to improve telephone access and better assist callers with their business. As a result, we can complete more calls. We are also enhancing our online services so individuals will have a simplified, user-friendly, and secure environment. We are continually identifying opportunities for expanding and refining those services to reach a larger segment of the public. Expanding the use of electronic services for more routine transactions will enable our staff to handle more complex services.

We have devoted significant resources to ensure our web services rank among the best in government. The *American Customer Satisfaction Index (ACSI) e-Government Satisfaction Index* is widely used in both the federal and private sectors to measure public satisfaction with features of websites. For the quarter ending September 30, 2008, our *Retirement Estimator* topped all federal web sites with a score of 90. This is the second highest score ever achieved by a federal web site. The *Application for Help with Medicare Prescription Drug Costs* scored 88 to finish second and our *Internet Social Security Benefits Application* placed third with a score of 87. Our aggregate score (82.5 for six surveys) was the second highest among all federal agencies running multiple surveys; the federal average score was 78.2.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	83%	85%	↑
2006	83%	82%	↓
2007	83%	81%	↓
2008	83%	81%	↓



Data Definition: Percent of respondents who rate overall service as “good,” “very good,” or “excellent” on a 6-point scale ranging from “excellent” to “very poor” divided by the total number of respondents to that question.

Data Source: SSA's annual surveys of 800-number callers, field office callers, and field office and hearings office visitors**

Remarks:

* This is a Program Assessment Rating Tool measure.

** The 800-Number caller survey is based on contacts sampled from all 800-Number sites through March; the field office caller survey is based on contacts sampled from randomly selected field offices throughout April; the field office and hearings office visitors survey is based on contacts sampled from randomly selected offices over an eight-week period from July through September.

Strategic Goal 2: To protect the integrity of Social Security programs through superior stewardship
Strategic Objective 2.1: Detect and prevent fraudulent and improper payments and improve debt management

2.1a – Process Supplemental Security Income (SSI) non-disability redeterminations to reduce improper payments

FY 2008 Goal: 1,200,000

Performance: 1,220,664

Goal Achieved: Yes

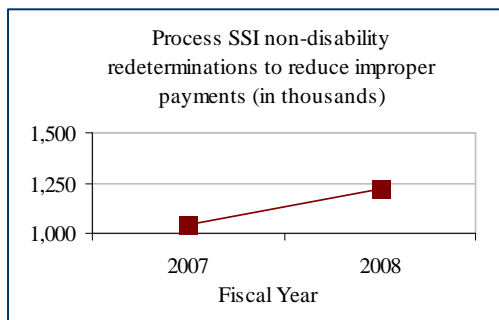
Discussion: We have had to reduce some of our stewardship activities in order to devote our resources to our critical core workloads. However, based on FY 2008 funding, we were able to increase slightly the number of redeterminations conducted to more than we completed in FY 2007, and we met our goal. The redetermination process is an important stewardship activity. We conduct these periodic reviews of non-disability factors, such as income and resources, to ensure that individuals remain eligible for Supplemental Security Income and are receiving the amount that they are due. Redeterminations result in both overpayments being collected or prevented and underpayments being paid or prevented. Overall, we save approximately \$10 for every \$1 spent in processing redeterminations.

We are simplifying the Supplemental Security Income redetermination process for both the public and our employees who handle these cases. In FY 2008, we expanded our use of *Access to Financial Information*. This process automates access to financial institution data. We expect the process to significantly reduce incorrect Supplemental Security Income payments caused by excess resources in financial accounts. We also expanded an automated telephone-based monthly wage-reporting system for individuals who are at risk of incurring wage-related overpayments. Recent improvements will allow more individuals to pass the first and last name authentication test. We expect that these improvements will significantly increase the potential universe of individuals who will use this method of reporting wages. The automated telephone system provides a National means of fully automating Supplemental Security Income wage reporting. We also created a Supplemental Security Income Monthly Wage Reporting website, which contains helpful hints on making wage reporting faster and easier.

Refer to page 177 in the *Financial Section* for more information about our efforts to curb Supplemental Security Income improper payments.

Trend: This was a new measure in 2007.

<u>Fiscal Year</u>	<u>Goal</u>	<u>Performance</u>	<u>Goal Achieved?</u>
2007	1,026,000	1,038,948	↑
2008	1,200,000	1,220,664	↑



Data Definition: All non-disability eligibility redeterminations of Supplemental Security Income beneficiaries that are processed to completion resulting from diary actions (scheduled), those initiated as a result of events reported by beneficiaries (unscheduled), and targeted redeterminations.

Data Source: *Redetermination Service Delivery Objective Report, Limited Issue Service Delivery Objective Report, and Post-eligibility Operational Data Store.*

2.1b – Number of periodic continuing disability reviews processed to determine continuing entitlement based on disability to help ensure payment accuracy

FY 2008 Goal: 1,065,000*

Performance: 1,091,303

Goal Achieved: Yes

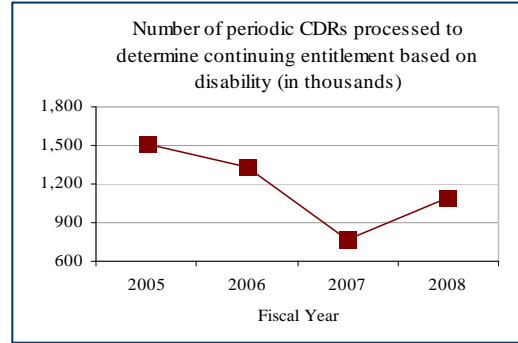
Discussion: We conduct continuing disability reviews to determine whether individuals receiving disability benefits continue to be entitled to benefits based on their medical condition. These reviews protect the integrity of the disability programs. Continuing disability reviews are cost effective, saving \$10 for every \$1 spent in conducting these reviews. Overall agency resource constraints in FY 2007 required adjusting our program integrity workloads so we could focus on maintaining service levels. However, based on additional FY 2008 funding, we were able to increase the number of continuing disability reviews we conducted to 1,091,303 and exceeded our goal.

We strive to perform continuing disability reviews as efficiently as possible. To do this, we continue to refine the continuing disability review mailer/statistical scoring model to screen cases and identify those in which a full medical review would not be cost-effective. After these cases are screened out, we refer the remaining cases for a full medical review.

We will also continue to enhance another statistical scoring tool – the *Diary Model* – to accurately assign dates when we should select individual disability cases for review based on the medical condition and expectation of medical improvement. Over time, the *Diary Model* will save us millions of dollars because valuable resources will not be needed to review cases where there is no reasonable expectation of medical improvement. In addition, we use another statistical scoring model – the *CDR Profiling Model* – developed to identify whether the review may be processed with a limited amount of contact or if it requires a more costly medical review. We conduct large-scale sampling of continuing disability reviews to maintain the integrity of the process and ensure that we have sufficient data to assess the process and adjust our models.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	1,384,000	1,515,477	↑
2006	1,242,000	1,337,638	↑
2007	729,000	764,852	↑
2008	1,065,000*	1,091,303*	↑



Data Definition: Count includes periodic reviews and other continuing disability reviews (CDR) processed by the Disability Determination Services and through mailers not requiring medical reviews.

Data Source: *Disability Operational Data Store* and the *continuing disability review tracking files*.

Remarks:

*The FY 2008 goal of 1,065,000 includes 235,000 medical continuing disability reviews and 830,000 continuing disability review mailers not requiring medical review. The FY 2008 performance includes 245,388 medical continuing disability reviews and 845,915 continuing disability review mailers not requiring medical review. Not all information in the *Disability Operational Data Store* is archived or maintained for audit purposes.

2.1c – Percent of Supplemental Security Income payments free of overpayment and underpayment error*

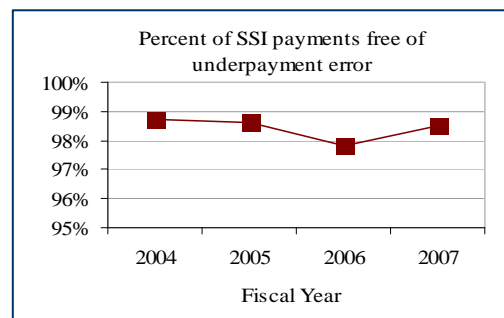
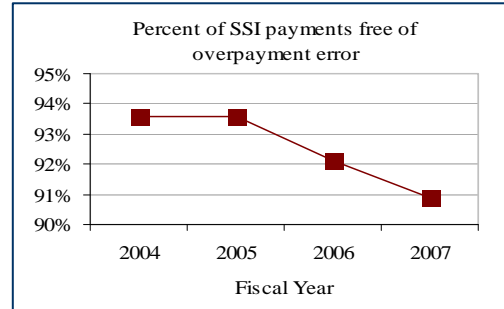
FY 2007 Goal:	Overpayment accuracy:	95.7%
	Underpayment accuracy:	98.8%
Performance:	Overpayment accuracy:	90.9%** ***
	Underpayment accuracy:	98.5%** ***
Goal Achieved:	Overpayment accuracy:	No
	Underpayment accuracy:	No
FY 2008 Goal:	Overpayment accuracy:	96%
	Underpayment accuracy:	98.8%
Performance:	Overpayment accuracy:	Data available July 2009**
	Underpayment accuracy:	Data available July 2009**
Goal Achieved:	Overpayment accuracy:	To Be Determined
	Underpayment accuracy:	To Be Determined

Discussion: We have had to make difficult decisions about where to use limited agency resources in order to best serve the public. Consequently, we have reduced some of our stewardship activities. A large part of this performance measure is addressed through the Supplemental Security Income redetermination process discussed in 2.1a- *Process Supplemental Security Income non-disability determinations to reduce improper payments*. We base initial Supplemental Security Income payments on projections, such as future earnings, that must later be verified. Although we met our FY 2008 redetermination goal, the total number of redeterminations we processed was less than ideal. If we continue to process fewer redeterminations than desired, due to the correlation between the frequency of redeterminations and payments free of error, we project that it will be very difficult to meet our future Supplemental Security Income accuracy goals.

In addition to ongoing quality reviews and efforts to streamline and simplify pertinent policies and procedures, we will continue identifying new strategies to improve the overpayment and underpayment accuracy rate. For more information, refer to performance measure 2.1a as well as the *Improper Payments Information Act of 2002 Detailed Report* on page 171.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2004	O/P: 95.4%	93.6% ***	↓
	U/P: 98.8%	98.7% ***	↓
2005	O/P: 94.9%	93.6% ***	↓
	U/P: 98.8%	98.6% ***	↓
2006	O/P: 95.4%	92.1% ***	↓
	U/P: 98.8%	97.8% ***	↓
2007	O/P: 95.7%	90.9% ***	↓
	U/P: 98.8%	98.5% ***	↓
2008	O/P: 96%	Available July 2009**	TBD
	U/P: 98.8%	Available July 2009**	TBD



Data Definition: The Supplemental Security Income payment accuracy rate free of overpayment and underpayment error is determined by an annual review of a statistically valid sample of the beneficiary rolls. Stewardship review findings, such as accuracy rates, are *estimates* based on the results of random samples. These estimates are expressed in terms of the degree of confidence that the estimate is somewhere between two values and the measure of precision provides information about the size of the interval. For example, in FY 2005, SSI precision at the 95% confidence level ranged from 92.7% to 94.5% for overpayments and from 98.3% to 98.9% for underpayments. Separate rates are determined for overpayment error dollars and underpayment error dollars. The accuracy rates are computed by dividing the error dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100% to determine the accuracy rate. The current measuring system captures the accuracy rate of the non-medical aspects of eligibility for SSI payment outlays.

Note: The confidence level for each fiscal year is determined when the review is completed. In FY 2007, Supplemental Security Income precision at the 95-percent confidence level ranged from 89 percent to 92.8 percent for overpayments and from 98.1 percent to 98.9 percent for underpayments.

Data Source: *Supplemental Security Income Stewardship Report.*

Note: The Supplemental Security Income Stewardship Report is based on a monthly sample selection of individuals who received Supplemental Security Income in the sample period. The individual and/or representative payee is interviewed, collateral contacts are made as deemed necessary, and all non-medical factors of eligibility are redeveloped for the sample period and retroactive months, if applicable. The stewardship data are reported on a fiscal year basis and the data provides an overall accuracy measurement of the payments to all recipients currently on the Supplemental Security Income rolls.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The performance data shown for FY 2007 was not available at the time we published the *Fiscal Year 2007 Performance and Accountability Report*, therefore we are reporting the results in the *Fiscal Year 2008 Performance and Accountability Report*. Actual data for FY 2008 will not be available until July 2009, and we will report it in the *Fiscal Year 2009 Performance and Accountability Report*.

*** The actual number is rounded to the nearest tenth using the standard rounding convention of rounding up numbers that are .05 or higher and rounding down those .04 or less.

2.1d – Percent of Old-Age, Survivors and Disability Insurance payments free of overpayment and underpayment error*

FY 2007 Goal:	Overpayment accuracy:	99.8%
	Underpayment accuracy:	99.8%
Performance:	Overpayment accuracy:	99.8%** ***
	Underpayment accuracy:	99.9%** ***
Goal Achieved:	Overpayment accuracy:	Yes
	Underpayment accuracy:	Yes
FY 2008 Goal:	Overpayment accuracy:	99.8%
	Underpayment accuracy:	99.8%
Performance:	Overpayment accuracy:	Data available July 2009**
	Underpayment accuracy:	Data available July 2009**
Goal Achieved:	Overpayment accuracy:	To Be Determined
	Underpayment accuracy:	To Be Determined

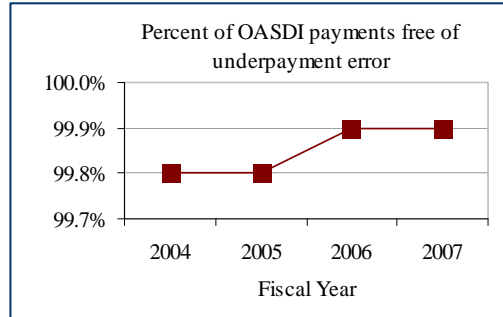
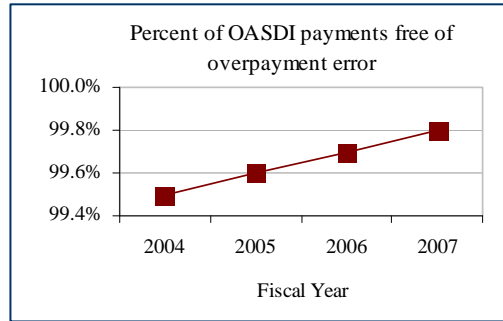
Discussion: We are a committed steward of the Social Security Trust Funds. We continue to implement initiatives with the potential to improve payment accuracy. Individuals receiving Old-Age, Survivors, and Disability Insurance benefits are more likely to be overpaid due to work activity not reported timely, computation errors in reporting additional earnings, and unreported relationships (e.g., marriages, children, students). They are likely to be underpaid because of computation errors in reporting additional earnings, incorrect age/date of birth in our records, workers' compensation not reported timely, and incorrectly posted wages/self-employment income. To address these overpayment and underpayment issues, in FY 2008, we augmented our electronic processes by:

- Automating system capabilities that further prevent, identify, and correct computation errors; and
- Contracting with additional states to implement *Electronic Death Registration*. This electronic process allows state vital statistics agencies to verify Social Security Numbers and process this and related workloads electronically. Death registration is traditionally done manually by the states. The electronic process is faster, which means the death is posted to our records more quickly, reducing the chances the individual will be paid improperly.

In addition to ongoing quality reviews and efforts to streamline and simplify pertinent policies and procedures, we will continue identifying new strategies to improve the overpayment and underpayment accuracy rate. Refer to the discussions in 2.1b- *Number of periodic continuing disability reviews processed to determine continuing entitlement based on disability to help ensure payment accuracy* and 2.1c- *Percent of Supplemental Security Income payments free of overpayment and underpayment error*; the *Improper Payments Information Act of 2002 Detailed Report* on page 171 for more information on our efforts to reduce improper payments.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2004	O/P: 99.8%	99.5% ***	↓
	U/P: 99.8%	99.8% ***	↑
2005	O/P: 99.8%	99.6% ***	↓
	U/P: 99.8%	99.8% ***	↑
2006	O/P: 99.8%	99.7% ***	↓
	U/P: 99.8%	99.9% ***	↑
2007	O/P: 99.8%	99.8% ***	↑
	U/P: 99.8%	99.9% ***	↑
2008	O/P: 99.8%	Available July 2009**	TBD
	U/P: 99.8%	Available July 2009**	TBD



Data Definition: The Old-Age, Survivors, and Disability Insurance (OASDI) payment accuracy rate free of overpayment and underpayment error is determined by an annual review of a statistically valid sample of the beneficiary rolls. Stewardship review findings, such as accuracy rates, are *estimates* based on the results of random samples. These estimates are expressed in terms of the degree of confidence that the estimate is somewhere between two values and the measure of precision provides information about the size of the interval. For example, in FY 2005, overall OASDI precision at the 95% confidence level ranged from 99.25% to 99.86% for overpayments and from 99.65% to 99.98% for underpayments. Separate rates are determined for overpayment error dollars and underpayment error dollars. The accuracy rates are computed by dividing error dollars by the total dollars paid for the fiscal year. The percentage is subtracted from 100% to attain the accuracy rate.

Note: The confidence level for each fiscal year is determined when the review is completed. In FY 2007, the Old-Age, Survivors, and Disability Insurance precision at the 95-percent confidence level ranges from 99.68 percent to 99.94 percent for overpayments and 99.75 percent to 99.99 percent for underpayments.

Data Source: *Old-Age, Survivors and Disability Insurance Stewardship Report*

Note: The basis of the Retirement and Survivors Disability Insurance payment accuracy (Stewardship) report is a monthly randomly selected sample of cases from Retirement and Survivors Disability Insurance payment rolls of beneficiaries in current pay status. The cases are reviewed for non-medical factors of eligibility, and for each case, the individual or representative payee is interviewed (75 percent by phone and 25 percent by home visit), collateral contacts are made, as needed, and all factors of eligibility are redeveloped for the current sample month.

Remarks:

* This is a Program Assessment Rating Tool measure.

** The performance data shown for FY 2007 was not available at the time we published the *Fiscal Year 2007 Performance and Accountability Report*, therefore we are reporting the results in the *Fiscal Year 2008 Performance and Accountability Report*. Actual data for FY 2008 will not be available until July 2009 and we will report it in the *Fiscal Year 2009 Performance and Accountability Report*.

*** The actual number is rounded to the nearest tenth using the standard rounding convention of rounding up numbers that are .05 or higher and rounding down those .04 or less.

Strategic Objective 2.2: Strengthen the integrity of the Social Security Number (SSN) issuance process to help prevent misuse and fraud of the SSN and card

2.2a – Percent of original Social Security Numbers issued that are free of critical error

FY 2007 Goal: 98%
 Performance: 100%* **
 Goal Achieved: Yes

FY 2008 Goal: 95%
 Performance: Data available March 2009*
 Goal Achieved: To Be Determined

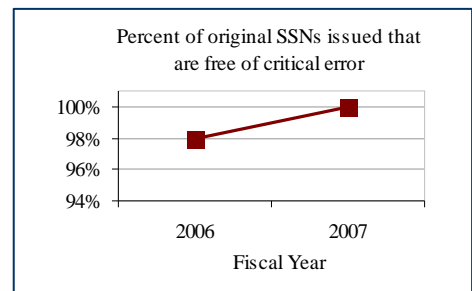
Discussion: We use the Social Security Number to track the earnings records of individuals to determine benefits they and their families may be due. Although our purpose for assigning a number and issuing a card has not changed, over time the Social Security Number has become a primary means of identification in both the public and private sectors. As the use of the Social Security Number has grown, so has identity theft and Social Security Number misuse. To prevent misuse, we must ensure that we assign Social Security Numbers and issue cards correctly.

Each year, we strengthen current processes and implement new methods to safeguard the assignment of Social Security Numbers and the issuance of cards. For instance, we now display fraud indicators on queries and Social Security Number verifications to further deter Social Security Number fraud and misuse. We also modified the Enumeration-at-Birth process to prevent the issuance of duplicate Social Security Numbers to newborns and to restrict the assignment of Social Security Numbers to unnamed children. We continue to refine the process we use to verify with the Department of Homeland Security and Department of State all immigration documents for non-citizens applying for an original or replacement Social Security card. Additionally, under the Enumeration-at-Entry program, we collaborated with the Department of State to identify additional non-citizen groups that could apply for a Social Security Number as part of the entry process into the U.S.

Refer to *Agency Priorities as We Move Forward* on page 30 for more information on other Social Security Number-related initiatives.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2006	98%	98%**	↑
2007	98%	100%**	↑
2008	95%	Available March 2009	TBD*



Data Definition: The rate is based on an annual review of applications for original Social Security Number (SSN) cards 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 – U.S. Citizenship and Immigration Services document for foreign born and birth certificate for U.S. born, and made a correct judgment of entitlement to an SSN. SSNs issued through the Enumeration-at-Birth and Enumeration-at-Entry processes are included in the review, as well as field office processed SS-5 transactions for original SSNs.

Note: In the *Annual Performance Plan for Fiscal Year 2008 and Revised Final Plan for Fiscal Year 2007*, the *Data Definition* was incorrectly stated. The *Data Definition* has been corrected above to include Social Security Numbers issued via Enumeration-at-Birth and Enumeration-at-Entry.

Data Source: *Enumeration Process Quality Review*, which is based on a sample of approximately 1,500 SSN transactions that have resulted in the issuance of an original SSN.

Remarks:

* The performance data shown for FY 2007 was not available at the time we published the *Fiscal Year 2007 Performance and Accountability Report*. Therefore we are reporting the results in the *Fiscal Year 2008 Performance and Accountability Report*. Actual data for FY 2008 will not be available until March 2009 and we will report it in the *Fiscal Year 2009 Performance and Accountability Report*.

** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

2.2b – Percent of Social Security Number receipts processed up to the budgeted level

FY 2008 Goal: 96%* (of receipts up to the budgeted level = 18,804,959)

Performance: 96%** (18,114,400)

Goal Achieved: Yes

Discussion: We worked diligently to achieve this goal in FY 2008. As the threat of identity theft continues to become more widespread, stricter standards for acceptable identification and verification make this task more complex and time-consuming. Despite these challenges and nearly a 6 percent increase in projected receipts over FY 2007, we met this goal.

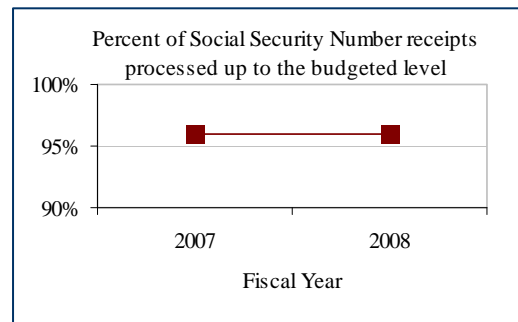
As we look for ways to keep pace with this growing workload, it is imperative that we work more efficiently and improve public convenience. We are undertaking an initiative called *Quick, Simple, and Safe SSNs* which is a strategy for automating the Social Security Number workload and reducing the number of manual error prone actions. Our plan focuses on improving service and maintaining integrity of the process. We have initiated a comprehensive analysis of enumeration processes to evaluate how these processes can be improved. For example, we will simplify existing field office processes, expand Enumeration-at-Entry, and develop online Social Security Number services.

In addition, to streamline the process of assigning Social Security Numbers and issuing Social Security cards, in FY 2008 we opened a Social Security Card Center in Orlando, FL and two Card Centers in Phoenix, AZ. Card Centers provide central locations for processing Social Security Number applications in specific geographical locations. They provide better public service by redirecting all Social Security Number-related business to a single facility with a highly trained, specialized staff.

Refer to *Agency Priorities as We Move Forward* on page 30 for more information on initiatives affecting our Social Security Number workload.

Trend: This was a new measure in 2007.

Fiscal Year	Goal	Performance	Goal Achieved?
2007	96%	97%**	↑
2008	96%	96%**	↑



Data Definition: In the regional offices, field offices, and the Office of Central Operations, the original and replacement Social Security Number (SSN) requests processed compared to the receipts in a fiscal year. This also includes Enumeration-at-Birth (EAB) activity, Enumeration-at-Entry (EAE) activity, and the count of fraud investigations not resulting in the issuance of an SSN, an EAB, or an EAE.

Data Source: *Social Security Unified Measurement System Enumeration Operational Data Store.*

Remarks:

* The budgeted level for FY 2008 was 19,000,000. We received 18,804,959 requests (less than the budgeted level). As such, 96 percent of the actual number received is 18,052,761. We processed 18,114,400 requests, thereby meeting this goal.

** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

Strategic Objective 2.3: Ensure the accuracy of earnings records so that eligible individuals can receive the proper benefits due them

2.3a – Issue annual SSA-initiated *Social Security Statements* to eligible individuals age 25 and older*

FY 2008 Goal: 100%
 Performance: 100%
 Goal Achieved: Yes

Discussion: The *Social Security Statement* is a concise, easy-to-read personal record of the earnings on which individuals paid Social Security taxes during their working years and a summary of the estimated benefits individuals and their families may receive as a result of those earnings. In FY 2008, we issued *Social Security Statements* to over 148.6 million individuals who were eligible to receive the *Statement*.

The *Social Security Statement* contains:

- An estimate of potential monthly Social Security retirement, disability, survivor, and auxiliary benefits and a description of benefits under Medicare;
- The amount of wages paid to an individual or income from self-employment; and
- The aggregate taxes paid toward Social Security and Medicare.

The objectives of the *Social Security Statement* are to:

- Help individuals to verify the information in their earnings record. We encourage individuals to review their earnings history for accuracy and completeness. This will avoid incorrect benefit payments in the future. This information includes instructions for individuals to report any earnings discrepancies as soon as possible;
- Educate the public about Social Security programs. The *Statement* contains information about the various benefits to which a worker may be entitled; and
- Assist in financial planning. The *Statement* provides individuals with information regarding potential retirement, disability, and survivor benefits. It also contains information about planning for retirement. By reviewing this information, individuals can see if they are on track to meet their retirement goals.

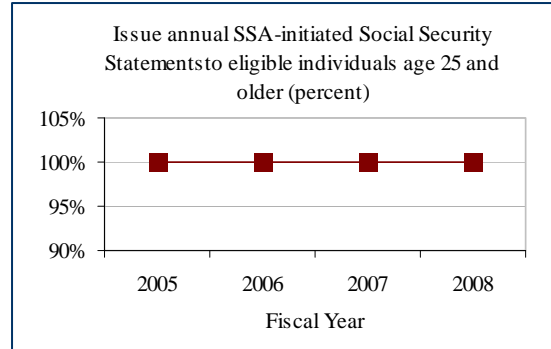
To ensure that the *Statement* is meeting its objectives and providing value to the public, we have an ongoing *Statement* evaluation plan that includes focus group testing and formal surveys. During FY 2008, we conducted a National survey of recent recipients of the *Statement* that is sent annually to approximately 150 million working

individuals to evaluate its effectiveness as a communications medium. The preliminary results of the survey are currently under review.

We are in the process of modifying existing systems to provide a central source of management information which will provide the number of earnings corrections that result from members of the public contacting us to report potential errors on their earnings records.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	100%	100%**	↑
2006	100%	100%**	↑
2007	100%	100%**	↑
2008	100%	100%	↑



Data Definition: As required by law, SSA issues annual *Social Security Statements* to all eligible individuals (Social Security Number holders age 25 and older who are not yet in benefit status and for whom a mailing address can be determined). The *Statement* contains information about Social Security benefit programs, financing facts, and provides personal benefit estimates. The *Statement* provides individuals the opportunity to review their earnings history and verify their earnings record for accuracy and completeness.

Data Source: *Executive and Management Information System.*

Remarks:

* This is a Program Assessment Rating Tool measure.

** The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

Strategic Objective 2.4: Manage Agency finances and assets to link resources effectively to performance outcomes

2.4a – Receive an unqualified opinion on SSA’s financial statements from the auditors

FY 2008 Goal: Receive an unqualified opinion

Performance: Received an unqualified opinion

Goal Achieved: Yes

Discussion: For the 15th successive year, we received an unqualified opinion on our financial statements. In accordance with the *Chief Financial Officers’ Act*, PricewaterhouseCoopers, LLP independently audited our financial statements. In its audit, PricewaterhouseCoopers, LLP found that we fairly presented our financial statements, as contained in this *Fiscal Year 2008 Performance and Accountability Report*, and in all material respects, in conformity with accounting principles generally accepted in the United States.

We take our stewardship responsibility of the Social Security programs very seriously and will continue to demonstrate an unyielding dedication to sound financial management practices. Refer to the *Auditor’s Reports* section, beginning on page 143, for more information on our financial statements audit.

Trend: We have received an unqualified audit opinion every year from FY 1994 – FY 2008.

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 of America.

Data Source: Auditors' work papers.

Note: The Office of the Inspector General has a contract with an outside auditing firm to audit our financial statements.

Strategic Goal 3: To achieve sustainable solvency and ensure Social Security programs meet the needs of current and future generations

Strategic Objective 3.1: Through education and research efforts, support reforms to ensure sustainable solvency and more responsive retirement and disability programs

3.1a – Provide support to the Administration and Congress in developing legislative proposals and implementing reforms to achieve sustainable solvency for Social Security

FY 2008 Goal: Conduct analysis for the Administration and Congress on key issues related to implementing Social Security reforms

Performance: Completed

Goal Achieved: Yes

Discussion: The policies that the Administration and Congress establish to maintain the solvency of the Old-Age, Survivors, and Disability Insurance Trust Funds are of great importance to our primary purpose of implementing the Social Security programs.

To assist the Administration and Congress in making informed decisions on major policy issues, we provide policymakers with the information they need to understand the broad impact and effects of potential reform proposals. We provide analysis and research on policy initiatives and produce briefing materials for Congressional hearings to inform policymakers about the scope, impact, and dynamics of reform on the Old-Age, Survivors, and Disability programs. We continue to use retirement modeling as one of our most important tools for evaluating the effects of Social Security reform proposals, e.g., *Modeling Income in the Near Term*. We use this program to look at the baby boom retirees and compare them to previous retirees economically and demographically and look at the economic status of baby boomers under reform proposals compared to current law. We also produce more than a dozen periodic reports that provide detailed statistical data on program size and trends.

We also partner with the Retirement Research Consortium by providing funding through cooperative agreements with three multidisciplinary research centers. These centers are located at Boston College, the University of Michigan, and the National Bureau of Economic Research. Additionally, we fund numerous projects to conduct research, develop research data, and disseminate information on retirement and Social Security related social policy.

Trend: We met this goal every year from FY 2003 - FY 2008 by conducting analyses related to Social Security reform.

Data Definition: Completed reports and analysis of present law provisions, as well as proposed and pending legislation and other proposals relating to solvency of the system.

Data Source: Office of Policy records (consists primarily of various micro simulation models, e.g., *Modeling Income in the Near Term*, *Financial Eligibility Model*, *Social Security and Accounts Simulator*, and surveys, e.g., *Survey of Income and Program Participation*, *Health and Retirement Study*).

Strategic Goal 4: To strategically manage and align staff to support the mission of the Agency

Strategic Objective 4.1: Recruit, develop and retain a high-performing workforce

4.1a – Enhance SSA’s recruitment program to support future workforce needs

FY 2008 Goal: Implement the recruitment evaluation, including collecting initial baseline data and develop an evaluation report

Performance: Completed

Goal Achieved: Yes

Discussion: In FY 2008, we continued with an aggressive recruitment strategy that has proven successful in recent years. Our recruitment strategy ensures that we have the right individuals in place with the right skills to meet our goals and objectives. In July 2008, we updated and released the *National Recruitment Guide*, which provides information on these recruitment strategies and techniques.

One of the greatest challenges facing us is the inevitable loss of employees eligible to retire. By 2017, over 53 percent of our workforce will be eligible for retirement. Not only is this over half of our employees, but also these are the employees who are the most experienced and knowledgeable about the administration of our programs. Adding to the impact of this large retirement wave is the increasing volume of our workload due to the disability and retirement needs of the baby boomers. To ensure that we are poised to address this eventuality, should the budget allow, we prepared an aggressive recruitment strategy, the *National Recruitment Program*. This program includes a ten-step plan, a vast cadre of recruiters across the nation, and the ongoing expansion of tools to ensure that we continue to be a leader in recruitment initiatives Government-wide.

We also developed a *Recruitment Evaluation Plan* to measure various elements of our national recruitment strategy. We collected survey and personnel data throughout the fiscal year and are analyzing the findings to refine our strategies. As a result, we determined whether specific initiatives should be continued, strengthened, or eliminated to enhance our recruitment plan.

Trend: This is a new measure for 2008.

Data Definition: The recruitment evaluation developed in FY 2007 focuses on the following six elements of SSA’s multifaceted recruitment strategy: 1) Co-ordination of nationwide recruitment; 2) on-campus recruitment; 3) creation of an Internet strategy; 4) automation of staffing and recruiting; 5) maximum use of hiring authorities; and 6) diversity recruitment. In FY 2008, the evaluation will be implemented according to the timeline described in the evaluation plan and a report of the findings will be developed. In FY 2009, an action plan which addresses the findings presented in the evaluation report will be developed and implemented, also according to an established timeline.

Data Source: Office of Human Resources records, which include the evaluation plan documented in FY 2007, baseline data collected and resultant report in FY 2008, the action plan developed in FY 2009, and documentation of completion of the actions identified in the evaluation and action plans.

Fiscal Year 2007 Performance Measure - Final data was not available in FY 2007

The following FY 2007 performance measure was eliminated as a *Government Performance and Results Act* measure in FY 2008. The final FY 2007 data for this measure was not available in time for publication in the *Fiscal Year 2007 Performance and Accountability Report*. Therefore, we have included FY 2007 results in this *Fiscal Year 2008 Performance and Accountability Report*.

1.1i – Agency decisional accuracy rate (ADA)

FY 2007 Goal: 97%

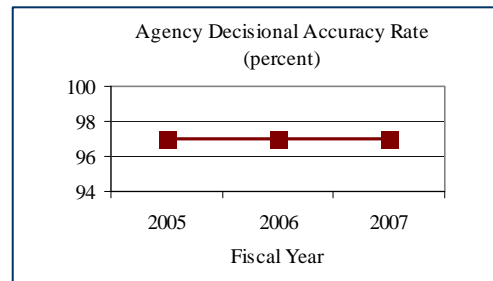
Performance: 97%*

Goal Achieved: Yes

Discussion: This measure assessed our initial disability determination accuracy and targeted areas needing improvement. It considered all corrective actions taken in connection with our quality control reviews before a final Disability Determination Service decides a case. This measure expanded on measure 1.1c- *DDS net accuracy rate for combined initial disability allowances and denials*, described on page 47, as it included correct as well as incorrect Disability Determination Service decisions that were corrected prior to the final processing of the decision. As a service measure it demonstrated the high accuracy rate of our decisions and the reliance that can be placed on them.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	97%	97% *	↑
2006	97%	97% *	↑
2007	97%	97% *	↑



Data Definition: ADA estimates total errors in all initial State agency disability determinations based on the quality assurance (QA) sample review conducted in the Disability Quality Branches. Errors are defined as those cases in which decisions change upon correction. The errors that are corrected in the regional QA and pre-effectuation reviews (PER) are subtracted from the total estimated errors. The remaining uncorrected errors are the “incorrect” cases in ADA. The remaining correct cases divided by the total cases represent ADA.

Data Source: *Disability Quality Assurance Data Base.*

Remarks:

* The actual number is rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

PROGRAM ASSESSMENT RATING TOOL MEASURES

As we stated in the Program Assessment Rating Tool (PART) discussion on page 34, PART is a diagnostic tool that the Office of Management and Budget designed to examine different aspects of program performance and to identify the strengths and weaknesses of a given federal program. We continue to work with the Office of Management and Budget to ensure that we develop, implement, and update plans to improve program performance.

To assess our progress, we identified 15 PART performance measures. We described 10 of the 15 PART performance measures in the previous section. The remaining five we describe on the following pages.

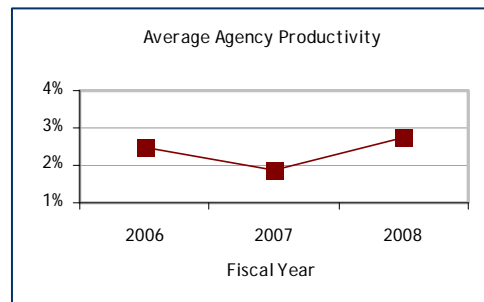
Average agency productivity

FY 2008 Goal: 2%
 Performance: 2.72%
 Goal Achieved: Yes

Discussion: We are proud of the increases in productivity that we have achieved. On average, we have increased productivity by 2 percent each year in 2 of the last 3 years; and we expect FY 2009 productivity to be even higher. It is especially challenging to meet this goal due to the increase in the volume and complexity of our workloads at the same time we are losing significant numbers of trained and experienced employees to retirement. Despite these challenges, our productivity has continuously increased. With sufficient ongoing and timely funding, we are confident we will continue to improve productivity because of our dedicated staff, plans for improved technology, and our efforts to streamline and simplify our business processes, policies, and procedures.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2006	2%	2.49%	↑
2007	2%	1.89%	↓
2008	2%	2.72%	↑



Data Definition: The percent change in productivity is measured by comparing the total number of our and Disability Determination Services (DDS) workyears that would have been expended to process current year SSA level workloads at the prior year's rates of production to the actual SSA and DDS workyear totals expended. The average annual productivity is calculated using a five-year rolling average.

Data Source: Agency Cost Accounting System.

SSA hearing case production per workyear (PPWY) (includes all hearings, not just initial disability)

FY 2008 Goal: 101
 Performance: 103*
 Goal Achieved: Yes

Discussion: We are actively working on implementing enhancements to the hearings process that will allow employees to increase the average number of hearings they process in a year. The most significant enhancement is the availability of electronic case records. As we eliminate paper files and employees become more comfortable with the new process, we expect significant increases in employee productivity.

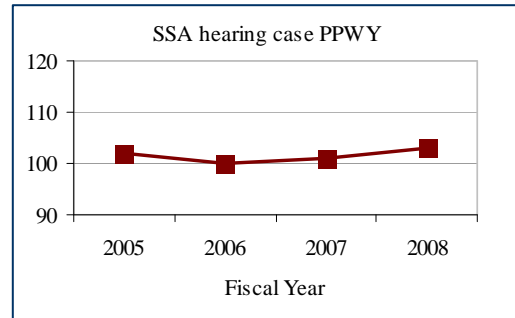
In addition to electronic processes, we are implementing a wide-array of initiatives that will increase hearing level efficiency, including:

- Implementing a streamlined fully favorable decision format;
- Rolling out decision-writing templates;
- Instituting a streamlined process to prepare cases for hearings;
- Providing the ability for administrative law judges to sign their decisions electronically;
- Increasing the amount of data propagated to the hearing level case processing system; and
- Piloting customized software that can assist with the preparation of files for hearing.

Refer to *Agency Priorities as We Move Forward* on pages 24-26 for more information about improvements to the hearings process.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	103	102* **	↓
2006	104	100*	↓
2007	106	101*	↓
2008	101	103*	↑



Data Definition: This indicator represents the average number of SSA hearings case production per workyear expended. A direct workyear represents actual time spent processing cases. It does not include time spent on training, Administrative Law Judge (ALJ) travel, leave, holidays, etc.

Data Source: *Office of Disability Adjudication and Review, Monthly Activity Report, the Case Processing and Management System, Payroll Analysis Recap Report, Travel Formula* (based on the assumption that ALJs spend an average of ten percent of their time in travel status), and *Training Reports* (Regional reports on new staff training, ongoing training, and special training).

Remarks:

* The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

** FY 2005 included Medicare and SSA hearings.

Percent of SSI aged claims processed by the time the first payment is due or within 14 days of the effective filing date

FY 2008 Goal: 80%

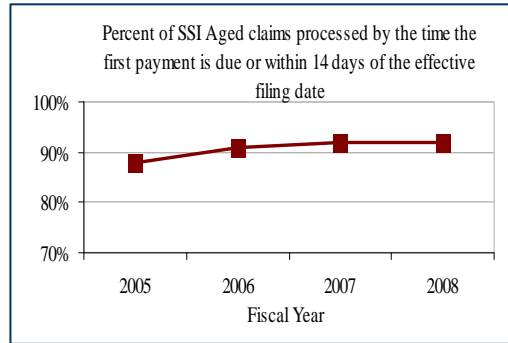
Performance: 92%*

Goal Achieved: Yes

Discussion: We pay Supplemental Security Income to qualified individuals who have limited income and financial assets. We have provided and will continue to provide sufficient resources to ensure that the needs of this segment of the population are met and that we process applications as quickly as possible. Our performance reflects a national commitment to make timely and accurate payments to Supplemental Security Income aged recipients (i.e., qualified individuals age 65 and older).

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	75%	88%*	↑
2006	75%	91%*	↑
2007	75%	92%*	↑
2008	80%	92%*	↑



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: Title XVI Operational Data Store.

Remarks:

* The actual number is rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

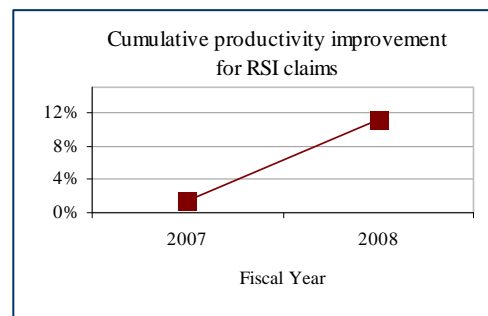
Cumulative productivity improvement for Retirement and Survivors Insurance claims (compared to FY 2005)

FY 2008 Goal: 5%
 Performance: 11.2%
 Goal Achieved: Yes

Discussion: The aging of the baby-boomer generation will result in increases in retirement and survivors applications. Achieving this performance goal is especially challenging due to the increase in these workloads because of the steady filing of disability applications filed by the younger baby boomers as they enter their disability-prone years. In addition, our workforce will experience its own retirement wave, which will create an additional hurdle in meeting the program's ambitious targets. In the face of anticipated rising workloads, the employee retirement wave, and constrained resources, we have set ambitious targets and timeframes for our long-term Old-Age and Survivors Insurance measure for increased productivity. We exceeded our FY 2008 goal by achieving 11.2 percent productivity improvement. As described in previous performance measures, this productivity improvement is attributable to enhanced automation, streamlining of our policies, processes and procedures, and the increase in Internet applications. We have set a goal of cumulative productivity improvement of 16 percent by FY 2013.

Trend: This was a new measure in 2007.

Fiscal Year	Goal	Performance	Goal Achieved?
2007	2%	1.4%	↓
2008	5%	11.2%	↑



Data Definition: Retirement and Survivors Insurance (RSI) claims are calculated at the agency level and the percent increase will be calculated using FY 2005 (571 claims processed per workyear) as the base. A 16 percent increase from this base means that the goal in FY 2013 is for us to process 662 claims per workyear. The RSI claims productivity per workyear number includes all retirement benefit claims, survivors benefit claims, and initial claims for Medicare.

Data Source: *The SSA Workload Trend Report.*

Disability Determination Service case production per workyear

FY 2008 Goal: 264

Performance: 265*

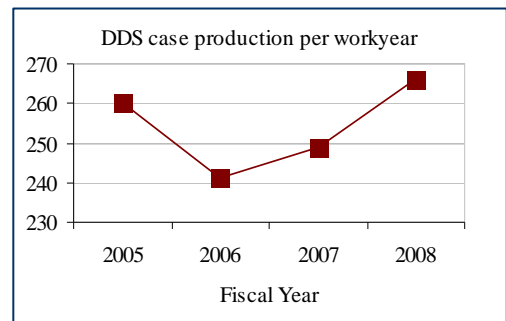
Goal Achieved: Yes

Discussion: This performance measure focuses on productivity directly linked to the stewardship of our disability program. The FY 2008 average case production per workyear of 266 shows an improvement of 7 percent over the FY 2007 average of 249.

This production per workyear increase is even more remarkable as over 50 percent of our Disability Determination Service disability examiners have less than 6 years experience and over 23 percent have less than 3 years experience. In addition, average case production per workyear continued to climb during the last part of this fiscal year, returning to the Disability Determination Services' pre-electronic business process levels. As we anticipated, Disability Determination Service employees are near or at the end of the learning curve in their move from the more familiar paper process to the new fully electronic disability process. As they gained experience, production per workyear increased accordingly.

Trend:

Fiscal Year	Goal	Performance	Goal Achieved?
2005	278	260*	↓
2006	262	241*	↓
2007	252	249*	↓
2008	264	265*	↑



Data Definition: This indicator represents the average number of Disability Determination Services case production per workyear expended for all work. A workyear represents both direct and indirect time, including overhead (time spent on training, travel, leave, holidays, etc.). It is inclusive of everyone on the DDS payroll, including doctors under contract to the DDS.

Data Source: *National Disability Determination Services System and Disability Operational Data Store.*

Remarks:

* The actual number was rounded to the nearest whole number using the standard rounding convention of rounding up numbers that are .5 or higher and rounding down those .4 or less.

PROGRAM EVALUATION

Evaluating programs is a systematic way to learn from experience by assessing how well a program is working. A focused evaluation examines specifically identified factors of a program in a more comprehensive way than a program would be evaluated using day-to-day experiences. The following are brief summaries of selected program evaluations we completed during FY 2008. We list the evaluations under the strategic goal they support as outlined in our *Fiscal Years 2006-2011 Agency Strategic Plan*. To obtain copies of the comprehensive results of completed evaluations write to:

Social Security Administration
Office of Budget, Finance and Management
Strategic Management Staff
4215 West High Rise
6401 Security Boulevard
Baltimore, MD 21235

STRATEGIC GOAL 1: TO DELIVER HIGH QUALITY, CITIZEN-CENTERED SERVICE

TICKET TO WORK EVALUATION

The *Ticket to Work* program is one of our return-to-work initiatives. The purpose of the program is to expand the universe of service providers available to individuals with disabilities who are seeking vocational rehabilitation, employment, and other related support services. We issue a ticket to eligible individuals who may choose to assign the ticket to an Employment Network. Employment Networks offer one or more services, such as job readiness and work skills assessment, career counseling, employment placement, internships and apprenticeships, vocational rehabilitation, job coaching, transportation, and other supports. *The Worksite* (www.socialsecurity.gov/work) provides a host of resources for *Ticket to Work* participants.

An independent 5-year evaluation of the program, now in its 5th year, is providing us with ongoing feedback on the program's effectiveness and potential. For a full discussion of the *Ticket to Work* program and evaluation findings, see <http://www.ssa.gov/disabilityresearch/ttweval.htm>.

We use our evaluation findings to pursue regulatory changes that will strengthen the *Ticket to Work* program. We also rely on the following three basic data sources:

- Administrative data on individuals who receive disability benefits;
- A 4-year survey of individuals who receive disability benefits with a special focus on *Ticket* program participants (the National Beneficiary Survey); and
- Field interviews with service providers such as the Employment Network *Ticket* program managers, our staff, and other stakeholders in the *Ticket to Work* program such as employers, state Vocational Rehabilitation agencies, disability and rehabilitation service providers, community-based employment support service providers, and disability management and insurance companies.

Analysis of the process has found that individuals' interest in the program is encouraging, but the levels of participation by potential service providers are disappointing. With input from our evaluation contractor, we refined the *Ticket* evaluation research activities to better understand the business constraints and needs of potential Employment Networks. We also identified five key findings that provided crucial guidance in pursuing regulatory changes to strengthen the *Ticket to Work* program.

- The *Ticket to Work* program has led to modest increases in the use of employment services by disabled individuals, but has not yet led to significant changes in disability benefits and earnings;
- Many disabled individuals are interested in employment, many of whom are interested in working enough to discontinue their entitlement to disability benefits;
- Disabled individuals who earn enough to discontinue entitlement tend not to need re-entitlement for significant periods of time;
- The original *Ticket to Work* program payment options are insufficient to cover the cost of services provided by Employment Networks; and
- A broad array of potential service providers is interested in joining the *Ticket to Work* program if the financial incentives improve.

Although these findings indicate the *Ticket to Work* program has significant potential, we need improvements to Employment Network incentives, such as increasing payments and reducing Employment Networks' financial risks. To this end, we developed new rules that went into effect in July 2008 that we believe will improve the effectiveness of the *Ticket to Work* program to better assist individuals with disabilities. The rules, found at <http://www.socialsecurity.gov/work/newregs.html>, include the following provisions that:

- Expanded the population of individuals eligible for a *Ticket* to include disabled individuals who are expected to medically improve;
- Created greater financial incentives for service providers to participate in the program;
- Increased the value of the ticket to enable individuals with disabilities to take advantage of a more effective combination of services from both state Vocational Rehabilitation agencies and Employment Networks; and
- Promoted better alignment of the *Ticket to Work* program, the *Work Incentives Planning and Assistance Program* (WIPA), the *Protection and Advocacy for Beneficiaries of Social Security Programs*, and other Social Security work-incentive initiatives.

In addition to rule changes, we intensified our recruitment efforts to increase the number of Employment Networks and conducted additional outreach to promote the *Ticket* program to more individuals and to encourage them to participate. To determine whether these changes are having the desired effects, we delayed the fourth round of the National Beneficiary Survey so we could capture individuals' reactions to the new rules, and we extended ticket evaluations through 2012. This will allow us to monitor the new rules and to track Employment Networks' experiences using them. The information we obtain from these evaluations, including the feedback we get from our National Beneficiary Survey mentioned earlier, will help us to further refine and improve the *Ticket to Work* program.

The *Ticket to Work* program evaluations also showed that WIPA projects are playing an important role in disabled individuals' employment decisions. WIPA projects assist disabled individuals by providing them with information about work incentives and benefits planning, and helping them make good choices about work. We plan to conduct more in-depth analyses on the effects of WIPA programs. For more information about WIPA, see <http://www.socialsecurity.gov/work/WIPA.html>.

SERVICE SATISFACTION SURVEYS

We continually evaluate our retirement and other core services by surveying individuals who use them. These surveys provide us with the public's perception of the services we provide whether via the Internet, phone, or in-person visits to our offices. In addition, public feedback helps us identify strengths and weaknesses in our programs and processes so that we can make changes accordingly. Results of the separate surveys are combined to produce a single customer satisfaction measure. In FY 2008, we sustained a high level of customer satisfaction with an overall service rating of 81 percent as "excellent," "very good," or "good." This rating was comparable to the FY 2007 rating of 81 percent and the FY 2006 rating of 82 percent. Below we discuss our FY 2008 survey activities to evaluate service satisfaction.

Telephone Service Satisfaction Surveys

Our telephone service remains a primary service option for the public. As such, we annually survey callers to our National 800 Number and field offices to obtain and measure their satisfaction with our telephone service. Moreover, the surveys provide first-hand feedback on callers' experiences with and perceptions of this service.

In FY 2008, we reported findings from our FY 2007 National 800 Number Caller Survey that reflected opinions of callers served by the speech recognition system. Speech recognition technology reduces the time callers spend navigating through menu prompts as it allows callers to speak their responses instead of using the numeric keypad on the telephone. Survey responses indicated that, while the majority of callers were satisfied with our National 800 Number service, we need to continue efforts to fine-tune speech recognition scripts so that callers find it easier to obtain the service they need. We also found that callers' overall satisfaction with their National 800 Number experience varied greatly depending on the manner in which it was handled:

- 87 percent of callers who were routed directly to an agent rated their overall satisfaction as either "excellent," "very good," or "good;"
- 81 percent of callers who completed their call using only our automated services rated their overall satisfaction as either "excellent," "very good," or "good;" and
- 72 percent of callers who were routed to an automated service and subsequently went on to speak to an agent rated their overall satisfaction as either "excellent," "very good," or "good."

When surveyed about "callers' waiting time on hold," 58 percent of the responders rated it "excellent," "very good," or "good." In FY 2008, we took steps to alleviate caller frustration caused by long hold times by implementing *Scheduled Voice Callback*. This optional feature enables callers to hang up the phone when they are placed on hold, maintaining their place in queue, while waiting for an agent to call them back. We made *Scheduled Voice Callback* available to all callers in September 2008. Our annual 800 Number Caller Survey for FY 2009 will include questions about *Scheduled Voice Callback* so we can assess caller reactions to this feature and gauge its effect on overall satisfaction.

Our FY 2007 Survey of Field Office Callers, published in FY 2008, showed that public satisfaction with field office telephone service held steady with 79 percent of responders rating it "excellent," "very good," or "good." Callers continue to be highly satisfied with the service they receive from field office staff, but access to telephone service remains problematic and is the primary cause for dissatisfaction. Almost half of survey responders reported that they had tried to call field offices but were unable to get through. Similarly, only about half were satisfied with the amount of time they had to wait on hold before being connected with a field office employee.

Internet Services Satisfaction Surveys

The public's increased use of our online services is essential for us to effectively handle the anticipated influx of baby-boomer retirement claims and is a major element in our strategic plan. In addition to online retirement and disability claims, we offer several other online services that we evaluate on an ongoing basis to ensure they remain up-to-date and that they fulfill the public's needs. Refer to www.socialsecurity.gov/onlineservices to see the online services we currently offer. Below we discuss surveys conducted to evaluate our Internet services. Survey responses also helped us learn about public preferences for service delivery and gain insight about the market for electronic services.

- **Survey of Retirement Benefit Applicants**

We surveyed a sample of individuals who had filed for retirement benefits in the traditional manner – either in-person at one of our offices or over the telephone. Survey participants were selected shortly after they received a decision on their applications so they could provide their opinions on the entire application process.

The objective was two-fold: to measure their satisfaction with their application-filing experience and to explore their attitudes toward doing business electronically with us. Ninety-eight percent of responders rated their experience as “excellent,” “very good,” or “good.” More than half of the responders said they currently use the Internet, and almost all of these Internet users were familiar with looking for information online; however, they were much less likely to conduct business online. Of these, 29 percent said they never purchase goods or services online, 56 percent never bank or pay bills online, and just 13 percent had ever filed any type of online application. Furthermore, only 20 percent of these Internet users said that they had considered filing for Social Security retirement benefits online, stating that they preferred having personal contact.

- **eServices Survey of Social Security Disability Benefit Applicants**

We conducted an eServices survey of individuals who had filed for disability benefits to compare the experiences and perceptions of those who filed online to those who filed using traditional filing methods (in-person at one of our offices or via telephone).

Of those filing online, 74 percent rated the ease of conducting their business as very or somewhat easy compared to 63 percent of the traditional filers. However, just one-third of the traditional filers said they were Internet users; two-thirds of them were aware of our online application. Among the two-thirds who were aware of our online disability application, fewer than half considered using this option to file their applications. As with the retirement benefit applicants, these responders stated that a preference for personal contact was the main reason for not filing online. The findings indicate that an individual is more likely to use our online application for retirement benefits rather than disability benefits.

- **eServices Postentitlement Survey: Title II Beneficiaries with a Recent Change of Address or Direct Deposit**

To explore individuals’ interest in using our electronic services, we surveyed a sample of those receiving Social Security benefits (Title II) who had recently processed a change of address or direct deposit action on their record. We refer to both of these actions as post-entitlement changes since they occurred after entitlement to Social Security benefits.

We first determined the method individuals used to process their change of address/direct deposit action: 1) Online services; 2) interactive voice response on our National 800 Number; or 3) traditional methods such as in-person at one of our offices or by telephone with employee assistance. Based on the responses we received, 96 percent of the traditional and online reporters rated the ease of their transaction as very or somewhat easy. This compared to 86 percent when using the interactive voice response on our National 800 Number.

Encouragingly, 94 percent of the online reporters were very much inclined to use the Internet to conduct other types of business with us. Meanwhile, only 37 percent of those using traditional means and 64 percent of those using the National 800 Number interactive voice response were Internet users. As such, individuals in these groups showed little interest in conducting business using our online services.

Disability Initial Claims Report Card

The *Disability Initial Claims Report Card* is an annual survey to measure customer satisfaction with the initial disability application process. We surveyed individuals who had filed for disability benefits – both for Social Security and Supplemental Security Income – using separate samples from different phases of the application

process. We surveyed selected individuals either shortly after they had filed for benefits (mid-process sample) or after they had received a decision that their application had been approved or denied.

We asked individuals to rate key aspects of our services related to the disability application process, such as processing time and the clarity of our explanations on how we decided their claims. We published the findings on the FY 2007 mid-process sample in last year's *Performance and Accountability Report*. Findings from the survey of approved individuals are discussed below. We are finalizing the survey results for denied individuals and will include them in the *Fiscal Year 2009 Performance and Accountability Report*.

Approved disabled individuals gave the initial disability claim process high marks: 88 percent were satisfied with the ease of filing and 89 percent were satisfied with our service overall. Ratings of staff attributes, such as courtesy and job knowledge, were as high as 93 percent. Even the lowest rated aspects of service, claims processing time and ease of contacting us for claim status, received a satisfaction rating of about 80 percent. However, the perception of processing time had a strong influence on overall satisfaction. Of responders who rated processing time as "excellent," "very good," or "good," 98 percent were equally satisfied with overall service. The overall service rating from responders who were dissatisfied with processing time was just 56 percent.

We will report the results from our FY 2008 Report Card survey in next year's *Performance and Accountability Report*.

We began a similar report card survey in FY 2008 to assess applicants' satisfaction with our appeals process. We surveyed both individuals who had received a favorable decision and those who had received an unfavorable decision to obtain ratings of key aspects of the hearings process. Survey results will be reported in the *Fiscal Year 2009 Performance and Accountability Report*.

STRATEGIC GOAL 2: TO PROTECT THE INTEGRITY OF SOCIAL SECURITY PROGRAMS THROUGH SUPERIOR STEWARDSHIP

RETIREMENT, SURVIVORS, & DISABILITY INSURANCE PAYMENT ACCURACY

This annual review provides an accuracy measurement of Social Security benefit payments. Findings are based on a random sample of individuals who are receiving benefits which are then projected to the universe of all individuals receiving Social Security benefits. In FY 2007, the latest year for which we have findings, the sample consisted of 1,500 cases – 1,000 cases for individuals receiving retirement or survivors benefits and 500 cases for individuals receiving disability benefits. In conducting the review, we interviewed each individual or their representative payee and contacted other sources who may have supporting information. We recreated all non-medical factors of Social Security eligibility to measure the accuracy of the Social Security benefit payments. We reported findings as a percent of dollars paid that are free of overpayments and the percent of dollars paid that are free of underpayments.

In FY 2007, overpayment accuracy was 99.8 percent and underpayment accuracy was 99.9 percent. The overpayment rate was lower than in FY 2006 (99.7 percent); however, the difference was not statistically significant. The underpayment rate remained unchanged from FY 2006 (99.9 percent). When focusing on only retirement and survivor benefits, overpayment and underpayment accuracy were both 99.9 percent. When focusing on only disability benefits, overpayment accuracy was 99.1 percent and underpayment accuracy was 99.8 percent. Data for FY 2008 was not available at the time the *Fiscal Year 2008 Performance and Accountability Report* was published. We will report FY 2008 data in the *Fiscal Year 2009 Performance and Accountability Report*.

We reviewed errors identified over a period of years to help identify trends and problem areas. We also used the data to develop initiatives to improve our processes. These include:

- **Identification of substantial gainful work activity through improved reporting**

Generally, work is determined to be substantial if monthly earnings in 2007 exceeded \$900 (\$1,500 for blind individuals) and as a result, individuals could lose their eligibility for disability benefits. Our stewardship review found that, for the 5-year period from FY 2003 through FY 2007, 85 percent of the dollar errors identified that were associated with substantial gainful work activity stemmed from individuals' failure to report that they were working. To address the "failure to report" issue, we are analyzing cases to see if we can make improvements in our work development processes. Currently, work development is not initiated until one of our employees reviews the work history based on alerts generated when an individual receiving disability benefits has earnings posted to their earnings record. Our analysis will determine if it is more efficient to automate work development requests so that they are initiated earlier. We expect our analysis to be completed in FY 2009 and will report our findings in the *Fiscal Year 2009 Performance and Accountability Report*.

- **Reducing errors in computing benefit amounts**

From FY 2003 through FY 2007, errors in computing benefit amounts accounted for about 19 percent of all dollar errors, underpayments and overpayments combined. The leading cause for underpayment dollar errors involved the *Windfall Elimination Provision*. This provision reduces the Social Security benefit of an individual receiving a pension based on earnings not covered by Social Security taxes. However, there are exceptions to the *Windfall Elimination Provision*, and when one is identified after an individual has been receiving Social Security benefits adjusted for the *Windfall Elimination Provision*, a large underpayment may result. Conversely, when pension information is not provided and the individual's Social Security benefit has not been adjusted for the *Windfall Elimination Provision*, an overpayment results. Nearly 77 percent of the overpayment dollar errors from FY 2003 through FY 2007 involved the *Windfall Elimination Provision*. To address this, we have included a legislative proposal in the *FY 2009 President's Budget* that would require state and local governments to provide data on non-covered pensions directly to us. Doing so will help us apply the *Windfall Elimination Provision* more timely and accurately. For more information about the *Windfall Elimination Provision* and how it can affect Social Security benefits, see www.ssa.gov/retire2/wep-chart.htm.

SUPPLEMENTAL SECURITY INCOME PAYMENT ACCURACY STEWARDSHIP REVIEW

This review is similar to the Retirement, Survivors, and Disability Insurance Payment Accuracy Stewardship Review discussed above. In this review we measure the accuracy of payments to individuals receiving Supplemental Security Income. The review is based on a random sample of approximately 4,000 Supplemental Security Income cases from which findings are projected to the universe of all individuals receiving Supplemental Security Income. In conducting the review, we interview individuals (or their representative payees) and contact other sources such as employers and financial institutions to obtain supporting information. We recreate all non-medical factors of Supplemental Security Income eligibility to measure the accuracy of the payments. We report findings as a percent of Supplemental Security Income dollars paid that are free of overpayments and underpayments.

In FY 2007, the latest year for which we have findings, the Supplemental Security Income overpayment accuracy rate was 90.9 percent, and the underpayment accuracy rate was 98.5 percent. While the overpayment rate was lower than the FY 2006 rate (91.2 percent) and the underpayment rate was higher than the FY 2006 rate (97.8 percent), the differences are not statistically significant. Data for FY 2008 was not available at the time the *Fiscal Year 2008 Performance and Accountability Report* was published. We will report FY 2008 data in the *Fiscal Year 2009 Performance and Accountability Report*.

FEDERAL INFORMATION SECURITY MANAGEMENT ACT REVIEW

The *Federal Information Security Management Act (FISMA)* is an information technology (IT) security framework for all federal agencies included in the *eGov Act of 2002*. These agencies are required to submit a FISMA report to the Office of Management and Budget by October 1 of each year. The report summarizes the results of annual IT security reviews of systems and programs, agency progress on correcting identified weaknesses, and the results of other work performed during the reporting period using the Office of Management and Budget's performance measures to assess and report the status of agency IT security programs. In March 2008, SSA received a grade of "A+." In addition, for the third year in a row, SSA was among the three federal agencies to be graded as "Excellent" in our Certification and Accreditation process that is incorporated into the FISMA review. In the FY 2008 review, SSA scored 98 out of 100 points.

ENUMERATION PROCESS QUALITY REVIEW

Enumeration, the process of assigning Social Security Numbers, is one of our core services. We conduct an annual review to measure our enumeration accuracy using a random sample of original Social Security Numbers issued during the fiscal year by one of the following means:

- Enumeration-at-Birth: Parents can apply for a Social Security Number for their newborns at the same time they apply for their newborn's birth certificate. The state agency that issues the birth certificate will share information with us at which time we assign a Social Security Number and issue a Social Security card;
- Enumeration-at-Entry: Certain non-citizens can apply for a Social Security Number as part of the Department of State's immigration process. When the immigrant enters the United States, the Department of Homeland Security electronically transmits the enumeration information to us, and if the immigrant qualifies, we assign a Social Security Number and issue a Social Security card; and
- Paper Social Security Number application: Individuals complete and submit to a field office or Social Security Card Center a Form SS-5, *Application for a Social Security Card*.

In FY 2007, enumeration accuracy was 99.8 percent free of critical error compared to 97.9 percent in FY 2006. A critical error is defined as an incorrectly assigned Social Security Number. These errors result from the assignment of a Social Security Number that already belongs to someone else, the assignment of multiple Social Security Numbers that are not cross-referred on the existing records, or an improperly assigned Social Security Number resulting from incorrect verification of documentation. Improvement in accuracy is attributed to enhancements that the Department of Homeland Security made to its verification system in January 2007. These enhancements enabled the Department of Homeland Security to process more verifications of immigration status that, in turn, reduced the number of critical Social Security Number errors made because of incorrect verification of documentation.

Results from our FY 2008 Enumeration Process Quality Review will not be available until September 2009, and we will report them in our *Fiscal Year 2009 Performance and Accountability Report*.

ELECTRONIC CONTINUING DISABILITY REVIEW SPECIAL STUDY

We routinely conduct continuing disability reviews to determine whether disabled individuals continue to be entitled to benefits based on their disability. In Missouri, we began transitioning continuing disability reviews from a paper to an electronic process (eCDR) in May 2007.

Before expanding eCDRs in additional states, we evaluated 190 eCDRs processed by the Missouri Disability Determination Services to measure accuracy and to determine whether the instructions we provided for completing eCDRs were adequate. Our evaluation found that eCDR accuracy was excellent (98.3 percent) and that cases were properly documented and in compliance with our processing instructions. At the end of FY 2008, 31 states were conducting eCDRs, and all states will have the capability to process eCDRs by December 2008.

QUALITY REVIEW OF ATTORNEY ADJUDICATOR DECISIONS

We discuss in the *Agency Priorities as We Move Forward* section how eliminating the disability hearings backlog is our highest priority. To this end, we implemented an initiative in November 2007 allowing certain attorneys in our hearing offices to issue fully favorable decisions. We refer to fully favorable hearing decisions made without the need to conduct an actual hearing as “on-the-record” decisions.

To evaluate the accuracy of attorney adjudicators’ on-the-record decisions, we reviewed a random sample of attorney adjudicator decisions made in November and December 2007 that had been effectuated at the time of our review. We found that 96 percent of the decisions were accurate.

In FY 2009, we plan to begin an “in-process” quality review of attorney adjudicator on-the-record decisions. We will conduct “in-process” reviews prior to effectuating the decision, thereby enabling us to correct any errors identified prior to issuing the final decision.

STRATEGIC GOAL 3: TO ACHIEVE SUSTAINABLE SOLVENCY AND ENSURE SOCIAL SECURITY PROGRAMS MEET THE NEEDS OF CURRENT AND FUTURE GENERATIONS

ANNUAL REPORT OF THE BOARD OF TRUSTEES OF THE FEDERAL OLD-AGE AND SURVIVORS INSURANCE AND FEDERAL DISABILITY INSURANCE TRUST FUNDS

The *Social Security Act* requires the Board of Trustees of the Federal Old-Age and Survivors Insurance and Federal Disability Insurance Trust Funds to report annually to Congress on the financial and actuarial status of the two Social Security Trust Funds – Old-Age and Survivors Insurance and Disability Insurance. The *2008 OASDI Trustees Report*, issued in March 2008, showed an improvement in the projected long-term financial status of the Social Security program compared to the Trustees’ 2007 report, particularly in the latter half of the 75-year long-range period. Other report highlights included:

- The projected point at which tax revenues will fall below program costs is 2017 -- the same as the estimate in last year’s report;
- The projected point at which the Trust Funds will be exhausted is 2041 -- the same as the estimate in last year’s report;
- The projected actuarial deficit over the 75-year long-range period is 1.70 percent of taxable payroll -- down from 1.95 percent in last year’s report; and
- Over the 75-year period, the Trust Funds would require additional revenue equivalent to \$4.3 trillion in present value as of January 1, 2008, to pay all scheduled benefits.

See www.socialsecurity.gov/OACT/TR/TR08/ for the full *2008 OASDI Trustees Report* to Congress.

ANNUAL REPORT OF THE SUPPLEMENTAL SECURITY INCOME PROGRAM

We are required by law to report annually to the President and to Congress on the status of the Supplemental Security Income program. The report must include projections of program participation and costs through at least the next 25 years. The 2008 report, issued in May 2008, covered the 25-year period 2008 to 2032. Significant findings stemming from our evaluation included:

- By 2032, the end of the 25-year projection period, the population of individuals receiving Supplemental Security Income is estimated to reach 9.5 million. The projected growth in the Supplemental Security Income program over the 25-year period is largely due to the overall growth in the U.S. population. Participation is projected to vary somewhat by age group, with the 65 and older age group projected to decline, and the under 65 age group projected to increase slightly;
- Expressed as a percentage of the total U.S. population, the number of individuals receiving Supplemental Security Income increased slightly from 2.26 percent in 2005 to 2.28 percent in 2007, and it is projected to increase gradually to 2.53 percent by 2032 due largely to the changing age distribution of the population;
- Federal expenditures for Supplemental Security Income payments in 2008 are estimated to increase by \$2.3 billion to \$41.8 billion, an increase of 5.7 percent from 2007 levels;
- In constant 2008 dollars, Federal expenditures for Supplemental Security Income payments are projected to increase to \$55.4 billion in 2032, a real increase of 1.2 percent per year; and
- When compared to the Gross Domestic Product, Federal Supplemental Security Income expenditures are projected to decline over time, from the current level of 0.29 percent of the Gross Domestic Product in 2007 to 0.25 percent by 2032.

Supplemental Security Income Annual Reports provide our agency, Congress, and other interested parties with information on the future of the Supplemental Security Income program and a basis for considering and evaluating possible changes to the program. The 2008 report can be found at http://www.socialsecurity.gov/OACT/ssir/SSI08/exec_sum.html.

STRATEGIC GOAL 4: TO STRATEGICALLY MANAGE AND ALIGN STAFF TO SUPPORT THE MISSION OF THE AGENCY

EMPLOYEE EXIT SURVEY

Our nationwide Employee Exit Survey is an effective tool that we use to gather feedback from departing employees to assist us in identifying ways to improve employee retention. We conducted the exit survey from April 1, 2007 through March 31, 2008. Personnel records show that during this period, 6,100 employees separated from our agency because of retirement (50 percent), resignation (34 percent), or termination of appointment (16 percent). Based on 1,927 survey responses, we found:

- A majority of employees (66 percent) said their reason for leaving was to retire. Only 26 percent said they resigned and 8 percent said their appointment ended;
- Employees most often selected co-workers when asked to identify all of the things they liked about their jobs. Next in line were benefits, office location, salary, and hours. Also mentioned were challenging assignments and providing direct service to the public;
- Respondents most often selected workload and promotional opportunities when asked what they liked least about their jobs;

- Nearly half of the respondents said they would like to work for us in the future. A large majority said they would recommend working for us;
- A large majority of respondents (94 percent) agreed that their work was important. Similarly, 94 percent of the respondents agreed that they knew how their work related to our mission and goals. A significant number (71 percent) reported that they felt their talents were well used. The majority of respondents agreed that supervisors and team leaders encouraged development at work, made good use of employees' skills and abilities, gave employees an opportunity to improve their skills, were receptive to input, and provided good on-the-job training;
- The majority of respondents agreed that employees were rewarded for providing high quality work and services (62 percent) and that diversity was supported in the workplace (72 percent). The highest majority (91 percent) reported that their supervisors discussed their performance with them. The only statement with which fewer than half of respondents agreed was that promotions were given fairly (45 percent); and
- Employees most often identified retirement for their decision to leave the agency. Other factors were talents underutilized, lack of reward for providing high quality service, lack of promotional opportunities, lack of communication between management and employees, and unfairness in promotions.

Management uses the Employee Exit Survey data to develop strategies and action plans to improve the retention of valuable workers. Survey findings and feedback are part of an ongoing dialogue with employees concerning the factors that influence their decisions about employment with us.

ANNUAL EMPLOYEE SURVEY

The Annual Employee Survey serves as our barometer of employee satisfaction and engagement. The results are used to assess and evaluate our human capital programs. In 2007, we asked 1,900 employees to complete the Annual Employee Survey which included 45 questions that covered major human capital areas such as recruitment, development, retention, performance culture, leadership, job satisfaction, and personal work experiences. Based on 1,536 survey responses (81 percent), our employees are very committed to our mission. As a result, our 93 percent retention rate can be attributed to the level of engagement our employees have with the work they do. Below we identify both our highest positive response items and our lowest scoring items:

- Our ***highest positive response items*** identified our employees' commitment to our mission. Our employees liked the work they did, believed their work was important, and knew how their work related to the agency's goals and priorities; and
- Our ***lowest scoring response items*** identified areas that needed improvement. Employees looked for more involvement in decision-making and career development opportunities. Employees also believed we should better recognize high performers and address poor performers.

Management and the Office of Human Resources will use the responses from the Annual Employee Survey to develop agency-level human capital plans, including targeted objectives, commitments, and accountability for results. Our plans will capitalize on our strengths and address the highlighted weaknesses.

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