

Report on Supplemental Security Income Non-medical Redeterminations



Fiscal Year 2022

REPORT ON SUPPLEMENTAL SECURITY INCOME NON-MEDICAL REDETERMINATIONS FISCAL YEAR 2022

Overview and Key Results

In fiscal year (FY) 2022, we completed over 2.2 million Supplemental Security Income (SSI) non-medical redeterminations¹ at a cost of \$806 million in administrative expenses. We estimate that approximately 55 percent of these completed redeterminations resulted in a retrospective or prospective change in monthly SSI payments. Reductions in such payments are classified as overpayments and include retroactively identified overpayments and ongoing reductions in future monthly payments; increases in payments are classified as underpayments and can similarly be either retroactive or recurring. About 26 percent of the cases reviewed had only overpayments, 13 percent had only underpayments, and 16 percent had both. We estimate the present value of the net lifetime Federal SSI and Medicaid savings due to this activity to be \$2.5 billion, representing a net return on investment of \$3.1 on average per \$1 of administrative expenditures.

Statutory Requirement

In the *Consolidated Appropriations Act, 2022*,² Congress specifically allocated additional administrative resources to conduct continuing disability reviews under Titles II and XVI of the Social Security Act and redeterminations of eligibility under Title XVI of the Social Security Act. The law requires that we provide Congress with a report on the obligation and expenditure of these additional amounts. This report satisfies that requirement with respect to SSI (Title XVI) redeterminations processed in FY 2022.

The Supplemental Security Income Redetermination Process

We administer the SSI program, an assistance program that provides monthly cash payments to aged, blind, or disabled individuals with limited income and resources. On average, approximately 7.7 million people received federally administered SSI payments per month in FY 2022.

The Social Security Act requires us to periodically redetermine recipients' eligibility for SSI.³ During a redetermination, we review the non-medical factors of eligibility, including income, resources, and living arrangements. Based on this review, we determine whether the recipient is still eligible for SSI and receiving the correct payment amount.

To conduct the most productive and cost-effective reviews each year, we focus our resources on those recipients who are most likely to have had a change in circumstances affecting their monthly payment amount or eligibility. We use a statistical model to assign a score to each recipient's case based on the likelihood of overpayment, considering factors such as income, resources, and living arrangements. We then select the highest-scoring cases for review. We also use reviews that focus on a specific issue when a match between our records and those of another Federal agency indicates potentially undisclosed income, resources, or living arrangements. In addition to the scheduled redeterminations described

¹ Throughout this report, the term "redeterminations" will be used to refer exclusively to SSI non-medical redeterminations and limited issues. Limited issues are cases selected for a limited review by an SSA field employee due to a single issue, such as an alert resulting from a match between SSA records and those of another agency. This report does not address medical redeterminations, which are primarily cases selected for a medical Continuing Disability Review.

² Public Law 117-103, enacted March 15, 2022.

³ See 42 United States Code, section 1382(c)(1), "Eligibility for and the amount of [Title XVI] benefits shall be redetermined at such time or times as may be provided by the Commissioner of Social Security."

above, we conduct unscheduled redeterminations as needed when an SSI recipient reports a change that could potentially affect eligibility for the program or monthly payment amounts.

Detailed Results for Fiscal Year 2022

We examined the eligibility or payment amount of nearly one-third of recipients who received federally administered SSI payments as part of the FY 2022 redetermination workload. Table 1 presents the numbers of those SSI redeterminations completed in FY 2022 and a summary of our findings. When we redetermine a case, we examine monthly eligibility and payment amounts for the current month and for prior months, generally extending back to the last month we previously performed such a detailed examination. Because the correct SSI eligibility and payment amount depends on the recipient's income, resources, living arrangements, and other factors—all of which can vary from month-to-month—there is the potential for overpayments, underpayments, or both.

Table 1—SSI redeterminations completed in FY 2022

	Type of Redetermination		
	<u>Scheduled</u>	<u>Unscheduled</u>	<u>Total</u>
Redeterminations completed in 2022:			
Number of redeterminations.....	1,863,967	338,836	2,202,803
Expressed as a percentage of the average number of SSI recipients with Federally administered payments per month during FY 2022.....			
	24%	4%	29%
Estimated percentage of total redeterminations with:			
Overpayments or underpayments (or both)	53%	65%	55%
Overpayments only	28	18	26
Underpayments only	11	25	13
Both overpayments and underpayments	15	22	16
No overpayments or underpayments.....	47	35	45
Total.....	100	100	100
Overpayments (with or without underpayments)....	43%	40%	42%
Underpayments (with or without overpayments)....	26	46	28

Note: Totals may not equal the sum of their components due to rounding.

Based on an internal study of redeterminations completed⁴ in FY 2022, we estimated the resulting year-by-year net reductions in Federal SSI payments. We present these estimates in the “SSI Net Change” column of table 2, along with estimates of the corresponding net reductions in the Federal share of Medicaid payments prepared by the Office of the Actuary in the Centers for Medicare & Medicaid Services.

⁴ “Completed” here and throughout the report refers to both completed and cleared redeterminations. A cleared case is one where a redetermination was started but stopped for administrative reasons unrelated to the redetermination itself. Some cleared cases result in benefit changes because a redetermination was initiated, allowing us to identify a change in circumstances earlier than we would have without the redetermination. The estimated benefit changes shown in Table 2 reflect the impact of this earlier identification, but only up to the point when we would have normally detected the change.

Table 2—Estimated change in the Federal share of SSI and Medicaid outlays resulting from SSI redeterminations completed in FY 2022

(In millions)

Fiscal Year	SSI			Total ^a SSI and Medicaid	
	Over- payments	Under- payments	Net Change	Medicaid	
Scheduled redeterminations:					
2022	-\$637	\$537	-\$100	-\$27	-\$128
2023	-1,184	43	-1,141	-64	-1,205
2024	-445	—	-445	-46	-491
2025	-137	—	-137	-36	-173
2026	-79	—	-79	-15	-94
2027	-44	—	-44	—	-44
2028	-41	—	-41	—	-41
2029	-29	—	-29	—	-29
2030	-25	—	-25	—	-25
2031	-19	—	-19	—	-19
Total, 2022-2031	-2,639	580	-2,060	-188	-2,247
Unscheduled redeterminations:					
2022	-207	504	297	-9	289
2023	-384	44	-340	-22	-362
2024	-120	—	-120	-18	-138
2025	-48	—	-48	-15	-62
2026	-27	—	-27	-6	-33
2027	-14	—	-14	—	-14
2028	-13	—	-13	—	-13
2029	-9	—	-9	—	-9
2030	-8	—	-8	—	-8
2031	-6	—	-6	—	-6
Total, 2022-2031	-835	548	-287	-69	-356
Total for scheduled and unscheduled redeterminations:					
2022	-844	1,041	197	-36	161
2023	-1,568	87	-1,481	-86	-1,567
2024	-565	—	-565	-64	-629
2025	-185	—	-185	-50	-235
2026	-106	—	-106	-21	-128
2027	-57	—	-57	—	-57
2028	-54	—	-54	—	-54
2029	-38	—	-38	—	-38
2030	-33	—	-33	—	-33
2031	-24	—	-24	—	-24
Total, 2022-2031	-3,474	1,128	-2,346	-257	-2,603
Present value of estimated net lifetime Federal outlay changes, as of the end of FY 2022:					
Scheduled redeterminations.....	-2,552	587	-1,965	-182	-2,147
Unscheduled redeterminations.....	-807	555	-253	-67	-320
Total.....	-3,359	1,142	-2,217	-249	-2,466

Notes:

1. Estimates are consistent with the assumptions underlying the projections in the 2023 Annual Report of the Supplemental Security Income Program (available at www.ssa.gov/oact/ssir/SSI23/index.html).
2. The Office of the Actuary in the Centers for Medicare & Medicaid Services provided the Medicaid savings estimates, which are consistent with the assumptions underlying the FY 2024 President's Budget. Due to the timing of when these estimates were developed, they do not reflect the effects of Public Law 119-21, the One Big Beautiful Bill Act, enacted on July 4, 2025.
3. Estimates reflect the effects of certain redeterminations which are initiated but not subsequently completed.
4. Federal SSI payments due on October 1st in FYs 2023, 2024, and 2029 are included with outlays for the prior year.
5. Totals may not equal the sum of their components due to rounding.

Our FY 2022 internal study provided an estimate of the aggregate reduction in federally administered SSI payments attributable to redeterminations completed in FY 2022. The year-by-year Federal SSI net payment reductions shown in table 2 are consistent with the results of the internal study, but adjusted to: (1) remove the savings attributable to federally administered State supplementary payments; and (2) distribute the savings by fiscal year.⁵ In addition to the estimated net year-by-year cash-flow savings from these SSI redeterminations, table 2 provides the resulting estimated present value of net reductions in lifetime Federal program outlays as of September 30, 2022.

Table 3 presents two alternative measures of the effects of the SSI redetermination process for FY 2022. The first measure estimates the net reduction in Federal program outlays resulting from redeterminations completed in FY 2022. The second measure estimates the total correction of Federal payments, treating each dollar of corrected or avoided underpayment the same as each dollar of corrected or avoided overpayment. Table 3 shows both measures and computes their respective ratios to the cost of conducting redeterminations in FY 2022.

**Table 3—Estimated return on investment from SSI redeterminations completed in FY 2022
(Including Federal share of SSI and Medicaid effects; total amounts in millions)**

	Type of Redetermination		Total
	Scheduled	Unscheduled	
A. Administrative costs ^a	\$682	\$124	\$806
B. Estimated present value of:			
Overpayments identified and recovered or prevented ^b	2,733	874	3,608
Underpayments identified and corrected.....	587	555	1,142
Net reduction in Federal outlays.....	2,147	320	2,466
Total correction of Federal outlays.....	3,320	1,429	4,750
C. Estimated return on investment:			
Ratio of effect achieved to cost of conducting redeterminations where the effect is defined as:			
Net reduction in Federal outlays.....	3.1	2.6	3.1
Total correction of Federal outlays.....	4.9	11.5	5.9

^aTotal costs of conducting SSI redeterminations in FY 2022 as reported by the Social Security Administration cost allocation system.

^bIncludes the total estimated Medicaid net benefit reductions, which are attributable to cases that result in suspension of SSI benefits payable in months after the redetermination.

Notes:

1. Estimates reflect the effects of certain redeterminations which are initiated but are not subsequently completed.
2. Totals may not equal the sum of their components due to rounding.

As shown in table 3, the measured return on investment for FY 2022 redeterminations varies by the type of redetermination (scheduled versus unscheduled) and by the nature of the effect being measured. The overall return on investment on a net Federal outlay basis is 3.1 for scheduled redeterminations, 2.6 for unscheduled redeterminations, and 3.1 overall. Therefore, we estimate that the scheduled FY 2022 redeterminations will reduce Federal program outlays on a net present value basis by about \$3.10 on average per \$1 of administrative expenditures, and that the unscheduled FY 2022 redeterminations will

⁵ We based the year-by-year distribution of the net savings on results from the FY 2022 internal study, enhanced by our analysis tracking samples of redetermination cases from earlier years. Our limited review of these earlier cohorts suggests that estimates of the proportion of individuals losing SSI eligibility may be understated, which could have a significant impact on estimated Federal Medicaid savings.

reduce net Federal program outlays by \$2.60 on average per \$1 of administrative expenditures. The greater return on investment on an outlay basis for the scheduled cases is primarily because a much smaller percentage of scheduled redeterminations had an underpayment (26 percent for scheduled vs. 46 percent for unscheduled). Nevertheless, the overall redetermination process is very cost-effective from a Federal outlay perspective, with the FY 2022 redeterminations saving about \$3.10 on average per \$1 spent.

Redeterminations are even more cost-effective when viewed under the alternative “corrected payment” perspective, because under this perspective, a corrected underpayment contributes just as much as a corrected overpayment. As shown in table 3, we estimate that the FY 2022 redeterminations have corrected about \$5.90 in benefit payments on average per \$1 spent to conduct the reviews.

Conclusion

As the FY 2022 results in table 3 illustrate, the non-medical redetermination process is an effective program integrity tool, delivering about \$3.10 in net lifetime Federal savings on average per \$1 spent. As good stewards of taxpayer funds, our obligation is to ensure that only eligible individuals receive benefits, in the right amount, and at the right time. We believe that our redeterminations are crucial in fulfilling this stewardship obligation. Congress has also recognized the value of these reviews, periodically providing additional, dedicated funding for non-medical redeterminations, as well as for continuing disability reviews.