Part VI. Summary of All Strategic Objectives and Performance Indicators

Whereas Part V of this Annual Performance Plan discusses our *key performance indicators* for FY 2003, this Part displays *all* of our performance indicators, arrayed by strategic goal and objective. For those Strategic Objectives not included in Part V of this document, we discuss the *Means and Strategies* for achieving these Objectives. For easy reference, the goals/objectives have letters/numbers that match the summary chart beginning on page 5. Where environmental and external factors may affect the achievement of a particular strategic objective, or where cross-cutting issues or initiatives involving other agencies or organizations exist, they are indicated.

We provide historical trend data beginning with FY 1999, and for FY 1998, if available. We also provide detailed information about how the performance data for each measure are computed, data weaknesses if they exist, and data sources. Where complete FY 2001 data are not yet available, we show "N/A" for "not available", or we provide estimates when possible.

A. Strategic Goal: To deliver citizen-centered, world-class service

A1. Strategic Objective: By 2004 and beyond, have 9 out of 10 people who do business with SSA rate the overall service as "good", "very good", or "excellent", with most rating it "excellent"

Means and Strategies: See Part V., pages 29 - 32 for a discussion of the means and strategies for this objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent of people who do business with SSA rating the overall service as "excellent", "very good", or "good"

| Year | Goal | Actual |
|------|------|--------|
| 1998 | N/A | 82% |
| 1999 | N/A | 88% |
| 2000 | 88% | 82% |
| 2001 | 82% | 81% |
| 2002 | 82% | |
| 2003 | 82% | |

Data Definition: This is the percent of people who call or visit SSA surveyed by SSA's Office of Quality Assurance and Performance Assessment 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: For FY 1999 and earlier, the SSA Annual Satisfaction Survey. For FY 2000 and beyond, the Interaction Tracking Surveys that capture public satisfaction shortly after service contacts (either by telephone or in-person) take place.

Performance Indicator: Percent of people who do business with SSA rating the overall service as "excellent"

| Year | Goal | Actual |
|------|------|--------|
| 1998 | N/A | 30% |
| 1999 | N/A | 44% |
| 2000 | 37% | 29% |
| 2001 | 30% | 28% |
| 2002 | 30% | |
| 2003 | 30% | |

Data Definition: This is the percent of people who call or visit SSA surveyed by SSA's Office of Quality Assurance and Assessment who rate overall service as "excellent" on a 6-point scale ranging from "excellent" to "very poor", divided by the total number of respondents to that question.

Data Source: For FY 1999 and earlier, the SSA Annual Satisfaction Survey. For FY 2000 and beyond, the Interaction Tracking Systems that capture satisfaction shortly after service contacts (either by telephone or in-person) take place.

Performance Indicator: Percent of employers rating SSA's overall service during interactions with SSA as "excellent", "very good", or "good"

| Year | Goal | Actual | Estimated Performance |
|------|------|--------|-----------------------|
| 2002 | N/A | | 94%* |
| 2003 | 94% | | |

Data Definition: This percent is the number of employers directly interacting with SSA who rate overall service as "excellent," "very good," or "good" on a 6-point scale ranging from excellent to very poor, divided by the total number of respondents to that question. For FY 2002, data will be based on results of a survey of employers who called SSA's Employer Reporting Service Center. In FY 2003, additional types of employer interactions will be included.

Data Source: Annual Employer Interaction Survey conducted by the Office of Quality Assurance and Performance Assessment

Performance Indicator: Percent of employers rating SSA's overall service during interactions with SSA as "excellent"

| Year | Goal | Actual | Estimated Performance |
|------|------|--------|-----------------------|
| 2002 | N/A | | 33%* |
| 2003 | 33% | | |

Data Definition: This percent is the number of employers directly interacting with SSA who rate overall service as "excellent" on a 6-point scale ranging from excellent to very poor, divided by the total number of respondents to that question. For FY 2002, data will be based on results of a survey of employers who called SSA's Employer Reporting Service Center. In FY 2003, additional types of employer interactions will be included. **Data Source:** Annual Employer Interaction Survey conducted by the Office of Quality Assurance and Performance

Assessment

*Note:

For these two employer satisfaction measures, we established baseline data based on opinions of a sample of survey respondents. The satisfaction rates cannot be generalized to the universe of employers who called the Employer Report Service Center. The survey methodology will be refined before the FY 2003 survey is conducted.

Performance Indicator: Percent of callers who successfully access the 800-number within 5-minutes of their first call

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 95% | 95.3% |
| 1999 | 95% | 95.8% |
| 2000 | 92% | 92.9% |
| 2001 | 92% | 92.7% |
| 2002 | 92% | |
| 2003 | 94% | |

Data Definition: This is the percent of unique call attempts that successfully "connect" within 5 minutes of the first attempt within a 24-hour period. A successful "connection" occurs when a caller selects either an automated or live agent and is connected with that option within 5 minutes of the first dialing of the 800-number. **Data Source:** Automatic Number ID records provided by WorldCom

Performance Indicator: Percent of callers who get through to the 800-number on their first attempt

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 90% | 91.1% |
| 1999 | 90% | 92.9% |
| 2000 | 86% | 88.4% |
| 2001 | 86% | 89.2% |
| 2002 | 86% | |
| 2003 | 87% | |

Data Definition: This percent is the number of individuals who reach the 800-number (either live or automated service) on their first attempt, divided by the number of unique telephone numbers dialed to the 800-number. An "attempt" is defined as the first attempted call of the day, or a subsequent attempt after a previously successful call. **Data Source:** Automatic Number ID records provided by WorldCom

Performance Indicator: Percent of 800-number calls handled accurately - Payment

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 95% | 94.7% |
| 1999 | 95% | 95.4% |
| 2000 | 95% | 94.5% |
| 2001 | 95% | 94.3% |
| 2002 | 95% | |
| 2003 | 95% | |

Performance Indicator: Percent of 800-number calls handled accurately – Service

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 90% | 81.7% |
| 1999 | 90% | 81.8% |
| 2000 | 90% | 84.9% |
| 2001 | 90% | 83.1% |
| 2002 | 90% | |
| 2003 | 90% | |

Data Definition: Payment accuracy is a measure of whether 800-number representatives respond correctly to inquiries related to eligibility and payment of benefits. Service accuracy is a measure of whether 800-number representatives respond correctly to inquiries related to issues other than payment and eligibility. Service errors include major service delivery failures that *do not* have a reasonable potential to improperly affect payment or eligibility.

Data Source: 800-number Service Evaluation Findings

Note: Despite performance below the target, we will retain the 90% goal because we believe it represents good service within the bounds of available resources. Generally, there is about a one year lag before quality data are available due to the review and validation of study data input in the database, allowing time for rebuttals of errors, obtaining universe counts and running/validating report tables.

Performance Indicator: Percent of public with an appointment waiting 10 minutes or less

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 85% | 87.4% |
| 1999 | 85% | 84.6% |
| 2000 | 85% | 84.2% |
| 2001 | 85% | 84.4% |
| 2002 | 85% | |
| 2003 | 85% | |

Data Definition: This percent is the number of visitors with an appointment who wait 10 minutes or less, divided by the total number of visitors with an appointment during the study time. Waiting time data are collected from a representative sample of field offices during a 1-hour window, once a quarter.

Data Source: SSA Waiting Time Study. The waiting time study is conducted quarterly in local field offices.

A2. Strategic Objective: By 2005, make 67 percent of the public's interactions with SSA, including citizen-initiated services, available either electronically via the Internet or through automated telephone service, and provide the public interacting with SSA on the Internet with the option of communicating with an SSA employee while online

Means and Strategies: See Part V, pages 33-35 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent of the public's interactions with SSA, including citizeninitiated services, available either electronically via the Internet or through automated telephone service

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 5% |
| 2000 | 30% | 10% |
| 2001 | 21% | 23.3% |
| 2002 | 30% | |
| 2003 | 40% | |

Data Definition: This is the percent of the public's interactions with SSA that will be available electronically via the Internet or through automated telephone service.

Data Source: List of the public's interactions with SSA, Internet schedule, Internet Site: ssa.gov

Note: We are continuing to evolve our indicators for this Objective. We are developing measurement systems and establishing a baseline of performance from which to set annual goals for the number of business transactions "conducted" via the Internet or through automated telephone service. Initially, we are developing measures related to specific transactions and will include goals for these measures in the FY 2004 Performance Plan, e.g., claims for retirement originating on the Internet.

Performance Indicator: Activities to establish the capability for the public interacting with SSA on the Internet to communicate with an SSA employee while online

FY 2002 Goal: Test Internet and 800 number convergence technologies in a proof of concept (POC) initiative and then begin to implement technologies.

FY 2003 Goal: Testing and proof of concept will continue.

Data Definition: Internet and 800 number convergence technologies are real time text-based collaboration, e.g., web chat; real time web page collaboration (push/pull technology); call back features; Voice Over Internet Protocol (VOIP); secure e-mail; authentication (smart cards, biometrics, PINS and passwords); and public relationship management tools. Our plan is to move successful technologies to the proposed Multimedia Citizen Contact Center (MC3). As we gain experience from the MC3 we will develop recommendations and plan for national implementation of the various technologies. We anticipate the recommended features to be fully implemented by FY 2004.

Data Source: Data will be obtained from the individual vendors who supply the hardware and/or software features for the various applications.

- A3. Strategic Objective: Increase electronic access to information needed to serve the public. Specifically by 2005:
 - Establish electronic access to human services and unemployment information with 90 percent of States;
 - Establish electronic access to vital statistics and other material information with 50 percent of States; and
 - Increase electronic access to information held by other Federal Agencies, financial institutions and medical providers

Means and Strategies: SSA requires data from a variety of sources to process claims accurately. We are seeking online access to our key sources of data to improve service, decrease administrative costs, and reduce or prevent overpayments. Since 1994, we have sought SSA access to State records online (SASRO) for four key areas: Human Services, Unemployment, Vital Records, and Workers' Compensation.

In FY 2001, we rolled out online access to SSA data to interested State Human Services agencies. We concluded a similar pilot with Unemployment Insurance agencies in June 2001. Ninety percent of the Human Service and Unemployment agencies have indicated an interest in providing SSA online access to their records if we reciprocate. Expansion to Human Service agencies and Unemployment Insurance agencies, if approved, will enable us to reach our FY 2005 goals on schedule.

In FY 2002 and FY 2003, we will continue our marketing activities for online access to Human Service and Unemployment agencies. In early FY 2002 we contracted with the State Vital Records Association to develop software to pilot online access in FY 2003. In FY 2002 we will discuss with the State Workers' Compensation Association data needs and technical options. In FY 2003, we will implement vital records pilots and seek association approval to do so with workers' compensation agencies.

Electronic access to information at Federal agencies (i.e., RRB, DOJ's Bureau of Prisons, OPM, CMS, OSCE, VA and Treasury's IRS and Bureau of Public Debt) is now established.

In FY 2002, we are testing three electronic methods to access medical evidence. One pilot, with California (CA) American Medical Association and the CA DDS, tests the secure transmission of signed consultative examination reports using Public Key Infrastructure (PKI) technology. Another pilot tests the transmission of electronic medical records from two Veterans Administration hospitals in Mississippi (MS) to the MS DDS. A third pilot tests the retrieval of medical records from a secure Internet site. The results of the three pilots will form the basis of the implementation plan for FY 2003.

Regarding electronic access to financial institutions, in FY 2002, we will draft and clear final regulations, prepare a statement of work for vendor services, schedule the needed SSA systems support, and develop a schedule for the pilot implementation, as appropriate. In FY 2003, we will contract with a vendor and conduct a pilot to test the business case.

Performance Indicators and Goals:

Performance Indicator: Percent of States with which SSA has electronic access to human services and unemployment information

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 41% |
| 2000 | N/A | 50% |
| 2001 | 59% | 55% |
| 2002 | 68% | |
| 2003 | 75% | |

Data Definition: This is the percent of State HS and UI agencies from which data are available online out of a total of 100 agencies (i.e., 50 HS and 50 UI agencies).

Data Source: Office of Automation Support website listing of State agency connections

Performance Indicator: Percent of States with which SSA has electronic access to vital statistics and other material information

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 10% |
| 2000 | N/A | 10% |
| 2001 | 12% | 10% |
| 2002 | 14% | |
| 2003 | 26% | |

Data Definition: This is the percent of State Vital Statistics agencies from which data are available online out of a total of 50 agencies.

Data Source: Office of Automation Support website listing of State agency connections

Performance Indicator: Milestones/deliverables demonstrating progress in increasing electronic access to information held by other Federal Agencies, financial institutions and medical providers

.

Data Definition: The FY 2002 goal will be considered met upon the completion of the California pilot and analysis of 3 alternatives for Internet transmission of medical information, and development of an implementation plan. Additionally we will begin the project with financial institutions to check their records to determine applicants/ recipients eligibility for benefits by publishing final regulations, preparing a statement of work for vendor services, and developing a schedule for the pilot.

The FY 2003 goal will be considered met upon the completion of an implementation plan for electronic access to medical evidence. Additionally, the goal for financial institutions will be considered met upon award of a contract to a vendor to check records concerning applicants'/recipients' eligibility for benefits.

Data Source: Private healthcare providers and the Veteran's Administration

A4. Strategic Objective: Maintain the accuracy, timeliness, and efficiency of service to people applying for OASI and SSI Aged benefits. Specifically by 2005: have the capacity to take and process 99 percent of OASI and SSI Aged claims in a paperless environment

Means and Strategies: The purpose of this Objective is to ensure efficient and effective service to individuals applying for OASI and SSI Aged benefits, as expressed by timely and accurate determinations on their claims. Existing policies and practices support maintenance of our performance goals for the indicators below. We have in place the software and infrastructure for paperless processing of RSI and SSI Aged applications. The Modernized SSI Claims System (MSSICS) has already eliminated the need to prepare paper input documents by permitting online collection of application data for nearly all SSI initial claims. Our ongoing redesign of mainframe software applications will result in the electronic processing of more SSI Aged applications and RSI claims. For OASI benefits, we are expanding Internet claims processing. This will enhance service delivery, giving individuals more choices of how to access our services. The further development of Internet claims will support our long-term goal to take and process 99 percent of OASI and SSI Aged claims in a paperless environment. Our performance could be impacted by the needs of other budgetary and legislative priorities, and of other growing workloads that would compete for resources required to achieve these performance levels. In addition, the continuing success of this Objective is dependent upon enhanced automation, especially of Internet applications.

Performance Indicators and Goals:

Performance Indicator: Percent of OASI claims processed by the time the first regular payment is due or within 14 days from the effective filing date, if later

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 83% | 82.6% |
| 1999 | 83% | 84.3% |
| 2000 | 83% | 86.9% |
| 2001 | 83% | 89.2% |
| 2002 | 85% | |
| 2003 | 88% | |

Data Definition: This percent is the number of OASI 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 calendar days from the effective filing date, if later, divided by the total number of OASI applications processed. The first regular payment due date is based on the appropriate payment cycling date which may be the 3rd of the month, or the 2nd or 3rd, or 4th Wednesday of the month.

Certain conditions must exist for a case to be included in the computation for this indicator. The case must be completed as an award or disallowance. Cases completed as Office of Earnings Operations (OEO) deletions, miscellaneous clearances, withdrawals, no payment awards, no applications, systems purges, manual clearances, reestablished reconsiderations or miscellaneous deletions are not included in the computation.

Data Source: The MIICR System

Performance Indicator: Percent of SSI Aged claims processed by the time the first payment is due or within 14 days of the effective filing date, if later

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 66% | 54.2% |
| 1999 | 66% | 63.5% |
| 2000 | 66% | 74.4% |
| 2001 | 66% | 79.9% |
| 2002 | 70% | |
| 2003 | 75% | |

Data Definition: (FY 2001 on) This percent is 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 is in effect beginning FY 2001.

Definition Before FY 2001: Prior to FY 2001, the indicator was: Percent of initial SSI Aged claims processed within 14 days of filing date. The rate reflected the number of SSI Aged applications completed through the SSA operational system (i.e., award or denial notices triggered) within 14 days of filing date, divided by the total number of SSI Aged applications processed. This definition and measurement system were in effect for years prior to FY 2001.

Data Source: The Title XVI Operational Data Store System

Performance Indicator: Implement activities necessary to have the software and infrastructure in place for paperless processing of RSI and SSI Aged claims

FY 2002 Goal:

- 1. Accommodate dual entitlement advance file cases; automate determination of need to develop military service allegations; update the workers' compensation file; and control certain exceptions via a PCACS interface; and
- 2. Implement Phase 2 of Attorney Fee/Windfall Offset project. Begin analysis of additional windfall offset enhancements

Data Definition:

- 1. This goal will have been met if we develop, test, validate and implement release 3.8 of MCS.
- 2. This goal will have been met if we develop, test, validate and implement a future release of MSSICS.

FY 2003 Goal:

- 1. Develop an automated system to pay cases involving attorneys; and
- 2. Complete analysis of additional SSI Windfall Offset enhancements.

Data Definition:

- 1. This goal will be met if we develop, test, validate and implement the first release of the Single Payment System.
- 2. This goal will be met if a Project Scope Agreement for Windfall Offset is concluded with all stakeholders.

Data Source: Office of Systems 5-Year Plans

A5. Strategic Objective: Improve the accuracy, timeliness, and efficiency of service to people applying for DI and SSI disability benefits. Specifically by 2005:

- Increase the accuracy of initial disability claims decisions to deny benefits to 95 percent;
- Maintain the accuracy of initial disability claims decisions to allow benefits at 96.5 percent;
- Issue initial disability claims decisions in an average of 105 days, with at least 70 percent issued within 120 days; and
- Have the capacity to process 99 percent of disability claims in an electronic environment

Means and Strategies: See Part V pages 36 - 38 for a discussion of the means and strategies for this Objective.

Performance Indicator: Percent of initial disability claims decisions issued within 120 days

FY 2002 Goal: We will establish a baseline for this indicator.

Data Definition: We will consider this goal met if we establish baseline data for this indicator.

Data Source: Office of Information Management

FY 2003 Goal: After analysis of baseline data, a goal will be developed.

Key Performance Indicator: Initial disability claims average processing time (days)

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 100 | 100 |
| 1999 | 100 | 105 |
| 2000 | 115 | 102 |
| 2001 | 120 | 106 |
| 2002 | 115 | |
| 2003 | 110 | |

Data Definition: This is the fiscal year average processing time for DI and SSI claims combined. Processing time is measured from the application date (or protective filing date) to either the date of the denial notice or the date the system completes processing of an award.

Data Source: Title II MIICR Processing Time and Title XVI SSICR Processing Time Systems

Performance Indicator: DDS allowance performance accuracy rate

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | N/A | 96.1% |
| 1999 | N/A | 96.5% |
| 2000 | N/A | 97% |
| 2001 | 96.5% | 96.8% |
| 2002 | 96.5% | |
| 2003 | 97% | |

Data Definition: The allowance accuracy rate is the estimated percentage of initial disability allowances that do not have to be returned to the DDSs for development of additional documentation or correction of the disability determination.

Data Source: Annual Disability Quality Assurance Reports

Performance Indicator: DDS **Net** allowance accuracy rate (Effective FY 2002)

| Year | Goal | Actual |
|------|------|--------|
| 1998 | N/A | 97.9% |
| 1999 | N/A | 98.0% |
| 2000 | N/A | 98.4% |
| 2001 | N/A | 98.3% |
| 2002 | 98% | |
| 2003 | 98% | |

Data Definition: The net allowance accuracy rate is the estimated percentage of initial disability allowances that 1) do not have to be returned to the DDSs for development of additional documentation or correction of the disability determination, or 2) after having been returned to the DDSs for additional documentation are still allowances.

Data Source: Annual Disability Quality Assurance Reports

Key Performance Indicator: DDS denial performance accuracy rate

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | N/A | 92.3% |
| 1999 | N/A | 93% |
| 2000 | N/A | 92.4% |
| 2001 | 93.5% | 92% |
| 2002 | 93.5% | |
| 2003 | 93.5% | |

Data Definition: The denial accuracy rate is the estimated percentage of initial disability denials that do not have to be returned to the DDSs for development of additional documentation or correction of the disability determination. **Data Source:** Annual Disability Quality Assurance Reports

Key Performance Indicator: DDS **Net** denial accuracy rate (Effective FY 2002)

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | N/A | 95.35 |
| 1999 | N/A | 95.8% |
| 2000 | N/A | 95.2% |
| 2001 | N/A | 94.7% |
| 2002 | 96.2% | |
| 2003 | 96.2% | |

Data Definition: The net denial accuracy rate is the estimated percentage of initial disability denials that: 1) do not have to be returned to the DDSs for development of additional documentation or correction of the disability decision, or 2) after having been returned to the DDSs for additional documentation are still denials.

Data Source: Annual Disability Quality Assurance Reports

Performance Indicator: Implement activities necessary to have the software and infrastructure in place for electronic processing of disability claims

FY 2002 Goal:

- 1. Develop rules for a paperless business process, requirements/infrastructure for the electronic folder (EF) and requirements to interface the EF with the legacy systems used to process disability claims
- 2. Develop requirements and a systems solution for the OHA case processing system
- 3. Develop a strategy for electronic forms and integration with the EF and procure a tool
- 4. Establish policies/procedures for electronic signatures (internal and external requirements) and the policies necessary to make the EF the official Agency record
- 5. Develop infrastructure for electronic medical evidence and integration with the EF

Data Definition: Develop the requirements and strategy for implementing a paperless disability process, with an electronic folder

FY 2003 Goal:

- 1. Procure hardware/software for paperless business process infrastructure
- 2. Enhance the front end interview process to support all types of disability claims
- 3. Prepare Statements of Work for DDS Legacy system vendors to interface with the EF and support paperless claims processing
- 4. Develop training plans/materials and procedures to implement the paperless business process

Data Definition: Develop and implement the fully paperless disability process

Data Source (both): Office of Systems 5-Year Plans

A6. Strategic Objective: Improve the accuracy, timeliness, and efficiency of service to people requesting hearings or appeals. Specifically by 2005:

- Increase current levels of accuracy of hearings decisions to 90 percent;
- Issue hearings decisions in an average of 166 days, with at least 70 percent issued within 180 days;
- Increase productivity to 122 hearings decisions issued per WY;
- Have the capacity to take 99 percent of hearings requests in an electronic environment;
- Issue decisions on appeals of hearings within an average of 90 days, with at least 70 percent issued within 105 days; and
- Increase productivity to 323 Appeals Council reviews per WY

Means and Strategies: See Part V, page 40 for a discussion of the means and strategies for this Objective. See Verification and Validation, appendix G, pages 161-163 explaining how SSA has addressed the Office of the Inspector General's comments regarding the Hearings Office Tracking System (HOTS).

Performance Indicators and Goals:

Performance Indicator: Percent of hearing decisions issued within 180 days from the date the request is filed

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 26% |
| 2000 | N/A | 28.4% |
| 2001 | 20% | 19.4% |
| 2002 | 20% | |
| 2003 | 22% | |

Data Definition: Beginning FY 2001, this new performance indicator represents the actual percent of Medicare and SSA case dispositions issued during the particular report period in which the elapsed time from the date of the request for hearing to the disposition date was 180 days or less. (This measure does not include the time required by field offices, program service centers, or the Office of Central Operations to process favorable decisions.)

Data Source: Actual performance is reported in the OHA Monthly Activity Report (MAR), derived from the Hearings Office Tracking System (HOTS).

Key Performance Indicator: Hearings average processing time (days)

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 338 | 341 |
| 1999 | 313 | 316 |
| 2000 | 257 | 297 |
| 2001 | 271 | 308 |
| 2002 | 330 | |
| 2003 | 330 | |

Data Definition: Beginning FY 2000, this indicator was redefined (from the one included in the FY 1999 APP) to represent the average elapsed time from the hearing request date until the date of the notice of decision, for the hearings level cases processed during all months of the year. The FY 1998 data reflects the average elapsed time of hearings level cases processed only in the last month of the FY (September). The data shown for FY 1999 is a yearly average.

Data Source: OHA Monthly Activity Reports and the HOTS

Key Performance Indicator: OHA decisional accuracy rate

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 85% | 87% |
| 1999 | 85% | 88% |
| 2000 | 87% | 88% |
| 2001 | 88% | |
| 2002 | 89% | |
| 2003 | 90% | |

Data Definition: The decisional accuracy of hearings is the percent of disability hearing decisions—both favorable and unfavorable—supported by "substantial evidence." This is the standard used by the Federal Courts to evaluate accuracy of decisions, and by the Appeals Council in determining which hearing decisions to review.

Data Source: Annual Disability Hearings Quality Review Process Peer Review Reports

Performance Indicator: Implement activities necessary to have the software and infrastructure in place for electronic processing of hearings and appeals

FY 2002 Goal:

- 1. MSSICS will support field office entry of requests for hearings and appeals; and
- 2. Provide web-based query access to the Consolidated Hearings Office Tracking Systems (HOTS) database, which includes the request for hearing.

Data Definition:

Goal 1: This goal will be met if we develop, test, validate and implement Title XVI Appeals.

Goal 2: This goal will be met if we develop, test, validate, and implement access to the Consolidated HOTS Ouery.

Data Source: Office of Systems 5-Year Plans

FY 2003 Goal: Migrate OHA applications to SSA's programmatic architecture

Data Definition: This goal will have been met if the software and databases replacing OHA's legacy dBASE

applications has been designed, developed, validated and implemented.

Data Source: Office of Systems APPEALS Plan

Performance Indicator: Number of hearings cases processed per workyear

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 98 |
| 2000 | N/A | 97 |
| 2001 | 103 | 87 |
| 2002 | 91 | |
| 2003 | 102 | |

Data Definition: This indicator was revised effective FY 2001 to represent the average number of hearings cases processed per "direct" workyear expended. A direct workyear represents actual time spent processing cases. It does not include time spent on training, ALJ travel, leave, holiday, etc.

Data Source: OHA Monthly Activity Reports and the HOTS

Performance Indicator: Percent of decisions on appeals of hearings issued by the Appeals Council within 105 days of the appeals filing date

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | N/A |
| 2000 | N/A | N/A |
| 2001 | 20% | 12.2% |
| 2002 | 35% | |
| 2003 | 40% | |

Data Definition: Effective FY 2001, this performance indicator represents the actual percent of case dispositions issued during the report period in which the elapsed time from the date of the request for review to the disposition date was 105 days or less.

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

Performance Indicator: Average processing time for decisions on appeals of hearings issued (days)

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 458 |
| 2000 | N/A | 505 |
| 2001 | 285 | 447 |
| 2002 | 285 | |
| 2003 | 144 | |

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

Data Source: Actual processing time for each case is maintained by the ACAPS. Percentages will be calculated from information extrapolated from ACAPS.

Performance Indicator: Number of decisions on appeals of hearings issued per workyear

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 231 |
| 2000 | N/A | 284 |
| 2001 | 262 | 241 |
| 2002 | 279 | |
| 2003 | 287 | |

Data Definition: Effective FY 2001, this indicator represents the average number of decisions on appeals of hearings processed per "direct" workyear expended. A direct workyear represents actual time spent processing cases. It does not include time spent on training, leave, holiday, etc. Decisions on appeals of hearings exclude decisions on new court cases, court remands, and quality assurance reviews.

Data Source: Appeals Council Case Control System and Appeals Council Automated Processing System

A7. Strategic Objective: By 2007, increase by 100 percent from 1999 levels, the number of SSDI and SSI disability beneficiaries who achieve steady employment and no longer receive cash benefits

Means and Strategies: See Part V, page 41 for the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent increase in the number of DI adult worker beneficiaries entering an Extended Period of Eligibility (EPE) due to earnings from work.

| Year | Goal | Actual | Estimate |
|------|--------|--------|----------|
| 1999 | N/A | 9,773 | |
| | | Base | |
| 2000 | N/A | 10,712 | |
| 2001 | N/A | 10,024 | |
| 2002 | | | 5% |
| | | | 10,525 |
| 2003 | 10% | | |
| | 11,578 | | |

Data Definition: Beginning FY 2003, we have moved to an evolved interim indicator from the prior indicator: "Percent increase in the number of beneficiaries who begin a trial work period. This new EPE measure will be in use until about FY 2006, when a new long-term indicator will be available.

Data Source: Master Beneficiary Record

Key Performance Indicator: Percent increase in the number of SSI disabled beneficiaries earning at least \$700 per month, whose payments are eliminated because of work (1619(b) status)

| Year | Goal | Actual | Estimate |
|------|--------|--------|----------|
| 1999 | N/A | 68,358 | |
| | | Base | |
| 2000 | N/A | 81,654 | |
| 2001 | N/A | 76,036 | |
| 2002 | | | 5% |
| | | | 79,838 |
| 2003 | 10% | | |
| | 87,822 | | |

Data Definition:

Beginning FY 2003, our goal will be for 10 percent annual increases in the number of working SSI disabled beneficiaries participating in 1619(b) and earning at least \$700 per month. In years prior to FY 2003, the indicator represented the annual percentage increases in the number of SSI disabled beneficiaries participating in 1619(a). This performance indicator is an interim measure that will later be replaced with the long-term indicator: "Percent increase in the number of SSI disabled beneficiaries, age 18-64, who no longer receive cash benefits and have earnings over the substantial gainful activity level."

Data Source: "SSI Disabled Recipients Who Work" report

Performance Indicator: Activities to implement provisions of the Ticket-to-Work and Self-Sufficiency Program (TWSSP) and other employment strategies

FY 2002 Goal:

- 1. Begin payments to Employment Networks
- 2. Distribute Tickets to beneficiaries in Phase 1 States

FY 2003 Goal:

- 1. Continue to broaden the availability of work incentives specialists to disability beneficiaries nationwide
- 2. Distribute Tickets to beneficiaries in remaining Phase 2 and 3 States

Data Definition: This indicator represents the milestones in implementing provisions of the TWSSP and other employment strategies.

Data Source: New data system being developed to allow SSA to administer the Ticket-to-Work program

Long-Term Indicator: Percent increase in the number of DI beneficiaries whose benefits are suspended or terminated due to substantial gainful activity

Long-term FY 2007 Goal: 100 percent increase over FY 1999 baseline

Data Definition: This long-term indicator will represent the increase over the FY 1999 baseline in the number of Title II beneficiaries whose benefits are suspended or terminated due to substantial gainful activity.

Data Source: Master Beneficiary Record

Long-Term Indicator: Percent increase in the number of SSI disabled beneficiaries, aged 18-64, who no longer receive cash benefits and have earnings over the substantial gainful activity level

Long-term FY 2007 Goal: 100 percent increase over FY 1999 baseline

Data Definition: This indicator represents the percent increase over the FY 1999 baseline in the number of Title XVI beneficiaries whose benefits are suspended or terminated due to work activity.

Data Source: "SSI Recipients who Work" report

A8. Strategic Objective: Improve or maintain the accuracy, timeliness, and efficiency of processing postentitlement events. Specifically by 2005: have the capacity to take and process 99 percent of PE actions in a paperless environment

Means and Strategies: This objective for postentitlement (PE) processing deals primarily with the development of software that will create the environment to potentially process 99 percent of PE items in a paperless environment. While we are not changing the objective in this APP, we are changing performance indicators to reflect more outcome oriented goals that address actual usage of software. As we put the new software in place, our focus will shift to ensuring that our employees make full use of the automated processes. This will involve training, transition of existing records into the new system, and increased management attention. It should be noted that there are barriers to getting to a 99 percent usage rate, including the cost of inputting the existing records into the new system, and the continuing existence of a small percentage of exclusions in the new software. Our usage of the SSI PE application is constrained by the fact that only 55 percent of our SSI records are currently in the modernized environment. By 2005, however, we do expect to attain a 92 percent automation rate.

Performance Indicator: OASDI Postentitlement automation rate

| Year | Goal | Actual |
|------|------|--------|
| 2002 | 89% | |
| 2003 | 90% | |

FY 2002 Data Definition: The OASDI PE automation rate is the percentage of total OASDI PE transactions that do not create an exception or alert.

Performance Indicator: SSI Postentitlement automation rate

| Year | Goal | Actual |
|------|------|--------|
| 2002 | 68% | |
| 2003 | 76% | |

Data Definition: The SSI PE automation usage is the percentage of SSI PE transactions completed using modernized software compared to all SSI transactions.

Data Source (for both indicators): Office of Systems Information Technology Plans, Office of Systems Management Information

A9. Strategic Objective: Maintain through 2005 the accuracy, timeliness, and efficiency of service to people applying for Social Security numbers and replacement cards

Means and Strategies: Our strategy is to continue this level of service. We are examining the enumeration process to determine how best to balance our commitment to assign numbers quickly and efficiently, with our commitment to ensure the integrity of the SSN. We are implementing fraud safeguards in our SSN process. Based on certain criteria, or when our automated safeguard mechanisms require it, issuance of a Social Security card will be delayed until verification of the documents submitted as evidence are verified by the issuing agency. This verification time may impact our ability to meet our timeliness performance goal, but is an important part of our plan to reduce SSN fraud.

This Objective and its performance indicators help us measure our success with the Major Management Challenge: "Social Security Number Misuse and Privacy Concerns". See Part VII, pages 118-119. Significant increases in identity theft and fraudulent applications for/use of SSNs mean that we will have to diligently use our current anti-fraud processes. We also need to look for new procedures, systems, and tools to ensure the integrity of our SSN process in the future.

We are working with the Immigration and Naturalization Service and the Department of State to implement the Enumeration-at-Entry program. This new process will enable citizens to apply for an SSN as part of the immigration process, saving both us and the public time and effort.

Performance Indicators and Goals:

Performance Indicator: Percent of original and replacement SSN cards issued within 5 days of receiving all necessary documentation

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 97% | 99.7% |
| 1999 | 97% | 99% |
| 2000 | 97% | 99.7% |
| 2001 | 97% | 99.1% |
| 2002 | 97% | |
| 2003 | 97% | |

Data Definition: This percent is the number of original and replacement SSNs issued within 5 days of the date the field office receives all required documentation, divided by the total number of requests. The issuance date is defined as the date of the systems run that assigns the SSN. The data excludes SSNs assigned via the Enumeration-at-Birth process.

Data Source: Field Office Social Security Number Enumeration Report

Performance Indicator: Percent of SSNs issued accurately

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | 99.8% | 99.8% |
| 1999 | 99.8% | 99.8% |
| 2000 | 99.8% | 99.7% |
| 2001 | 99.8% | |
| 2002 | 99.8% | |
| 2003 | 99.8% | |

Data Definition: The percent of SSNs issued accurately is based on an annual review of a sample of approximately 2,000 SSN applications to verify that the applicant has not been issued an SSN that belongs to someone else, or that multiple SSNs assigned to the same applicant have been cross-referred. The data excludes SSNs assigned via the Enumeration-at-Birth process and major errors identified by the Office of Quality Assurance that do not result in an SSN card being issued erroneously.

Data Source: Enumeration Process Quality Review Report

B. Strategic Goal: To ensure the integrity of Social Security programs, with zero tolerance for fraud and abuse

B1. Strategic Objective: Beginning 2002 and through 2005, maintain at 99.8 percent the overpayment and underpayment accuracy based on non-medical factors of eligibility of OASDI payment outlays

<u>Means and Strategies:</u> See Part V, page 43-44 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent of OASDI payment outlays "free" of overpayments and underpayments (based on non-medical factors of eligibility)

Percent free of overpayments

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | 99.8% | 99.9% |
| 1999 | 99.8% | 99.8% |
| 2000 | 99.8% | 99.9% |
| 2001 | 99.7% | N/A |
| 2002 | 99.8% | |
| 2003 | 99.8% | |

Percent free of underpayments

| i ci cent ii ce oi unuci payments | | |
|-----------------------------------|-------|--------|
| Year | Goal | Actual |
| 1998 | 99.8% | 99.9% |
| 1999 | 99.8% | 99.9% |
| 2000 | 99.8% | 99.9% |
| 2001 | 99.8% | N/A |
| 2002 | 99.8% | |
| 2003 | 99.8% | |

Data Definition: Stewardship accuracy is divided into accuracy for payment dollars without overpayments and accuracy for payment dollars without underpayments. The overpayment accuracy is computed by subtracting the overpayment dollars paid for the FY from the dollars paid and dividing the remainder by the dollars paid ((dollars paid – o/p dollars)/dollars paid). This error rate is subtracted from 100 percent to attain the accuracy rate. Similarly, the underpayment accuracy is computed by subtracting the underpayment dollars paid for the FY from the dollars paid and dividing the remainder by the dollars paid ((dollars paid – u/p dollars)/dollars paid). This error rate is subtracted from 100 percent to attain the accuracy rate. Prior to FY 2001, the accuracy of only OASI outlays was included. Effective FY 2001, the non-medical accuracy of DI outlays was added to the measure. The General Accounting Office raised a concern that combining payment accuracy data from the OASI and the DI programs may affect SSA's ability to sufficiently monitor and manage performance. While the Annual Performance Report combines data from these two programs, stewardship reports continue to include the accuracy of OASI and DI payment outlays separately. We still have data available to discretely monitor and manage performance in both the OASI and the DI programs. For our monitoring and management purposes, there is no danger that the accuracy of each of these programs will be obscured by the GPRA reporting of the combined goal.

Data Source: OASDI Stewardship Report. Neither actual nor estimated data are available for FY 2001. The FY 2003 actual performance data will not be available for reporting in the FY 2003 Annual Performance Report (APR) because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 APR.

B2. Strategic Objective: By 2005, raise to 96 percent the overpayment accuracy based on non-medical factors of eligibility of SSI disabled and aged payment outlays

Means and Strategies: See Part V, pages 45 - 47, for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: SSI overpayment and underpayment accuracy rates **including both preventable and unpreventable errors** (based on non–medical factors of eligibility)

Overpayment accuracy rate

| Year | Goal | Actual |
|------|-------|--------|
| 1999 | N/A | 94.3% |
| 2000 | N/A | 93.6% |
| 2001 | 94.7% | N/A |
| 2002 | 94.0% | |
| 2003 | 94.7% | |

Underpayment accuracy rate

| Year | Goal | Actual |
|------|-------|--------|
| 1999 | N/A | 98.3% |
| 2000 | N/A | 98.6% |
| 2001 | 98.8% | N/A |
| 2002 | 98.8% | |
| 2003 | 98.8% | |

Key Performance Indicator: SSI overpayment and underpayment accuracy rates **excluding unpreventable errors** (based on non–medical factors of eligibility)

Overpayment accuracy rate

| o ver puly meeting rule | | |
|-------------------------|-------|--------|
| Year | Goal | Actual |
| 1999 | N/A | 94.9% |
| 2000 | N/A | 94.7% |
| 2001 | N/A | N/A |
| 2002 | 94.7% | |
| 2003 | 95.4% | |

Underpayment accuracy rate

| Year | Goal | Actual |
|------|-------|--------|
| 1999 | N/A | 98.4% |
| 2000 | N/A | 98.6% |
| 2001 | N/A | N/A |
| 2002 | 98.8% | |
| 2003 | 98.8% | |

Data Definitions: The SSI payment accuracy rate *including both preventable and unpreventable* errors is determined by an annual review of a statistically valid sample of the beneficiary rolls. Separate rates are determined

for the accuracy of payments with overpayment dollars and the accuracy of payments with underpayment dollars. The rates are computed by first subtracting the total amount of incorrect payments from the dollars overpaid or underpaid in a fiscal year, and then dividing these dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. The current measuring system captures the accuracy rate of the non-medical aspects of eligibility for SSI payment outlays.

The SSI payment accuracy rate *excluding unpreventable errors* is determined by an annual review of a statistically valid sample of the beneficiary rolls. Separate rates are determined for the accuracy of payments with overpayment dollars and the accuracy of payments with underpayment dollars. The rates are computed by first subtracting the amount of "unpreventable" incorrect payments from the dollars overpaid or underpaid in a fiscal year, and then dividing these dollars by the total dollars paid for the fiscal year. This percentage is subtracted from 100 percent to attain the accuracy rate. The current measuring system captures the accuracy rate of the non-medical aspects of eligibility for SSI payment outlays.

Data Source: SSI Stewardship report. Neither actual nor estimated data are available for FY 2001. The FY 2003 actual performance data will not be available for reporting in the FY 2003 Annual Performance Report (APR) because of the length of time required to gather, validate and analyze the data, and then prepare the final report. These data will be reported in the FY 2004 APR.

B3. Strategic Objective: To become current with DI and SSI CDR requirements by FY 2002 and remain current thereafter

Means and Strategies: See Part V, pages 48-49 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent of multi-year CDR Plan completed through FY 2002

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 26% | 27.7% |
| 1999 | 44% | 45.9% |
| 2000 | 63% | 68.8% |
| 2001 | 86% | 86.1% |
| 2002 | 100% | |
| 2003 | N/A | |

Data Definition: To achieve this goal in FY 2002, SSA must conduct nearly 1.4 million CDRs. This measure is derived by dividing the cumulative number of CDRs SSA processed from FY 1996, the first year of the CDR multi-year plan, through the current fiscal year, by the total number of CDRs SSA has committed to processing through FY 2002 according to its most recent multi-year CDR plan. This indicator will be discontinued for FY 2003 because the multi-year plan will be completed in FY 2002.

Data Source: National DDS System: SSR, MBR, CDR Control File

Key Performance Indicator: Percent of CDRs completed when due and selectable beginning in FY 2003

FY 2003 Goal: Maintain 100 percent CDR currency

Data Definition: "Maintain 100 percent CDR currency" is defined as: all CDRs due and selectable will be initiated and, on average, completed to an initial administrative action within the processing timeframes of 6 months from the selection date for mailer deferrals, 12 months for full medical reviews, or 18 months for mailers that become full medical reviews. Initial administrative action includes: CDR mailer deferral, initial full CDR continuance determination, initial full CDR cessation determination, and/or administrative closure (screen out or no decision following initiation). Maintaining currency is dependent upon sufficient funding to finance initial administrative actions.

Data Source: Disability management information (Measurement tool, TBD) and methodology

Note: Because the multi-year CDR plan will be completed in FY 2002, this new indicator was developed to assure that we remain current with CDR processing.

B4. Strategic Objective: Maintain timeliness and improve accuracy and efficiency in posting earnings data to Agency records. Specifically by 2005, increase to 70 percent the number of employee reports (W-2s) filed electronically

Means and Strategies: See Part V, pages 50-51 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Performance Indicator: Percent of wage items posted to individuals' records by September 30

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 98% | 98.5% |
| 1999 | 98% | 92.9% |
| 2000 | 98% | 98.9% |
| 2001 | 98% | 99% |
| 2002 | 98% | |
| 2003 | 98% | |

Data Definition: The percent is the number of prior tax year wage items posted by the end of September, divided by the number of prior tax year wage items posted by the end of the processing year (mid-January). Wage items include W-2s, tips, earnings in excess of taxable maximum wages, etc.

Note: Tracking throughout the year is based on estimates of potential receipts, compared to actual items processed by the posting system. The actual performance reported in SSA's Annual Performance and Accountability Report is based on the updated estimates compared to the actual items processed. Each year, once all known earnings reports have been received, performance is recalculated based on actual data and shown in the subsequent Annual Performance Plan. For this reason, the actual FY 2001 performance for this measure has now been updated based on the recalculation using actual data.

Data Source: Earnings Posted Overall Cross Total/Year-to-Date System (EPOXY)

Performance Indicator: Percent of earnings posted correctly

| Year | Goal | Actual |
|------|------|--------|
| 1998 | 99% | 99% |
| 1999 | 99% | 99% |
| 2000 | 99% | 99% |
| 2001 | 99% | 99% |
| 2002 | 99% | |
| 2003 | 99% | |

Data Definition: This is the percent of earnings that SSA is able to post to individuals' records based on a match to a valid name/SSN and the Agency's records. In addition, it reflects the results of a quality assurance review of the accuracy of earnings posted. The computation of this rate is the total earnings processed correctly to individuals' earnings records and Agency records for a tax year, divided by the total earnings reported to SSA for that tax year.

Data Source: Earnings Posted Overall Cross Total/Year-to-Date System (EPOXY) and a quality assurance review of the accuracy of posting received reports

Key Performance Indicator: Percent of employee reports (W-2s) filed electronically

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 6.6% |
| 2000 | N/A | 18.4% |
| 2001 | 20% | 27% |
| 2002 | 30% | |
| 2003 | 48% | |

Data Definition: This percent is the number of W-2s filed electronically and processed to completion for a tax year, divided by the total number of W-2s for that tax year processed to completion by the end of the processing year (mid-January).

Data Source: Earnings Management Information Operational Data Store (EMODS) reports

Note: The SSN Validation System (SSNVS) will provide employers with the capability to validate employees names and SSNs, and is expected to substantially reduce the incorrect name/SSN presentation on Forms W2 submitted to SSA. This should result in a reduction in the growth of the Earnings Suspense File.

B5. Strategic Objective: Through 2005, maintain a level of outstanding debt that is either in a repayment agreement, under appeal, or newly detected

Means and Strategies: Our first step to achieving this Objective was to develop a new system for categorizing and measuring OASDI and SSI debt according to four defined categories (debt in collection, under current appeal, newly detected and debt not being collected). The four categories are also further broken out into more definitive sub-categories, such as inactive debts due to a lapsed repayment agreement. To create a performance goal, we will use this new system to develop a historical recreation of the data that shows how much debt falls into each category. We have been able to create the historical baseline data for OASDI and are still working on it for SSI. This new system will also permit us to identify debts (in the aggregate or individually) that are not being collected and make informed decisions on where resources should be concentrated. Since this is a new measurement device, we have established goals for FYs 2002 and 2003 that maintain current levels of performance. As we gain experience with this new measurement tool and make use of its analytical capabilities, we expect we will establish future goals that reflect improvements in our debt management performance.

Performance Indicators and Goals:

Performance Indicator: Outstanding OASDI debt **NOT** in a collection arrangement (excluding due process)

| Year | Goal | Actual |
|------|------|--------|
| 1998 | N/A | 48% |
| 1999 | N/A | 47% |
| 2000 | N/A | 47% |
| 2001 | N/A | 46% |
| 2002 | 47% | |
| 2003 | 47% | |

Data Definition: There are four categories of debt: debts in repayment agreement, debts under appeal, newly detected debts, and debts not being collected. This indicator measures the percent of OASDI debt not being collected out of the universe of all OASDI debt.

Data Source: The Recovery of Overpayments, Accounting and Reporting (ROAR) system

Performance Indicator: Outstanding SSI debt **NOT** in a collection arrangement (excluding due process)

| Year | Goal | Actual |
|------|------|--------|
| 2002 | 43% | |
| 2003 | 43% | |

Data Definition: There are four categories of debt: debts in repayment agreement, debts under appeal, newly detected debts, and debts not being collected. This indicator measures the percent of SSI debt not being collected out of the universe of all SSI debt.

Data Source: The Supplemental Security Record (SSR)

Note: Unlike OASDI, we have not yet developed a historical baseline. Accordingly, the goal has been established based upon limited baseline information.

B6. Strategic Objective: Aggressively deter, identify, and resolve fraud

Means and Strategies: See Part V, pages 52 - 54, for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Performance Indicator: Number of investigations conducted (i.e., closed)

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | N/A | 5,448 |
| 1999 | 5,700 | 7,308 |
| 2000 | 7,600 | 8,051 |
| 2001 | 8,000 | 9,636 |
| 2002 | 8,000 | |
| 2003 | 9,200 | |

Data Definition: Investigations result from allegations that have sufficient information or potential risk to warrant further review or action by a criminal investigator. Investigations are counted as "conducted" when all OIG actions have been completed, i.e., the investigator has presented the facts of the case to a prosecutor or has determined that further action is not warranted due to lack of investigative leads.

Data Source: Allegation and Case Investigative System (ACIS)

Key Performance Indicator: OASDI dollar amounts reported from investigative activities

Amounts shown in millions of dollars

| Year | Goal | Actual |
|------|------|--------|
| 1999 | \$17 | \$45 |
| 2000 | \$40 | \$46 |
| 2001 | \$55 | \$86 |
| 2002 | \$55 | |
| 2003 | \$60 | |

Data Definition: These amounts are OASDI dollars from penalties, assessments, savings, recoveries and restitutions related to investigative activities that are reported by OIG field divisions and included in the OIG semi-annual reports. Beginning in FY 1999, dollar amounts reported are segregated by program.

Data Source: Allegation and Case Investigative System (ACIS)

Key Performance Indicator: SSI dollar amounts reported from investigative activities

Amounts shown in millions of dollars

| Year | Goal | Actual |
|------|-------|--------|
| 1999 | \$18 | \$140 |
| 2000 | \$80 | \$128 |
| 2001 | \$90 | \$129 |
| 2002 | \$100 | |
| 2003 | \$120 | |

Data Definition: These amounts are SSI dollars from penalties, assessments, savings, recoveries and restitutions related to investigative activities that are reported by OIG field divisions and included in the OIG semi-annual reports. Beginning FY 1999, dollar amounts reported are segregated by program.

Data Source: Allegation and Case Investigative System (ACIS)

Performance Indicator: Number of judicial actions reported

| Year | Goal | Actual |
|------|-------|--------|
| 1998 | | 2,762 |
| 1999 | 1,800 | 3,139 |
| 2000 | 2,000 | 2,603 |
| 2001 | 2,500 | 4,300 |
| 2002 | 2,500 | |
| 2003 | 3,500 | |

Data Definition: Effective with FY 2002, this performance indicator language was changed from "number of criminal convictions conducted" to "number of judicial actions reported". The reason for the change is that the actions actually counted in this universe included actions that were broader than the legal definition of a criminal conviction. The change in performance indicator language is a change to clarify the performance measure. Data previously reported remain unchanged. A judicial action is any event during the criminal justice process that causes an individual suspected of committing a crime to be arrested for the crime, or to appear before a judge to enter a plea of guilty, or to face trial before a judge or jury.

Data Source: Allegation and Case Investigative System (ACIS)

C. Strategic Goal: To strengthen public understanding of Social Security programs

C1. Strategic Objective: By 2005, 9 out of 10 Americans (adults age 18 and over) will be knowledgeable about Social Security programs in three important areas:

- Basic program facts;
- Value of Social Security programs; and
- Financing Social Security programs

Means and Strategies: See Part V, pages 55-57 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Percent of public who are knowledgeable about Social Security issues

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | 55% |
| 2000 | 65% | 75% |
| 2001 | 75% | 78% |
| 2002 | 78% | |
| 2003 | 78% | |

Data Definition: This is the percent of Americans (adults age 18 and over) determined as "knowledgeable" in the annual PUMS Survey.

Data Source: Annual public survey of adults age 18 and over

Performance Indicator: Percent of individuals issued SSA-initiated Social Security Statements as required by law

| Year | Goal | Actual |
|------|------|--------|
| 1998 | N/A | 100% |
| 1999 | 100% | 100% |
| 2000 | 100% | 100% |
| 2001 | 100% | 100% |
| 2002 | 100% | |
| 2003 | 100% | |

Data Definition: Self-explanatory. As required by law, in FY 2000 SSA began to issue annual Social Security Statements to all eligible workers age 25 and over. We estimate that we will issue 136 million statements in FY 2003 to meet this requirement, including statements issued upon request.

Data Source: Social Security Statement Weekly Summary Report found on the Executive and Management Information System (EMIS)

D. Strategic Goal: To be an employer that values and invests in each employee

D1. Strategic Objective: To recruit, develop, and retain a diverse well qualified workforce with the capacity to perform effectively in a changing future environment. Specifically, by 2005:

- Develop and implement innovative tools and techniques for recruitment and hiring;
- Use authorized flexibilities to attract and retain a highly qualified and diverse workforce; and
- Continue to enhance quality of worklife opportunities for all employees

Means and Strategies: See Part V, pages 58-59 for the means and strategies for this Objective.

Performance Indicators and Goals:

Performance Indicator: Increase the retention rate of new hires

FY 2002 Goal: Establish a baseline retention rate of new hires by September 2002

Data Definition: This percent is the number of employees hired in a specific year and who then leave SSA within 3 years, divided by the total number of employees hired during that same year.

FY 2003 Goal: Increase the retention rate through the use of competency-based tools

Data Definition: We will have met this goal if we demonstrate an improvement in the retention rate of new hires due to the use of competency-based tools, exclusive of environmental or non-controllable factors.

Data Source: Human Resources Management Information System. The study began in FY 2001 and entails identifying new hires, surveying those who left during the first 3 years, and also surveying their supervisors. We will ask them about their reasons for leaving SSA. The new hires that stayed with SSA will also be surveyed. This study will be completed in FY 2002.

Key Performance Indicator: Continue to implement the SSA Future Workforce Plan

FY 2002 Goal: Implement actions by target dates specified in the Agency's Future Workforce Plan, including the following significant actions:

- 1. Establish and implement procedures for repaying student loans as a means to recruit and retain employees in hard-to-fill positions;
- 2. Develop and produce new recruitment materials; and
- 3. Enhance leadership competencies for one-third of SSA supervisors and managers.

Data Definitions:

Goal 1: Self-explanatory

Goal 2: This goal will be met if we develop and produce new recruitment materials for 3 major SSA occupations.

Goal 3: This goal will be met if we provide training on leadership competencies to one-third of SSA's supervisors and managers.

FY 2003 Goal: Implement actions by target dates specified in the Agency's Future Workforce Plan, including the following significant actions:

- 1. Enhance Agency recruiters' ability to use effective marketing and recruiting techniques for attracting new employees
- 2. Enhance leadership competencies for one-third of SSA supervisors and managers

Data Definitions:

Goal 1: This goal will be met if we develop and deliver training to agency recruiters on effective marketing and recruiting techniques.

Goal 2: This goal will be met if we provide training on leadership competencies to an additional one-third of SSA supervisors and managers.

Data Source: Office of Human Resources Quarterly Tracking Report on Future Workforce Plan

D2. Strategic Objective: To provide the necessary tools, training and continuous learning opportunities to maintain a highly skilled and high-performing workforce. Specifically, by 2005:

- Provide online training electronically at the desktop to all employees;
- Have 1/3 of all employees participating in job enrichment opportunities during each year;
- Provide 70% of employees the necessary competency-based training needed to maintain technical skills each year; and
- Provide 70% of employees the competency-based tools needed to obtain training and skills needed to enhance their job performance and develop their careers

Means and Strategies: To achieve this Objective, the following major activities are planned:

Comprehensive skills assessment tool: We have completed the development of a competency model that will help employees assess their current level of proficiency against core competencies. In 2002 and 2003, we will pilot and train employees in the uses of the competency tools.

Enabling technology: To help employees adapt quickly to policy and systems changes and master new technologies, we will increase the number of offices with Interactive Video Teletraining (IVT). We will also implement alternative technological approaches such as Internet training, Intranet courses, closed captioning, collaborative database, and stored source video.

Training Administration/Learning Management System: In 2003, we will implement an automated training and administration system called the Learning Management System that will enable SSA to identify and develop the employee skills needed for a highly performing workforce. The purpose of this system is to provide supervisors, managers and administrative staff, training administrative specialists and employees with integrated, automated support with accurate, timely, easy-to-use data and information.

Leadership and Career Development programs: We will continue national leadership development programs, as well as staff development programs in each region and major component. We will provide opportunities for one-third of all employees to participate in a job-enrichment experience each year.

Enhanced disability program training: This program improves all facets of training for disability adjudicators.

Desktop video training: We believe implementing desktop video training is strategically important for our Agency. We are in the prototype stage, and meeting the proposed FY 2003 goal for rollout of desktop video to 33 percent of field offices is contingent upon success of the prototype and requested funding.

Performance Indicators and Goals:

Performance Indicator: Develop, test and implement desktop video nationally

FY 2002 Goal: Develop, test and implement a prototype desktop video in 5 field offices **FY 2003 Goal:** Implement desktop video and training in 33 percent of field offices if the prototype is successful and funding is available

Data Definition: We will meet this goal if we successfully develop, test and implement a prototype for desktop video in 5 of our field offices in FY 2002; and if we implement desktop video and necessary training in 33 percent of field offices in FY 2003.

Data Source: Office of Training records

Performance Indicator: Percent of offices with direct access to Interactive Video Teletraining (IVT)

| Year | Goal | Actual |
|------|------|--------|
| 1999 | N/A | N/A |
| 2000 | N/A | N/A |
| 2001 | 67% | 57.7% |
| 2002 | 76% | |
| 2003 | 98% | |

Data Definition: This goal for equipping SSA's offices with IVT has been redefined effective FY 2001. The prior goal was defined as access to IVT in offices within a 30-minute commute. The new indicator is defined as direct access to IVT in each office. Employees will receive the training they need without having to travel to other locations. The net result will be the ability to address growing individual training needs while concurrently meeting increased workload demands.

Data Source: Office of Training records

Note: We did not meet the FY 2001 goal of 67 percent of offices with direct access to IVT because the universe of offices was increased by sites not originally considered for installation, including co-located sites, resident stations, and Area offices.

Performance Indicator: Number of job enrichment opportunities in formal management development programs

FY 2002 Goal: Increase the number of openings for job enrichment opportunities in the national Advanced Leadership (ALP) and Leadership Development Programs (LDP) to 192.

Data Definition: The FY 2001 goal focused on ensuring that SSA implemented formal management development programs. The FY 2002 goal is to increase to 192 the number of opportunities that these programs provide. **Data Source:** Office of Training records

FY 2003 Goal: Continue ALP, LDP, Presidential Management Intern support and select Senior Executive Service candidate participants

Data Definition: This goal continues to focus on ensuring that SSA implements formal management and development programs.

Data Source: Office of Training Records

Performance Indicator: Define competencies for technical training and career development and make them available for employee use

FY 2002 Goal:

- 1. Define competencies for the Claims Representative, Service Representative, Benefit Authorizer, and Teleservice Representative positions
- 2. Develop a competency-based tool to enable employees to identify and obtain information they need about their training and skills development and make it available to 25,000 users

FY 2003 Goal:

- 1. Define competencies for Teleservice Center and Office of Hearings and Appeals technical training positions
- 2. Make competency-based tools available to 30,000 users

Data Definition: This goal will be met if we define competencies for specific positions and provide a tool to employees to use to identify and obtain the skills they need.

Data Source: Office of Training records

D3. Strategic Objective: To provide a physical environment that promotes the health and well-being of every employee

Means and Strategies: In response to the terrorists attacks of September 11, 2001, SSA immediately invoked the additional security needed to meet the higher alert level. Since SSA had maintained security at a high level, actions focused on adding guards to offices which did not previously have them, reinforcing existing requirements and reminding managers and employees of the steps they needed to take to ensure the security of themselves and the facility they occupied. Specific instructions included identifying visitors, inspecting packages, reporting suspicious events, revisiting and practicing security action plans and working closely with federal and local law enforcement personnel. SSA also developed procedures for actions in response to Anthrax threats and provided emergency supplies for Agency mail handlers.

We will conduct an agency-wide employee survey to set a baseline for employees' satisfaction with our overall physical environment (its accessibility, safety, security etc.). Once we have this baseline, we will set a preliminary performance target for FY 2004. We also plan to develop a process for specific issues to be communicated by any SSA office for resolution. We will continue indoor air quality, water, asbestos, and environmental health and safety (EHS) inspections and follow up with problem remediation. When problems are identified by inspections, we will communicate with and educate employees about these issues. We will provide interactive video teletraining opportunities for feedback and questions. Finally, we will provide web-based data and communication processes for health and safety programs. We will continue physical security reviews at our facilities. We will also continue to provide employee training, revised AIMS instructions, and clear policies and procedures for this critical area.

Our Space Modernization efforts include:

- Using General Services Administration (GSA) initiated building evaluation reports to identify and assess site conditions at the main complex and large field facilities;
- Using GSA's Market Survey to identify and assess site conditions for hearings and field offices;
 and
- Providing a design for ergonomic systems furniture applications and modern office space.

Our *Space Modernization* efforts can be impacted positively or negatively by:

- GSA and lessor cooperation;
- EHS laws and regulations:
- Availability of GSA funding to complete major building renovations and newly identified emergency repairs and alterations; and
- Existence of unknown and undocumented building conditions that the extend estimated completion dates.

There is a highly integrated working relationship between GSA and SSA, and any changes to GSA policy or procedures can affect the way SSA conducts its business. This is especially true for jointly funded projects where it is critical to ensure that each agency is funded in the same fiscal year for a particular project.

Performance Indicators and Goals:

Performance Indicator: Percent of employees who are satisfied with overall physical environment, i.e., it is professional, accessible, safe, and secure

FY 2002 Goal: Develop a baseline

FY 2003 Goal: N/A – The first goal will be established for FY 2004 after an initial SSA-wide employee survey provides a baseline in FY 2002.

Data Definition: Results of an employee survey will determine the level of satisfaction employees have with their overall physical environment. The computation of the satisfaction rate is the number of employees who rate SSA as a satisfactory or very satisfactory place to work, divided by the number of employees responding. **Data Source:** Biennial Market Measurement Program (MMP) Employee Survey – The MMP Employee Survey pilots continue in FY 2002. Following the pilots, the full-scale MMP Employee Survey will be done in FY 2002. Its results will be used as a baseline that should be available in FY 2002 and targets will be set biennially.

E. Strategic Goal: To promote valued, strong, and responsive Social Security programs and conduct effective policy development, research and program evaluation

SSA places a high priority on strengthening its capacity to analyze and develop policy. The Agency is therefore undertaking a thorough review of its research, evaluation, and statistical activities to assure that they are relevant, timely, and efficient. As a result of that review, some of the objectives listed below may change.

E1. Strategic Objective: Promote policy changes, based on research, evaluation and analysis that shape the OASI and DI programs in a manner that takes account of future demographic and economic challenges, provides an adequate base of economic security for workers and their dependents, and protects vulnerable populations

Means and Strategies: See Part V, pages 60-61 for a discussion of the means and strategies for this Objective.

Performance Indicators and Goals:

Key Performance Indicator: Identification, development and utilization of appropriate barometer measures for assessing the effectiveness of OASDI programs

FY 2003 Goal: Update the barometer measures and prepare analysis

Data Definition: We will consider this goal to be achieved if the Agency issues updated barometer measures with the latest available data and provides analysis of the data. These barometers will be used to help formulate and evaluate options for strengthening the programs.

Performance Indicator: Preparation of analyses and reports on demographic, economic, and international trends and their effects on OASDI programs

FY 2003 Goal: Prepare analyses on the following topics:

- The balance between benefit adequacy and individual equity;
- The relationship between Social Security and the economy:
- Work and earnings as they relate to Social Security;
- Role of pensions and wealth in providing retirement security; and
- Social Security reforms in other countries.

Data Definition: We will consider this goal to be achieved if we prepare analyses and reports as indicated under the goal.

Key Performance Indicator: Preparation of research and policy analyses necessary to assist the Administration and Congress in developing proposals to reform and modernize the OASDI programs

FY 2003 Goal: Prepare analyses on the distributional and fiscal effects of reform proposals developed by the Administration, Congress and other policymakers.

Data Definition: We will consider this goal to be achieved if we prepare analyses providing information about the effect of specific reform proposals on various populations, the long-term actuarial balance of OASDI programs and the economy of the United States.

E2. Strategic Objective: Promote policy changes based on research, evaluation and analyses that shape the SSI program in a manner that protects vulnerable populations, anticipates the evolving needs of SSI populations, and integrates SSI benefits with other benefit programs to provide a safety net for aged, blind, and disabled individuals

Means and Strategies: The following summarizes SSA's most significant activities supporting this objective for FY 2003:

<u>Identification, development, and utilization of appropriate barometer measures for the SSI program:</u>
We established a baseline for barometers that provide an indication of the efficacy of the SSI program.
We will routinely update and modify the barometer measures as new data are developed. The barometer measures include indicators of the program's role in protecting low-income populations by itself and in combination with other sources of income.

National Survey of SSI Children and Families: We are conducting a nationally representative survey of families of SSI children, which gathers information about the cost of caring for a disabled child, the uses of SSI benefits, availability of alternative sources of care and other information. This survey fills a major gap in program information and will be the basis for quantitative research on this population.

Performance Indicators and Goals:

Performance Indicator: Identification, development and utilization of barometer measures for assessing effectiveness of the SSI program

FY 2003 Goal: Update barometer measures and prepare analysis

Data Definition: We will consider this goal to be achieved if the Agency issues updated barometer measures with the latest available data and provides analysis of the data. These barometers will be used to help formulate and evaluate options for strengthening the programs.

Performance Indicator: Preparation of a report and completion of data collection on the National Survey of SSI Children and Families

FY 2003 Goal: Conduct analyses using baseline survey data on characteristics of SSI children with disabilities

Data Definition: We will consider this goal to be achieved if the Agency prepares the data files for analysis.

E3. Strategic Objective: Promote policy changes based on research, evaluation and analyses that shape the disability program in a manner that increases self-sufficiency and takes account of changing needs, based on medical, technological, demographic, job market and societal trends

Means and Strategies: The following projects support this objective:

Research design to develop techniques for validating medical listings: Our current system of determining eligibility for disability benefits is designed to ensure that persons who meet medical listings are severely disabled enough to be unable to work. The project will develop a methodology to help us evaluate and validate the listings.

<u>National Study of Health Activity (NSHA):</u> This national survey aims to assess the potential for growth in the disability rolls and to obtain a better understanding of why some persons with disabilities remain in the work force. In addition, the survey will provide current data that will be useful for a wide range of policy analyses and actuarial estimates.

<u>Alternative return-to-work strategies:</u> We are playing a key role in promoting program changes that increase the self-sufficiency of disabled beneficiaries. A State Partnership Initiative is testing the effects of providing integrated services to beneficiaries with disabilities at the State and local level. Also, several initiatives are being planned as an outgrowth of the Ticket To Work and Work Incentives Improvement Act.

<u>Youth employment strategies:</u> This initiative will consist of several strategies related to assisting youth in achieving independence. We will test various approaches to transition planning from school to work for mentally impaired and other severely disabled students.

Performance Indicators and Goals:

Performance Indicator: Preparation of a research design to develop techniques for validating medical listings

FY 2003 Goal: Report on the status of developing a validation methodology

Data Definition: Self-explanatory

Performance Indicator: Preparation of reports on results of the National Study on Health Activity

FY 2003 Goal: Report on the status of the main study data collection

Data Definition: Self-explanatory

Performance Indicator: Preparation of analyses of alternative return-to-work strategies

FY 2003 Goal: Report on the design and implementation of evaluations and demonstration projects

Data Definition: Self-explanatory

E4. Strategic Objective: Provide information for decisionmakers and others on the Social Security and Supplemental Security Income programs through objective and responsive research, evaluation, and policy development

Means and Strategies for achieving this Objective: To achieve this Objective, we are strengthening our infrastructure for research, evaluation, and policy development through the following major activities:

<u>Satisfaction survey:</u> We have developed a questionnaire to gather information from individuals and organizations about the quality of our research, analysis and evaluation products. The first survey was conducted in FY 2001. In FY 2002, we will assess the satisfaction measurement system, analyze the first measures and identify steps that will improve satisfaction with our research and analysis products. In FY 2003, we will identify improvements to the satisfaction measurement systems and award a contract for a second satisfaction survey. Subsequent surveys will be conducted periodically.

<u>Timely release of major statistical products:</u> Each fiscal year we will identify major statistical products and establish a publications schedule. The goal is to produce these products on time.

Performance Indicators and Goals:

Performance Indicator: Percent of users assigning a high rating to the quality of SSA's research and analysis products in terms of accuracy, reliability, comprehensiveness, and responsiveness

FY 2003 Goal: Identify improvements to the user satisfaction measurement system and award a contract for a second user satisfaction survey

Data Definition: This goal will be considered achieved if:

- 1. Recommendations are made for improving the satisfaction measurement system; and
- 2. A contract is awarded in FY 2003 to conduct the second round of the satisfaction survey in FY 2004.

Performance Indicator: Percent of major statistical products that are timely

FY 2003 Goal: Produce major statistical products on schedule

Data Definition: This goal will be considered achieved if the Agency identifies major statistical products, issues a schedule for the release of these publications, and produces them on schedule.