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INTERNATIONAL SOCIAL SECURITY ASSOCIATION
ASSOCIATION INTERNATIONALE DE LA SÉCURITÉ SOCIALE
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Good Practices in Social Security

Good practice in operation since: 2008

The Quick Disability Determination (QDD) and Compassionate Allowances (CAL) Initiatives

A case of the Social Security Administration

Social Security Administration
United States

Summary

The Social Security Administration's (SSA) disability workloads have grown significantly in recent years as the baby boom generation started to reach their more disability-prone years. On average, an initial application takes an average of two to three months for a decision. SSA has an obligation to provide benefits quickly to individuals whose medical conditions clearly meet our disability standards. The Quick Disability Determinations (QDD) and Compassionate Allowances (CAL) initiatives utilize computer modelling technology in a strategic manner to identify these applicants. The QDD initiative uses predictive modelling to identify cases where there is high degree of likelihood the applicant is disabled and that medical evidence is readily available. The CAL initiative uses the predictive model to identify applicants who are clearly disabled by the very nature of their disease or condition. This two-track system is now identifying about four per cent of applications for fast-track processing, thus enhancing customer service to the disabled community.

CRITERIA 1:

What was the issue/problem/challenge addressed by your good practice?

The SSA is responsible for the nation's two primary disability programs: Disability Insurance and Supplemental Security Income. Over the last five years our disability workloads have grown significantly as the baby boom generation started to reach their more disability-prone years. Each year, approximately 2.5 million people apply for Social Security disability benefits. On average, one-third of them are approved upon initial application, which takes an average of two to three months for a decision. SSA has an obligation to provide benefits quickly to individuals whose medical conditions are so serious that they clearly meet our disability standards.

CRITERIA 2:

What were the main objectives and the expected outcomes?

The primary goal of the QDD and CAL initiatives is to use technology to identify applicants whose medical conditions obviously meet our disability standards and expedite these cases through the adjudicatory process.

CRITERIA 3:

What is the innovative approach/strategy followed to achieve the objectives?

To apply for disability benefits, applicants can complete an on-line application or file electronically at their local Social Security office. Once a claimant's application is complete, SSA

field office staff electronically transfers the claim to a state Disability Determination Services (DDS) for a disability determination. At this point the claim is electronically evaluated by a sophisticated predictive model (PM) for possible inclusion in the QDD and/or CAL fast-track processes.

Cases selected for the QDD process are highly likely to receive favourable determinations based on objective medical information that can be easily and quickly obtained.

The PM rapidly searches data on the initial application, and targets certain variables such as impairment allegations, medication count, age, education, and work history. The screening tool sums the weighted variables and generates a likelihood score for the case becoming a QDD. Once the model has identified a claim as QDD, the claim is electronically marked "QDD" and routed to the state DDSs. Disability examiners and other staff evaluate the claim on an expedited basis—within the context of current disability determination rules.

The CAL initiative is designed to quickly identify cases where the claimant's medical condition is so devastating that we can assume the applicant is disabled once a valid diagnosis is confirmed. CAL cases involve diseases and other medical conditions that invariably qualify under our disability criteria known as the Listing of Impairments.

Like QDD cases, CAL cases are identified at initial application using the predictive model. CAL cases also receive expedited handling at the state DDSs. However, in contrast to QDD cases, CAL impairments are not selected based on a likelihood or probability score. Instead, conditions pre-identified as Compassionate Allowances are loaded into the model by impairment name, common synonyms, and abbreviations. When the PM identifies the name of a CAL condition on an application, the case is electronically marked "CAL" and routed to the state DDSs for expedited handling. The initial list of Compassionate Allowance conditions was developed as a result of information received at public outreach hearings, public comment on an Advance Notice of Proposed Rulemaking, comments received from the Social Security and DDS communities, and the counsel of medical and scientific experts. Fifty conditions, including pancreatic cancer, amyotrophic lateral sclerosis, and acute leukaemia, were selected for the CAL rollout. Additional information about CAL conditions and processing cases can be found below: <http://www.ssa.gov/compassionateallowances/>

To expedite the processing of CAL claims, SSA has provided disability adjudicators with impairment summaries for conditions identified as compassionate allowances. The impairment summaries:

- contain information about a disease;
- indicate the type of medical evidence needed to confirm a diagnosis; and
- suggest the Listing of Impairment criteria under which the claim might be evaluated.

CRITERIA 4:

Have the resources and inputs been used in an optimal way to implement the practice?

The QDD and CAL strategic management initiatives were implemented on top of existing SSA infrastructure using data already collected in electronic form. These initiatives are a new use for existing information, require no additional work at intake, and are basically invisible to the applicant. SSA utilized the expertise of IBM contractors in the design and development of the predictive model as well as for technical support, testing and systems integration.

CRITERIA 5:

What impact/results have been achieved so far?

In fiscal year 2008, we identified 2.6 per cent of cases for QDD processing. CAL processing started at the end of October 2008 and a refined QDD model was implemented in mid-December 2008. So far, the new PM is identifying 3.5 per cent of applications for QDD processing and nearly 4 per cent of applications for either the QDD or CAL process. This means that one out of every 25 applicants now receives expedited processing. By the end of 2012, we expect that number to rise to between 6 and 9 per cent. Although processing time data are not yet available for CAL cases, the processing time for QDD allowances is about 12 days.

CRITERIA 6:

What lessons have been learned?

We view the success of the QDD and CAL initiatives as just the beginning of our integration of technology into the disability determination process. We will continue to explore strategic uses of technology to enhance service to the American people.

CRITERIA 7:

To what extent would your good practice be appropriate for replication by other social security institutions?

The QDD and CAL initiatives are essentially "electronic triage" processes. The "electronic triage" concept could be applied by other social security organizations as long as the data provided at intake is available in electronic form. It is not appropriate for a paper process.