



SOCIAL SECURITY

The Commissioner

September 20, 2013

The Honorable Joseph R. Biden, Jr.
President of the Senate
Washington, DC 20510

Dear Mr. President:

We enclose our report on continuing disability reviews (CDR) for fiscal year (FY) 2011. In FY 2011, we completed 1,408,897 periodic CDRs to ensure that only those beneficiaries who are still disabled continue to receive monthly benefits. Of this total, we completed 345,492 full medical CDRs, slightly more than we did in FY 2010 despite the record number of initial disability claims receipts.

We prioritized the cases that were most likely to have medical improvement so that we used our limited resources on the CDRs with the best rate of return. Based on these reviews in FY 2011, we made initial determinations that benefits should be ceased in 96,012 cases, most due to medical improvements and the ability to work. Our Office of the Chief Actuary estimates that, after all appeals, we will cease paying benefits to 64,391 individuals and their eligible dependents. We estimate the present value of future benefits saved for the Old-Age, Survivors, and Disability Insurance (OASDI), Supplemental Security Income (SSI), Medicare, and Medicaid programs to be \$5.4 billion.

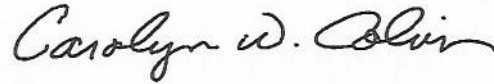
Our periodic CDR process consistently yields a favorable ratio of savings-to-costs. We estimate that the CDR process yielded a savings-to-costs ratio averaging \$10 to \$1 for FYs 1996 through 2010. For FY 2011, we estimate that the CDR process yielded a savings-to-costs ratio of \$13.2 to \$1.

The President's Budget for FY 2014 includes a special legislative proposal that would provide a dependable source of mandatory funding that would enable us to significantly expand our program integrity work, including conducting many more full medical CDRs. Based on our assessments of the return on investment from CDRs conducted in FY 2011 and earlier, we estimate that we would achieve significant additional program savings from the President's proposed investment in CDRs. Due to the current budget situation, we would be unable to increase our cost-effective program integrity work without additional funding.

If you have any questions, please do not hesitate to contact me or have your staff contact Scott Frey, our Deputy Commissioner for Legislation and Congressional Affairs, at (202) 358-6030.

I am also sending this information to the Speaker of the House of Representatives.

Sincerely,



Carolyn W. Colvin
Acting Commissioner

Enclosure

cc:

Chairman, Senate Finance Committee
Ranking Member, Senate Finance Committee
Chairman, House Ways and Means Committee
Ranking Member, House Ways, and Means Committee
Chairman, Social Security Subcommittee
Ranking Member, Social Security Subcommittee
Chairman, Senate Appropriations Committee
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SOCIAL SECURITY

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The Honorable John A. Boehner
Speaker of the House
of Representatives
Washington, DC 20515

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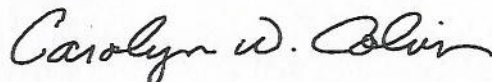
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The President's Budget for FY 2014 includes a special legislative proposal that would provide a dependable source of mandatory funding that would enable us to significantly expand our program integrity work, including conducting many more full medical CDRs. Based on our assessments of the return on investment from CDRs conducted in FY 2011 and earlier, we estimate that we would achieve significant additional program savings from the President's proposed investment in CDRs. Due to the current budget situation, we would be unable to increase our cost-effective program integrity work without additional funding.

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**Annual Report
on
Continuing Disability Reviews**



Fiscal Year 2011

ANNUAL REPORT ON CONTINUING DISABILITY REVIEWS FISCAL YEAR 2011

Overview

We perform continuing disability reviews (CDR) to determine if disabled beneficiaries still meet the medical requirements for eligibility. We conduct two types of CDRs: full medical reviews and mailers. Using computer-scoring models, we identify cases for which there is a lower likelihood of demonstrating medical improvement. In those cases, we send a questionnaire (mailer) to the beneficiary. Full medical reviews are expensive because each one requires a new medical evaluation and disability determination.

In fiscal year (FY) 2011, we spent \$409 million to complete 1,408,897 periodic CDRs. Of this total, we completed 1,063,405 mailer CDRs. We also completed 345,492 full medical reviews that resulted in 96,012 decisions to cease benefit payments, most due to medical improvement and the ability to work. Our Office of the Chief Actuary (OCAct) estimates that, after all appeals, we will cease paying benefits to 64,391 individuals, along with their eligible dependents. OCAct also estimates that the periodic CDRs completed in FY 2011 will result in a present value of \$5.4 billion in lifetime program benefits saved. For FY 2011, the estimated ratio of program savings to administrative costs is approximately \$13.2 to \$1.

Statutory Requirements

Section 221(i) of the Social Security Act (Act) requires an annual report to Congress on:

- periodic CDRs on Old-Age, Survivors, and Disability Insurance (OASDI) beneficiaries as mandated by the Social Security Disability Amendments of 1980; and
- determinations that the Commissioner of Social Security has made to waive the requirement that we review the continuing eligibility of disability beneficiaries with nonpermanent disabilities at least once every 3 years.

This report fulfills the statutory reporting requirements regarding periodic CDRs for FY 2011.

We are reporting also on periodic CDRs on Supplemental Security Income (SSI) recipients. Section 1614(a) (4) of the Act gives us discretionary authority to conduct periodic CDRs on SSI recipients. On September 28, 1994, we issued a Federal Register notice that we would begin conducting periodic SSI CDRs on October 1, 1994.

In addition, we provide: data and information on periodic CDRs in Appendix A; estimated benefit savings resulting from periodic CDRs completed in FY 2011 in Appendix B; data on CDRs initiated as the result of work and reported earnings in Appendix C; and a summary of CDR legislation in Appendix D.

The CDR Process

We conduct periodic CDRs to ensure that only those beneficiaries who remain disabled continue to receive monthly benefits. For case reviews that we initiate centrally when a medical review diary matures, we conduct periodic CDRs using one of two methods. We send some cases to the State disability determination services (DDS) for a full medical review; we complete others using the mailer process.¹

We decide whether to initiate a full medical review or send a mailer after profiling all cases to identify the likelihood of medical improvement. We send cases with a higher likelihood of medical improvement to DDSs for full medical reviews. For those cases with a lower likelihood of medical improvement, we send mailers to obtain more information from the beneficiaries, which we evaluate to determine if there is any indication of medical improvement. If we find an indication of medical improvement, we send the case to a DDS for a full medical review. Otherwise, we set a new medical review diary and schedule the case for a future CDR.

We conduct some CDRs based on events such as voluntary or third-party reports of medical improvement. We always send these CDRs to the DDSs for a full medical review. In addition, there is a subset of cases where the medical review diary matures but we curtail further development for technical reasons, such as the suspension or termination of benefits for non-medical reasons. We refer to these cases as “administrative closures.”

FY 2011 CDR Workload

In FY 2011, we completed 1,408,897 periodic CDRs, which resulted in 94,156 initial cessations and 1,856 terminations due to beneficiaries’ failure to cooperate (FTC) in the field office (FO) CDR process. Of the total 1,408,897 CDRs, we initiated 1,381,665 reviews under our centrally initiated review process. Of the 1,856 beneficiaries we terminated because of FO FTC, 1,763 were from centrally initiated CDRs and 93 from outside the centralized process. For determining cost effectiveness, we consider only those cases initiated under our centralized release process.

We released over 1.4 million CDR mailers. After reviewing profile data and the mailer responses, we completed 1,063,405 mailers. We referred the cases we could not complete under the mailer process to the DDSs for a full medical review because of an indication of medical improvement in the mailer response.² We completed 343,636 full medical CDRs. Of this total, we completed 316,497 centrally initiated reviews, 16,030 reviews initiated outside of our centralized process, and 11,109 administrative closures.

We issued initial cessation determinations for approximately 6.7 percent of the 1,381,665 centrally initiated reviews. Of the centrally released cases, we ceased benefits for 90,525 individuals due to a full medical review, and we terminated benefits in 1,763 FO FTC cases. OCA estimates that, after all appeals, these decisions will result in termination of

¹ At this time, we do not use the mailer process for SSI disabled children.

² We did not work all mailers released in FY 2011. Because of the time needed to complete a case, we worked some mailers released in FY 2010, and some mailers released in FY 2011 were pending at the end of the fiscal year. We will report these cases in future reports.

benefits for 64,391 individuals.

The table on page 4, "Periodic CDRs Processed in FY 2011," shows a breakout by program of periodic CDRs processed by mailer or full medical review, initial cessations, initial FO FTC terminations, estimated cessations after all appeals, estimated final FO FTC terminations, and estimated total final cessations and terminations after all appeals. See Appendix A for additional information on the results of periodic centrally initiated CDRs.

Section 221(i) (2) of the Act authorizes the Commissioner to waive the requirement to conduct legislatively mandated periodic CDRs on a State-by-State basis after consultation with the State DDS. A waiver in this context refers to our administrative discretion to determine the appropriate number of cases we will review on a State-by-State basis.³ We engage in ongoing communications with the State DDSs about the level of CDRs to complete. In determining the appropriate number of CDR cases to review, we consider the backlog of pending reviews, the projected number of new disability applications, the projected staffing levels in each DDS, and the availability of medical consultants and other resources. Our annual budget request, related performance documents, and annual Congressional Operating Plan outline the number of CDRs we can complete with the resources we receive. The FY 2011 budget restricted us from initiating approximately 1.3 million CDRs that were available for initiation in FY 2011 (i.e., those with a matured medical review diary).

³ 20 C.F.R. §§ 404.1590(g), 416.990(g).

Periodic CDRs Processed in FY 2011

Program involvement	CDRs Processed				CDR cessations/terminations			
	Total CDRs processed	Mailers only	Initial FO FTC terminations ^a	Full medical reviews	Cessations from full medical reviews		Estimated final FO FTC terminations	Estimated total final cessations/ terminations
					Initial cessations	Estimated after appeals		
I. Periodic CDRs								
(initiated centrally)								
Total OASDI ^b	1,035,230	889,284	690	145,256	17,112	8,362	648	9,010
OASDI Only.....	834,425	726,473	495	107,457	12,507	6,207	469	6,676
Disabled workers	764,477	666,312	469	97,696	11,655	5,735	444	6,179
Auxiliaries and survivors.....	69,948	60,161	26	9,761	852	472	25	497
Concurrent OASDI and SSI	200,805	162,811	195	37,799	4,605	2,155	179	2,334
Disabled workers	154,935	126,177	161	28,597	3,580	1,644	146	1,790
Auxiliaries and survivors.....	45,870	36,634	34	9,202	1,025	511	33	544
Total SSI Only.....	346,435	174,121	1,073	171,241	73,413	54,313	1,068	55,381
Disabled adults	207,656	174,121	75	33,460	3,169	1,224	75	1,299
Disabled children	138,779	0	998	137,781	70,244	53,089	993	54,082
Low birth weight	19,713	0	354	19,359	11,751	9,982	353	10,335
Age 18 redeterminations...	93,814	0	558	93,256	50,484	35,479	555	38,034
Other SSI children	25,252	0	86	25,166	8,009	5,628	85	5,713
Total OASDI and SSI (initiated centrally)	1,381,665	1,063,405	1,763	316,497	90,525	62,675	1,716	64,391
II. Other Periodic CDRs^c								
(not initiated centrally)	16,123	0	93	16,030	3,631	(d)	(d)	(d)
III. Administrative Closures^e.....								
	11,109	0	0	11,109	0	N/A	N/A	N/A
Total Periodic CDRs	1,408,897	1,063,405	1,856	343,636	94,156	N/A	N/A	N/A

a Beneficiaries who failed to comply with our FOs' request for necessary information during the CDR have had their eligibility for disability benefits terminated after 12 consecutive months of suspension for non-compliance. We report FTC events that occur after the reviews are underway in the full medical review column.

b OASDI program under title II of the Act.

c Other periodic CDR cases are reviews initiated for reasons other than the maturing of a medical review diary. Examples of such cases are voluntary beneficiary/recipient reports or third party reports indicating that the individual may no longer be disabled.

d Due to the unavailability of appellate information for the other periodic CDRs, we have not estimated final cessations.

e Administrative closures are cases initiated as periodic CDRs, but for which we curtailed development for technical reasons, such as the suspension or termination of benefits for other reasons, including the death of the beneficiary.

Estimated Savings

For the 64,391 final cessations resulting from centrally initiated periodic CDRs in the DDSs and FOs, we estimate:

- Over the period FY 2010-FY 2020, net benefit reductions for the OASDI, SSI, Medicare, and Medicaid programs will be about \$4.1 billion;
- The present value of future benefits saved for the OASDI, SSI, Medicare, and Medicaid programs is \$5.4 billion; and
- Savings for the 25-year and 75-year periods to be less than 0.005 percent of taxable payroll for the OASDI and Medicare programs.

We provide year-by-year estimates and estimates by program in Appendix B. These estimates do not include savings from an additional 3,631 initial DDS cessations resulting from 16,030 CDRs we did not initiate centrally, or from 93 FO terminations that resulted from FO FTCs for CDRs that we did not initiate centrally.

Cost-Effectiveness

For FY 2011, the estimated ratio of program savings to administrative costs is approximately \$13.2 to \$1. We calculate this ratio by dividing the estimated present value of total lifetime benefits saved from periodic CDR cessations, \$5.4 billion, (including OASDI, SSI, Medicare, and Medicaid savings) by the \$409 million we spent to conduct periodic CDRs in FY 2011. However, we consider this an approximation of the actual savings-to-cost ratio, because the actual administrative costs associated with these savings will differ somewhat from the FY 2011 administrative expenditures on CDRs. For example, actual costs would include costs of appeals completed after FY 2011 and exclude costs of appeals completed in FY 2011 for cases initially ceased prior to FY 2011.

As we have reported to the Congress every year since 1997, our periodic CDR process has consistently yielded a favorable estimated ratio of benefit savings to administrative costs, although those estimated savings-to-cost ratios have varied over time. That variation is the result of changes in the costs of conducting CDRs and our estimates of the resulting benefit savings. The costs depend on the number of CDRs actually conducted in a given year, but also upon efficiencies gained by the institution of a profiling process that enables us to focus on the cases most likely to result in a termination. The benefit savings also depend upon the number of CDRs conducted, but also depend critically on the distribution of the types of cases (e.g., OASDI vs. SSI; SSI adult vs. SSI children).

Prior to the implementation of the current CDR profiling process for case selection and the addition of SSI-only cases to the CDR process, we estimated that we achieved \$3 in OASDI and Medicare program savings for each \$1 in administrative costs invested in full medical CDRs. We estimated that the addition of the mailer process in 1993 doubled this ratio to approximately \$6 to \$1. Beginning in 1996, with the addition of many more SSI-only cases to the CDR

workload, the provision for special funding to complete CDRs,⁴ and accounting for the Federal share of Medicaid savings that result from conducting CDRs on SSI recipients, the estimated savings-to-cost ratios have averaged slightly over \$10 to \$1. Since the supplemental administrative funding expired at the end of FY 2002, constraints on administrative resources have hampered the timely review of all CDRs coming due, and the savings-to-cost ratios have varied in part due to the changing mix of cases.

In our report on the cohort of CDRs conducted in FY 2010, we estimated a significant drop in the savings-to-cost ratio from that reported for the FY 2009 cohort.⁵ This reported drop was primarily due to the effects of a provision of the Affordable Care Act (ACA) that mandated *all* States provide Medicaid coverage to individuals residing in households with income up to 138 percent of the Federal poverty level. The result of that mandate was to reduce the Medicaid savings associated with conducting CDRs on SSI recipients, thereby reducing the resulting measured CDR cost-effectiveness.

The \$13.2 to \$1 savings-to-cost ratio we are reporting for FY 2011 is more in line with the measured CDR cost-effectiveness levels reported in several years prior to 2010. The change from FY 2010 to FY 2011 is due to a combination of factors, although the primary factor was reflecting the effects of the 2012 Supreme Court decision that made the Medicaid expansion under ACA *optional* for States.⁶ The Medicaid savings presented in Appendix B reflect the current assessment of which States will participate in the ACA Medicaid expansion beginning in 2014 and has the effect of restoring Medicaid savings associated with conducting CDRs. In addition to the change in Medicaid savings, the estimated CDR benefit savings for FY 2011 also reflect increases resulting from changes in the specific mix of CDR cases conducted, revised economic assumptions, and refinements in the models used to estimate the CDR benefit savings.

Quality Assurance

During FY 2011, our Quality Assurance (QA) review of 24,620 periodic CDRs handled by the DDSs showed an overall performance accuracy rate for continuances and cessations of 97.7 percent. Specifically, FY 2011 QA reviews reflect the following:

QA Review Results		
Program	Number Reviewed	Accuracy Rate
OASDI only	8,508	97.6 percent
SSI only	13,871	97.7 percent
Concurrent (both OASDI and SSI)	2,241	97.9 percent

⁴ Public Law (P.L.) 104-121, the Contract with America Advancement Act of 1996, enacted on March 29, 1996, provided for an adjustment in the discretionary spending caps to increase funding for periodic CDRs for FY 1996 through FY 2002.

⁵ From a ratio of \$12.5 to \$1 for FY 2009 CDRs to a ratio of \$9.3 to \$1 for FY 2010 CDRs.

⁶ National Federation of Independent Business v. Sebelius, U.S. 132 S. Ct. 2566 (2012)

FY 2011 Initiatives

During FY 2011, we continued to review the variables used in the profiling models. We identified methods of grouping impairment codes with similar properties into combinations that could improve the predictive ability of the profiling models. The results of our research demonstrated that the new combinations of impairment codes enhanced the profiling models; therefore, we implemented these enhancements in FY 2011.

Conclusion

During the past 16 fiscal years, we completed 20.5 million periodic CDRs. For part of this 16-year period, we completed large numbers of backlogged periodic CDRs in order to become current with our periodic CDR workload by the end of FY 2002. We met this objective without significantly affecting other key workloads because Congress provided additional funding for periodic CDRs outside the discretionary spending caps from FY 1996 to FY 2002. In addition, we made improvements in the periodic CDR profiling process, resulting not only in an increased number of periodic CDRs processed by mailers, but also in the ability to prioritize the initiation of full medical reviews because resources do not permit doing reviews in all cases when the medical review diary matures.

Since FY 2002, yearly funding constraints result in our completion of fewer CDRs than could be scheduled based on matured medical review diaries. As a result, we again face a significant CDR backlog. In order to address this backlog and complete future CDRs as they come due, we need sustained adequate funding.

The President's Budget for FY 2014 includes a special legislative proposal that would provide a dependable source of mandatory funding that would enable us to significantly expand our program integrity work, including conducting many more full medical CDRs. This funding would help ensure that only those individuals eligible for OASDI and SSI disability benefits continue to receive them. Based on the estimated high return on investment from FY 2011 CDRs, we estimate that the program savings from the proposed investment in CDRs would be in the same range of the return on the investment as estimated in recent years.

HISTORICAL EXPERIENCE UNDER THE CONTINUING DISABILITY REVIEW PROCESS

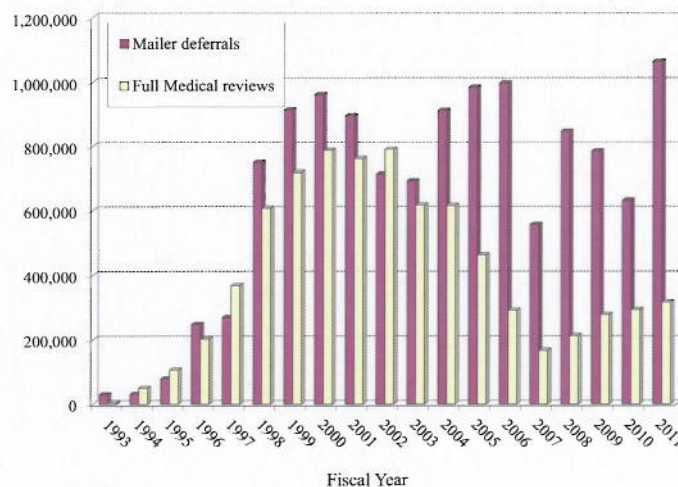
Following enactment of the Social Security Disability Amendments of 1980, section 221(i) of the Social Security Act (Act) generally requires us to review the continuing eligibility of disabled beneficiaries entitled to benefits under the Old-Age and Survivors Insurance and Disability Insurance (OASDI) programs (title II of the Act) at least once every 3 years. A similar requirement was not established at that time for disabled Supplemental Security Income (SSI) recipients under title XVI of the Act. Although the Committee on Finance of the Senate stated in its report on this legislation that we should apply the same continuing disability review (CDR) procedures with respect to both the OASDI and SSI programs, the Act does not specifically require SSI adult CDRs similar to OASDI. The Act, however, does mandate certain types of SSI reviews including: (1) using adult eligibility criteria to redetermine the eligibility of all SSI child recipients who reach age 18 and (2) conducting CDRs for SSI low-birth-weight children not later than 12 months after birth. Under both the OASDI and SSI programs, we cannot initiate CDRs for individuals actively participating in certain return to work programs.

In order to handle the large CDR workload mandated under these various provisions, beginning in 1993 we developed a procedure to screen certain cases scheduled for a CDR using the results of a profiling process including a mailer questionnaire for some cases. Table A1 indicates the numbers of cases for which we completed a scheduled CDR with a mailer questionnaire that resulted in the deferral of a full medical review. These numbers of mailer deferrals are shown graphically, along with the annual number of all centrally-initiated full medical reviews, in figure A1. In 2007, we implemented a streamlined failure to cooperate (FTC) process for medical CDRs. Under this process beneficiaries who fail to comply with field office requests for information necessary for completing their medical CDRs have their benefits suspended. Subsequently, we terminate their eligibility for disability benefits after 12 consecutive months of suspension of benefits for noncompliance. The streamlined FTC process resulted in the initial termination of 1,763 centrally-initiated medical CDRs in fiscal year (FY) 2011.

Table A1.—Cases for Which a Full Medical Review Was Deferred Based on the Results of the Mailer Profile Process

Fiscal year	Title II	Title XVI	Total
1993	29,691	—	29,691
1994	30,995	—	30,995
1995	78,435	—	78,435
1996	191,738	56,290	248,028
1997	167,759	101,856	269,615
1998	585,267	164,116	749,383
1999	503,186	409,111	912,297
2000	698,579	261,129	959,708
2001	541,491	353,138	894,629
2002	508,028	204,872	712,900
2003	569,093	122,853	691,946
2004	725,478	185,522	911,000
2005	637,226	345,402	982,628
2006	782,008	215,050	997,058
2007	454,096	103,119	557,215
2008	696,326	149,589	845,915
2009	537,373	247,650	785,023
2010	455,257	176,358	631,615
2011	889,284	174,121	1,063,405

Figure A1.—Periodic CDRs Processed in FYs 1993-2011^a



^a Excludes 1,763 FTC terminations processed in FY 2011.

Tables A2-A6 present the latest available summary of results on centrally-initiated full medical reviews performed under titles II and XVI since 1993. We tabulate the data shown in these tables on a cohort basis by the date of initial decision. In particular the tables do not include:

- administrative closures—cases for which we curtail development for technical reasons;
- CDRs initiated as the result of work activity on the part of the beneficiary/recipient; and
- miscellaneous other CDRs processed by the State disability determination services (DDS) but not as part of the centrally-initiated CDR scheduling process (e.g. voluntary and third-party reports of medical improvement, posttransplant end-stage renal disease cases, and vocational rehabilitation reports).

Table A2.—Title II Disabled Worker Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c
Title II only reviews							
1993	4,584	4,228	92.2	356	7.8	227	63.8
1994	37,649	31,016	82.4	6,633	17.6	4,310	65.0
1995	77,105	59,775	77.5	17,330	22.5	11,870	68.5
1996	101,297	82,572	81.5	18,725	18.5	12,434	66.4
1997	191,298	161,537	84.4	29,761	15.6	20,581	69.2
1998	300,992	265,545	88.2	35,447	11.8	24,418	68.9
1999	227,060	204,390	90.0	22,670	10.0	14,131	62.3
2000	282,672	259,315	91.7	23,357	8.3	14,252	61.0
2001	333,894	311,140	93.2	22,754	6.8	13,543	59.5
2002	266,844	243,161	91.1	23,683	8.9	13,609	57.5
2003	134,441	118,671	88.3	15,770	11.7	8,531	54.1
2004	132,993	117,449	88.3	15,544	11.7	8,320	53.5
2005	133,945	117,147	87.5	16,798	12.5	8,940	53.2
2006	103,645	91,210	88.0	12,435	12.0	6,647	53.5
2007	40,703	35,162	86.4	5,541	13.6	3,091	55.8
2008	71,150	64,057	90.0	7,093	10.0	4,212	59.4
2009	77,551	71,308	91.9	6,243	8.1	3,774	60.5
2010	84,835	76,965	90.7	7,870	9.3	5,423	68.9
2011	97,696	86,041	88.1	11,655	11.9	7,749	66.5
Title II reviews involving title XVI recipients							
1993	1,143	1,083	94.8	60	5.2	52	86.7
1994	10,945	9,127	83.4	1,818	16.6	1,253	68.9
1995	16,736	12,484	74.6	4,252	25.4	2,905	68.3
1996	26,884	20,636	76.8	6,248	23.2	4,119	65.9
1997	51,466	40,741	79.2	10,725	20.8	7,344	68.5
1998	81,185	68,533	84.4	12,652	15.6	8,723	68.9
1999	60,864	51,928	85.3	8,936	14.7	5,432	60.8
2000	81,824	71,924	87.9	9,900	12.1	5,817	58.8
2001	91,817	82,540	89.9	9,277	10.1	5,589	60.2
2002	87,893	77,305	88.0	10,588	12.0	6,395	60.4
2003	61,548	53,480	86.9	8,068	13.1	4,860	60.2
2004	73,839	65,249	88.4	8,590	11.6	5,331	62.1
2005	70,371	61,436	87.3	8,935	12.7	5,399	60.4
2006	62,642	55,469	88.5	7,173	11.5	4,298	59.9
2007	23,237	19,991	86.0	3,246	14.0	1,998	61.6
2008	35,914	32,125	89.4	3,789	10.6	2,468	65.1
2009	35,099	32,191	91.7	2,908	8.3	1,960	67.4
2010	32,419	29,000	89.5	3,419	10.5	2,505	73.3
2011	28,597	25,017	87.5	3,580	12.5	2,537	70.9
Total reviews, title II disabled workers							
1993	5,727	5,311	92.7	416	7.3	279	67.1
1994	48,594	40,143	82.6	8,451	17.4	5,563	65.8
1995	93,841	72,259	77.0	21,582	23.0	14,775	68.5
1996	128,181	103,208	80.5	24,973	19.5	16,553	66.3
1997	242,764	202,278	83.3	40,486	16.7	27,925	69.0
1998	382,177	334,078	87.4	48,099	12.6	33,141	68.9
1999	287,924	256,318	89.0	31,606	11.0	19,563	61.9
2000	364,496	331,239	90.9	33,257	9.1	20,069	60.3
2001	425,711	393,680	92.5	32,031	7.5	19,132	59.7
2002	354,737	320,466	90.3	34,271	9.7	20,004	58.4
2003	195,989	172,151	87.8	23,838	12.2	13,391	56.2
2004	206,832	182,698	88.3	24,134	11.7	13,651	56.6
2005	204,316	178,583	87.4	25,733	12.6	14,339	55.7
2006	166,287	146,679	88.2	19,608	11.8	10,945	55.8
2007	63,940	55,153	86.3	8,787	13.7	5,089	57.9
2008	107,064	96,182	89.8	10,882	10.2	6,680	61.4
2009	112,650	103,499	91.9	9,151	8.1	5,734	62.7
2010	117,254	105,965	90.4	11,289	9.6	7,928	70.2
2011	126,293	111,058	87.9	15,235	12.1	10,286	67.5

Table A2.—Title II Disabled Worker Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ^b		Number ^e	Percent ^c		Number	Percent	
Title II only reviews										
1993	—	86	37.9	141	66	46.8	—	37	56.1	29
1994	—	1,799	41.7	2,511	1,399	55.7	—	736	52.6	663
1995	—	5,407	45.6	6,463	3,781	58.5	—	1,763	46.6	2,018
1996	—	6,181	49.7	6,253	3,752	60.0	—	1,692	45.1	2,060
1997	—	13,243	64.3	7,338	5,587	76.1	—	2,795	50.0	2,792
1998	—	16,849	69.0	7,569	5,867	77.5	—	3,123	53.2	2,744
1999	—	10,045	71.1	4,086	2,999	73.4	—	1,557	51.9	1,442
2000	—	10,112	71.0	4,140	2,771	66.9	—	1,382	49.9	1,389
2001	—	9,694	71.6	3,849	2,316	60.2	—	1,141	49.3	1,175
2002	—	9,676	71.1	3,933	2,577	65.5	—	1,273	49.4	1,304
2003	—	5,865	68.7	2,666	1,746	65.5	—	824	47.2	922
2004	1	5,518	66.3	2,801	1,892	67.5	—	902	47.7	990
2005	—	6,088	68.1	2,852	1,968	69.0	—	994	50.5	974
2006	1	4,364	65.7	2,282	1,698	74.4	—	861	50.7	837
2007	1	2,161	69.9	929	673	72.4	—	316	47.0	357
2008	10	2,946	70.1	1,256	989	78.7	4	485	49.2	500
2009	43	2,710	72.6	1,021	735	72.0	60	278	41.2	397
2010	690	3,431	72.5	1,302	930	71.4	386	208	38.2	336
2011	2,917	3,539	73.2	1,293	726	56.1	642	32	38.1	52
Title II reviews involving title XVI recipients										
1993	—	22	42.3	30	14	46.7	—	9	64.3	5
1994	—	541	43.2	712	399	56.0	—	177	44.4	222
1995	—	1,245	42.9	1,660	1,007	60.7	—	382	37.9	625
1996	—	1,875	45.5	2,244	1,313	58.5	—	427	32.5	886
1997	—	4,297	58.5	3,047	2,257	74.1	—	973	43.1	1,284
1998	—	5,503	63.1	3,220	2,466	76.6	—	1,158	47.0	1,308
1999	—	3,464	63.8	1,968	1,388	70.5	—	632	45.5	756
2000	—	3,778	64.9	2,039	1,315	64.5	—	578	44.0	737
2001	—	3,754	67.2	1,835	1,076	58.6	—	429	39.9	647
2002	—	4,330	67.7	2,065	1,312	63.5	—	554	42.2	758
2003	—	3,201	65.9	1,659	1,062	64.0	—	445	41.9	617
2004	—	3,411	64.0	1,920	1,304	67.9	—	551	42.3	753
2005	—	3,485	64.5	1,914	1,373	71.7	—	609	44.4	764
2006	—	2,742	63.8	1,556	1,156	74.3	—	524	45.3	632
2007	—	1,350	67.6	648	502	77.5	1	213	42.5	288
2008	6	1,671	67.9	791	613	77.5	5	252	41.4	356
2009	24	1,336	69.0	600	469	78.2	51	153	36.6	265
2010	310	1,533	69.8	662	473	71.5	232	74	30.7	167
2011	945	1,110	69.7	482	271	56.2	242	8	27.6	21
Total reviews, title II disabled workers										
1993	—	108	38.7	171	80	46.8	—	46	57.5	34
1994	—	2,340	42.1	3,223	1,798	55.8	—	913	50.8	885
1995	—	6,652	45.0	8,123	4,788	58.9	—	2,145	44.8	2,643
1996	—	8,056	48.7	8,497	5,065	59.6	—	2,119	41.8	2,946
1997	—	17,540	62.8	10,385	7,844	75.5	—	3,768	48.0	4,076
1998	—	22,352	67.4	10,789	8,333	77.2	—	4,281	51.4	4,052
1999	—	13,509	69.1	6,054	4,387	72.5	—	2,189	49.9	2,198
2000	—	13,890	69.2	6,179	4,086	66.1	—	1,960	48.0	2,126
2001	—	13,448	70.3	5,684	3,392	59.7	—	1,570	46.3	1,822
2002	—	14,006	70.0	5,998	3,889	64.8	—	1,827	47.0	2,062
2003	—	9,066	67.7	4,325	2,808	64.9	—	1,269	45.2	1,539
2004	1	8,929	65.4	4,721	3,196	67.7	—	1,453	45.5	1,743
2005	—	9,573	66.8	4,766	3,341	70.1	—	1,603	48.0	1,738
2006	1	7,106	64.9	3,838	2,854	74.4	—	1,385	48.5	1,469
2007	1	3,511	69.0	1,577	1,175	74.5	1	529	45.1	645
2008	16	4,617	69.3	2,047	1,602	78.3	9	737	46.3	856
2009	67	4,046	71.4	1,621	1,204	74.3	111	431	39.4	662
2010	1,000	4,964	71.7	1,964	1,403	71.4	618	282	35.9	503
2011	3,862	4,649	72.4	1,775	997	56.2	884	40	35.4	73

Table A2.—Title II Disabled Worker Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Title II only reviews							
1993	4,584	4,351	—	233	94.9	—	5.1
1994	37,649	33,551	—	4,098	89.1	—	10.9
1995	77,105	66,945	—	10,160	86.8	—	13.2
1996	101,297	90,445	—	10,852	89.3	—	10.7
1997	191,298	177,575	—	13,723	92.8	—	7.2
1998	300,992	285,517	—	15,475	94.9	—	5.1
1999	227,060	215,992	—	11,068	95.1	—	4.9
2000	282,672	270,809	—	11,863	95.8	—	4.2
2001	333,894	321,975	—	11,919	96.4	—	3.6
2002	266,844	254,110	—	12,734	95.2	—	4.8
2003	134,441	125,360	—	9,081	93.2	—	6.8
2004	132,993	123,869	1	9,123	93.1	f	6.9
2005	133,945	124,229	—	9,716	92.7	—	7.3
2006	103,645	96,435	1	7,209	93.0	f	7.0
2007	40,703	37,639	1	3,063	92.5	f	7.5
2008	71,150	67,488	14	3,648	94.9	f	5.1
2009	77,551	74,296	103	3,152	95.8	0.1	4.1
2010	84,835	80,604	1,076	3,155	95.0	1.3	3.7
2011	97,696	89,612	3,559	4,525	91.7	3.6	4.6
Title II reviews involving title XVI recipients							
1993	1,143	1,114	—	29	97.5	—	2.5
1994	10,945	9,845	—	1,100	89.9	—	10.1
1995	16,736	14,111	—	2,625	84.3	—	15.7
1996	26,884	22,938	—	3,946	85.3	—	14.7
1997	51,466	46,011	—	5,455	89.4	—	10.6
1998	81,185	75,194	—	5,991	92.6	—	7.4
1999	60,864	56,024	—	4,840	92.0	—	8.0
2000	81,824	76,280	—	5,544	93.2	—	6.8
2001	91,817	86,723	—	5,094	94.5	—	5.5
2002	87,893	82,189	—	5,704	93.5	—	6.5
2003	61,548	57,126	—	4,422	92.8	—	7.2
2004	73,839	69,211	—	4,628	93.7	—	6.3
2005	70,371	65,530	—	4,841	93.1	—	6.9
2006	62,642	58,735	—	3,907	93.8	—	6.2
2007	23,237	21,554	1	1,682	92.8	f	7.2
2008	35,914	34,048	11	1,855	94.8	f	5.2
2009	35,099	33,680	75	1,344	96.0	.2	3.8
2010	32,419	30,607	542	1,270	94.4	1.7	3.9
2011	28,597	26,135	1,187	1,275	91.4	4.2	4.5

Table A2.—Title II Disabled Worker Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Total reviews, title II disabled workers							
1993	5,727	5,465	—	262	95.4	—	4.6
1994	48,594	43,396	—	5,198	89.3	—	10.7
1995	93,841	81,056	—	12,785	86.4	—	13.6
1996	128,181	113,383	—	14,798	88.5	—	11.5
1997	242,764	223,586	—	19,178	92.1	—	7.9
1998	382,177	360,711	—	21,466	94.4	—	5.6
1999	287,924	272,016	—	15,908	94.5	—	5.5
2000	364,496	347,089	—	17,407	95.2	—	4.8
2001	425,711	408,698	—	17,013	96.0	—	4.0
2002	354,737	336,299	—	18,438	94.8	—	5.2
2003	195,989	182,486	—	13,503	93.1	—	6.9
2004	206,832	193,080	1	13,751	93.4	f	6.6
2005	204,316	189,759	—	14,557	92.9	—	7.1
2006	166,287	155,170	1	11,116	93.3	f	6.7
2007	63,940	59,193	2	4,745	92.6	f	7.4
2008	107,064	101,536	25	5,503	94.8	f	5.1
2009	112,650	107,976	178	4,496	95.9	0.2	4.0
2010	117,254	111,211	1,618	4,425	94.8	1.4	3.8
2011	126,293	115,747	4,746	5,800	91.6	3.8	4.6

^a Data reflect results as of February 2012. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

^b Percentage of decisions at this level.

^c Percentage of cessations at this level appealed to next level.

^d We do not reflect the status and disposition of cases in the Federal courts here. However, we have included information on the status and disposition at the Office of Disability Adjudication and Review (ODAR) for cases remanded to us by the courts. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

^e Number of persons appealing beyond the reconsideration level.

^f Less than 0.05 percent.

Source: Social Security Administration, Office of Quality Performance.

Table A3.—Title II Disabled Adult Children Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c
Title II only reviews							
1999	26,006	24,611	94.6	1,395	5.4	642	46.0
2000	21,341	20,040	93.9	1,301	6.1	671	51.6
2001	18,878	18,056	95.6	822	4.4	412	50.1
2002	14,528	13,770	94.8	758	5.2	389	51.3
2003	8,112	7,393	91.1	719	8.9	367	51.0
2004	7,104	6,504	91.6	600	8.4	298	49.7
2005	7,767	7,113	91.6	654	8.4	322	49.2
2006	7,485	6,954	92.9	531	7.1	245	46.1
2007	2,582	2,376	92.0	206	8.0	100	48.5
2008	3,519	3,314	94.2	205	5.8	117	57.1
2009	5,554	5,307	95.6	247	4.4	138	55.9
2010	6,979	6,560	94.0	419	6.0	245	58.5
2011	8,582	7,769	90.5	813	9.5	515	63.3
Title II reviews involving title XVI recipients							
1999	19,524	18,015	92.3	1,509	7.7	759	50.3
2000	23,146	21,254	91.8	1,892	8.2	1,014	53.6
2001	17,766	16,406	92.3	1,360	7.7	673	49.5
2002	15,436	14,173	91.8	1,263	8.2	677	53.6
2003	10,336	9,269	89.7	1,067	10.3	570	53.4
2004	10,547	9,571	90.7	976	9.3	555	56.9
2005	9,943	8,981	90.3	962	9.7	519	54.0
2006	8,987	8,138	90.6	849	9.4	467	55.0
2007	3,172	2,847	89.8	325	10.2	153	47.1
2008	4,051	3,690	91.1	361	8.9	190	52.6
2009	6,263	5,803	92.7	460	7.3	270	58.7
2010	7,212	6,612	91.7	600	8.3	410	68.3
2011	8,889	7,876	88.6	1,013	11.4	698	68.9
Total reviews, title II disabled adult children							
1999	45,530	42,626	93.6	2,904	6.4	1,401	48.2
2000	44,487	41,294	92.8	3,193	7.2	1,685	52.8
2001	36,644	34,462	94.0	2,182	6.0	1,085	49.7
2002	29,964	27,943	93.3	2,021	6.7	1,066	52.7
2003	18,448	16,662	90.3	1,786	9.7	937	52.5
2004	17,651	16,075	91.1	1,576	8.9	853	54.1
2005	17,710	16,094	90.9	1,616	9.1	841	52.0
2006	16,472	15,092	91.6	1,380	8.4	712	51.6
2007	5,754	5,223	90.8	531	9.2	253	47.6
2008	7,570	7,004	92.5	566	7.5	307	54.2
2009	11,817	11,110	94.0	707	6.0	408	57.7
2010	14,191	13,172	92.8	1,019	7.2	655	64.3
2011	17,471	15,645	89.5	1,826	10.5	1,213	66.4

Table A3.—Title II Disabled Adult Children Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ^b		Number ^e	Percent ^c		Number	Percent	
Title II only reviews										
1999	—	431	67.1	211	124	58.8	—	53	42.7	71
2000	—	445	66.3	226	134	59.3	—	50	37.3	84
2001	—	292	70.9	120	61	50.8	—	27	44.3	34
2002	—	256	65.8	133	68	51.1	—	36	52.9	32
2003	—	276	75.2	91	41	45.1	—	13	31.7	28
2004	—	191	64.1	107	60	56.1	—	26	43.3	34
2005	1	224	69.8	97	61	62.9	—	22	36.1	39
2006	—	173	70.6	72	36	50.0	—	15	41.7	21
2007	—	66	66.0	34	19	55.9	—	14	73.7	5
2008	—	84	71.8	33	20	60.6	—	8	40.0	12
2009	2	96	70.6	40	26	65.0	2	11	45.8	13
2010	34	138	65.4	73	48	65.8	21	11	40.7	16
2011	190	241	74.2	84	37	44.0	36	—	—	1
Title II reviews involving title XVI recipients										
1999	—	502	66.1	257	152	59.1	—	46	30.3	106
2000	—	636	62.7	378	235	62.2	—	76	32.3	159
2001	—	401	59.6	272	159	58.5	—	64	40.3	95
2002	—	447	66.0	230	136	59.1	—	39	28.7	97
2003	—	362	63.5	208	117	56.3	—	37	31.6	80
2004	1	362	65.3	192	109	56.8	—	43	39.4	66
2005	—	336	64.7	183	117	63.9	—	40	34.2	77
2006	—	286	61.2	181	123	68.0	—	43	35.0	80
2007	1	106	69.7	46	29	63.0	—	15	51.7	14
2008	1	116	61.4	73	60	82.2	—	18	30.0	42
2009	15	172	67.5	83	72	86.7	7	22	33.8	43
2010	76	215	64.4	119	85	71.4	35	11	22.0	39
2011	326	252	67.7	120	72	60.0	61	2	18.2	9
Total reviews, title II disabled adult children										
1999	—	933	66.6	468	276	59.0	—	99	35.9	177
2000	—	1,081	64.2	604	369	61.1	—	126	34.1	243
2001	—	693	63.9	392	220	56.1	—	91	41.4	129
2002	—	703	65.9	363	204	56.2	—	75	36.8	129
2003	—	638	68.1	299	158	52.8	—	50	31.6	108
2004	1	553	64.9	299	169	56.5	—	69	40.8	100
2005	1	560	66.7	280	178	63.6	—	62	34.8	116
2006	—	459	64.5	253	159	62.8	—	58	36.5	101
2007	1	172	68.3	80	48	60.0	—	29	60.4	19
2008	1	200	65.4	106	80	75.5	—	26	32.5	54
2009	17	268	68.5	123	98	79.7	9	33	37.1	56
2010	110	353	64.8	192	133	69.3	56	22	28.6	55
2011	516	493	70.7	204	109	53.4	97	2	16.7	10

Table A3.—Title II Disabled Adult Children Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Title II only reviews							
1999	26,006	25,095	—	911	96.5	—	3.5
2000	21,341	20,535	—	806	96.2	—	3.8
2001	18,878	18,375	—	503	97.3	—	2.7
2002	14,528	14,062	—	466	96.8	—	3.2
2003	8,112	7,682	—	430	94.7	—	5.3
2004	7,104	6,721	—	383	94.6	—	5.4
2005	7,767	7,359	1	407	94.7	^f	5.2
2006	7,485	7,142	—	343	95.4	—	4.6
2007	2,582	2,456	—	126	95.1	—	4.9
2008	3,519	3,406	—	113	96.8	—	3.2
2009	5,554	5,414	4	136	97.5	0.1	2.4
2010	6,979	6,709	55	215	96.1	.8	3.1
2011	8,582	8,010	226	346	93.3	2.6	4.0
Title II reviews involving title XVI recipients							
1999	19,524	18,563	—	961	95.1	—	4.9
2000	23,146	21,966	—	1,180	94.9	—	5.1
2001	17,766	16,871	—	895	95.0	—	5.0
2002	15,436	14,659	—	777	95.0	—	5.0
2003	10,336	9,668	—	668	93.5	—	6.5
2004	10,547	9,976	1	570	94.6	^f	5.4
2005	9,943	9,357	—	586	94.1	—	5.9
2006	8,987	8,467	—	520	94.2	—	5.8
2007	3,172	2,968	1	203	93.6	^f	6.4
2008	4,051	3,824	1	226	94.4	^f	5.6
2009	6,263	5,997	22	244	95.8	.4	3.9
2010	7,212	6,838	111	263	94.8	1.5	3.6
2011	8,889	8,130	387	372	91.5	4.4	4.2
Total reviews, title II disabled adult children							
1999	45,530	43,658	—	1,872	95.9	—	4.1
2000	44,487	42,501	—	1,986	95.5	—	4.5
2001	36,644	35,246	—	1,398	96.2	—	3.8
2002	29,964	28,721	—	1,243	95.9	—	4.1
2003	18,448	17,350	—	1,098	94.0	—	6.0
2004	17,651	16,697	1	953	94.6	^f	5.4
2005	17,710	16,716	1	993	94.4	^f	5.6
2006	16,472	15,609	—	863	94.8	—	5.2
2007	5,754	5,424	1	329	94.3	^f	5.7
2008	7,570	7,230	1	339	95.5	^f	4.5
2009	11,817	11,411	26	380	96.6	.2	3.2
2010	14,191	13,547	166	478	95.5	1.2	3.4
2011	17,471	16,140	613	718	92.4	3.5	4.1

^a Data reflect results as of February 2012. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

^b Percentage of decisions at this level.

^c Percentage of cessations at this level appealed to next level.

^d We do not reflect the status and disposition of cases in the Federal courts here. However, we have included information on the status and disposition at ODAR for cases remanded to us by the courts. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

^e Number of persons appealing beyond the reconsideration level.

^f Less than 0.05 percent.

Source: Social Security Administration, Office of Quality Performance.

Table A4.—Title II Disabled Widow(er) Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c
Title II only reviews							
1999	1,237	1,178	95.2	59	4.8	36	61.0
2000	1,314	1,267	96.4	47	3.6	34	72.3
2001	1,003	963	96.0	40	4.0	27	67.5
2002	751	726	96.7	25	3.3	15	60.0
2003	280	261	93.2	19	6.8	13	68.4
2004	261	253	96.9	8	3.1	6	75.0
2005	306	280	91.5	26	8.5	15	57.7
2006	209	199	95.2	10	4.8	6	60.0
2007	70	63	90.0	7	10.0	5	71.4
2008	121	113	93.4	8	6.6	6	75.0
2009	326	319	97.9	7	2.1	5	71.4
2010	834	817	98.0	17	2.0	13	76.5
2011	1,179	1,140	96.7	39	3.3	33	84.6
Title II reviews involving title XVI recipients							
1999	428	410	95.8	18	4.2	10	55.6
2000	817	784	96.0	33	4.0	20	60.6
2001	758	720	95.0	38	5.0	29	76.3
2002	618	591	95.6	27	4.4	15	55.6
2003	291	272	93.5	19	6.5	13	68.4
2004	236	227	96.2	9	3.8	6	66.7
2005	283	270	95.4	13	4.6	9	69.2
2006	196	182	92.9	14	7.1	11	78.6
2007	60	55	91.7	5	8.3	5	100.0
2008	80	76	95.0	4	5.0	2	50.0
2009	247	244	98.8	3	1.2	2	66.7
2010	277	267	96.4	10	3.6	7	70.0
2011	313	301	96.2	12	3.8	10	83.3
Total reviews, title II disabled widow(er)s							
1999	1,665	1,588	95.4	77	4.6	46	59.7
2000	2,131	2,051	96.2	80	3.8	54	67.5
2001	1,761	1,683	95.6	78	4.4	56	71.8
2002	1,369	1,317	96.2	52	3.8	30	57.7
2003	571	533	93.3	38	6.7	26	68.4
2004	497	480	96.6	17	3.4	12	70.6
2005	589	550	93.4	39	6.6	24	61.5
2006	405	381	94.1	24	5.9	17	70.8
2007	130	118	90.8	12	9.2	10	83.3
2008	201	189	94.0	12	6.0	8	66.7
2009	573	563	98.3	10	1.7	7	70.0
2010	1,111	1,084	97.6	27	2.4	20	74.1
2011	1,492	1,441	96.6	51	3.4	43	84.3

Table A4.—Title II Disabled Widow(er) Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ^b		Number ^e	Percent ^c		Number	Percent	
Title II only reviews										
1999	—	32	88.9	4	3	75.0	—	1	33.3	2
2000	—	29	85.3	5	4	80.0	—	3	75.0	1
2001	—	23	85.2	4	2	50.0	—	—	—	2
2002	—	12	80.0	3	2	66.7	—	1	50.0	1
2003	—	13	100.0	—	—	—	—	—	—	—
2004	—	4	66.7	2	2	100.0	—	—	—	2
2005	—	11	73.3	4	3	75.0	—	2	66.7	1
2006	—	6	100.0	—	—	—	—	—	—	—
2007	—	3	60.0	2	2	100.0	—	2	100.0	—
2008	—	6	100.0	—	—	—	—	—	—	—
2009	—	4	80.0	1	1	100.0	—	—	—	1
2010	1	10	83.3	2	1	50.0	—	—	—	1
2011	5	28	100.0	—	—	—	—	—	—	—
Title II reviews involving title XVI recipients										
1999	—	8	80.0	2	2	100.0	—	1	50.0	1
2000	—	13	65.0	7	6	85.7	—	5	83.3	1
2001	—	22	75.9	7	5	71.4	—	3	60.0	2
2002	—	10	66.7	5	3	60.0	—	1	33.3	2
2003	—	12	92.3	1	—	—	—	—	—	—
2004	—	6	100.0	—	—	—	—	—	—	—
2005	—	7	77.8	2	1	50.0	—	1	100.0	—
2006	—	10	90.9	1	—	—	—	—	—	—
2007	—	5	100.0	—	—	—	—	—	—	—
2008	—	2	100.0	—	—	—	—	—	—	—
2009	—	2	100.0	—	—	—	—	—	—	—
2010	2	5	100.0	—	—	—	—	—	—	—
2011	3	5	71.4	2	1	50.0	1	—	—	—
Total reviews, title II disabled widow(er)s										
1999	—	40	87.0	6	5	83.3	—	2	40.0	3
2000	—	42	77.8	12	10	83.3	—	8	80.0	2
2001	—	45	80.4	11	7	63.6	—	3	42.9	4
2002	—	22	73.3	8	5	62.5	—	2	40.0	3
2003	—	25	96.2	1	—	—	—	—	—	—
2004	—	10	83.3	2	2	100.0	—	—	—	2
2005	—	18	75.0	6	4	66.7	—	3	75.0	1
2006	—	16	94.1	1	—	—	—	—	—	—
2007	—	8	80.0	2	2	100.0	—	2	100.0	—
2008	—	8	100.0	—	—	—	—	—	—	—
2009	—	6	85.7	1	1	100.0	—	—	—	1
2010	3	15	88.2	2	1	50.0	—	—	—	1
2011	8	33	94.3	2	1	50.0	1	—	—	—

Table A4.—Title II Disabled Widow(er) Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Title II only reviews							
1999	1,237	1,211	—	26	97.9	—	2.1
2000	1,314	1,299	—	15	98.9	—	1.1
2001	1,003	986	—	17	98.3	—	1.7
2002	751	739	—	12	98.4	—	1.6
2003	280	274	—	6	97.9	—	2.1
2004	261	257	—	4	98.5	—	1.5
2005	306	293	—	13	95.8	—	4.2
2006	209	205	—	4	98.1	—	1.9
2007	70	68	—	2	97.1	—	2.9
2008	121	119	—	2	98.3	—	1.7
2009	326	323	—	3	99.1	—	.9
2010	834	827	1	6	99.2	0.1	.7
2011	1,179	1,168	5	6	99.1	.4	.5
Title II reviews involving title XVI recipients							
1999	428	419	—	9	97.9	—	2.1
2000	817	802	—	15	98.2	—	1.8
2001	758	745	—	13	98.3	—	1.7
2002	618	602	—	16	97.4	—	2.6
2003	291	284	—	7	97.6	—	2.4
2004	236	233	—	3	98.7	—	1.3
2005	283	278	—	5	98.2	—	1.8
2006	196	192	—	4	98.0	—	2.0
2007	60	60	—	—	100.0	—	—
2008	80	78	—	2	97.5	—	2.5
2009	247	246	—	1	99.6	—	.4
2010	277	272	2	3	98.2	.7	1.1
2011	313	306	4	3	97.8	1.3	1.0
Total reviews, title II disabled widow(er)s							
1999	1,665	1,630	—	35	97.9	—	2.1
2000	2,131	2,101	—	30	98.6	—	1.4
2001	1,761	1,731	—	30	98.3	—	1.7
2002	1,369	1,341	—	28	98.0	—	2.0
2003	571	558	—	13	97.7	—	2.3
2004	497	490	—	7	98.6	—	1.4
2005	589	571	—	18	96.9	—	3.1
2006	405	397	—	8	98.0	—	2.0
2007	130	128	—	2	98.5	—	1.5
2008	201	197	—	4	98.0	—	2.0
2009	573	569	—	4	99.3	—	.7
2010	1,111	1,099	3	9	98.9	.3	.8
2011	1,492	1,474	9	9	98.8	.6	.6

^a Data reflect results as of February 2012. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

^b Percentage of decisions at this level.

^c Percentage of cessations at this level appealed to next level.

^d We do not reflect the status and disposition of cases in the Federal courts here. However, we have included information on the status and disposition at ODAR for cases remanded to us by the courts. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

^e Number of persons appealing beyond the reconsideration level.

Source: Social Security Administration, Office of Quality Performance.

Table A5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c
Reviews of low-birth-weight children							
1994	1,225	771	62.9	454	37.1	159	35.0
1995	4,231	2,083	49.2	2,148	50.8	665	31.0
1996	5,709	2,491	43.6	3,218	56.4	904	28.1
1997	7,091	4,482	63.2	2,609	36.8	821	31.5
1998	17,620	6,092	34.6	11,528	65.4	3,640	31.6
1999	9,773	4,114	42.1	5,659	57.9	1,639	29.0
2000	10,178	4,566	44.9	5,612	55.1	1,561	27.8
2001	9,086	4,152	45.7	4,934	54.3	1,403	28.4
2002	12,732	5,869	46.1	6,863	53.9	1,953	28.5
2003	7,283	3,516	48.3	3,767	51.7	1,026	27.2
2004	12,060	6,075	50.4	5,985	49.6	1,782	29.8
2005	13,710	6,540	47.7	7,170	52.3	1,995	27.8
2006	8,303	4,030	48.5	4,273	51.5	1,229	28.8
2007	3,175	1,368	43.1	1,807	56.9	510	28.2
2008	5,272	2,231	42.3	3,041	57.7	933	30.7
2009	12,511	5,741	45.9	6,770	54.1	2,154	31.8
2010	22,396	9,048	40.4	13,348	59.6	4,838	36.2
2011	19,359	7,608	39.3	11,751	60.7	4,275	36.4
Redeterminations at age 18							
1994	—	—	—	—	—	—	—
1995	71	64	90.1	7	9.9	5	71.4
1996	12,640	8,158	64.5	4,482	35.5	2,055	45.9
1997	48,834	22,431	45.9	26,403	54.1	16,741	63.4
1998	40,945	21,453	52.4	19,492	47.6	10,915	56.0
1999	49,557	27,413	55.3	22,144	44.7	10,879	49.1
2000	51,713	28,863	55.8	22,850	44.2	11,021	48.2
2001	48,944	28,167	57.5	20,777	42.5	10,049	48.4
2002	54,947	32,388	58.9	22,559	41.1	11,549	51.2
2003	53,905	31,862	59.1	22,043	40.9	11,742	53.3
2004	53,232	31,890	59.9	21,342	40.1	11,585	54.3
2005	55,331	31,434	56.8	23,897	43.2	12,403	51.9
2006	40,640	21,796	53.6	18,844	46.4	9,340	49.6
2007	71,359	36,339	50.9	35,020	49.1	17,785	50.8
2008	69,430	34,547	49.8	34,883	50.2	17,847	51.2
2009	100,986	51,712	51.2	49,274	48.8	27,707	56.2
2010	87,310	41,545	47.6	45,765	52.4	26,661	58.3
2011	93,256	42,772	45.9	50,484	54.1	28,746	56.9
All other reviews of title XVI disabled children							
1994	—	—	—	—	—	—	—
1995	3,535	2,501	70.7	1,034	29.3	541	52.3
1996	789	399	50.6	390	49.4	210	53.8
1997	14	8	57.1	6	42.9	3	50.0
1998	91,157	67,203	73.7	23,954	26.3	13,267	55.4
1999	183,211	129,420	70.6	53,791	29.4	28,410	52.8
2000	140,699	106,583	75.8	34,116	24.2	17,014	49.9
2001	95,835	72,896	76.1	22,939	23.9	11,808	51.5
2002	163,768	130,434	79.6	33,334	20.4	17,888	53.7
2003	127,444	100,522	78.9	26,922	21.1	14,876	55.3
2004	103,437	80,748	78.1	22,689	21.9	12,852	56.6
2005	61,387	45,597	74.3	15,790	25.7	8,400	53.2
2006	19,384	14,428	74.4	4,956	25.6	2,591	52.3
2007	4,440	3,161	71.2	1,279	28.8	668	52.2
2008	4,707	3,473	73.8	1,234	26.2	673	54.5
2009	10,637	8,355	78.5	2,282	21.5	1,225	53.7
2010	16,677	12,501	75.0	4,176	25.0	2,359	56.5
2011	25,166	17,157	68.2	8,009	31.8	4,560	56.9

Table A5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Initial decisions						
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration	
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c
Total reviews, all title XVI disabled children							
1994	1,225	771	62.9	454	37.1	159	35.0
1995	7,837	4,648	59.3	3,189	40.7	1,211	38.0
1996	19,138	11,048	57.7	8,090	42.3	3,169	39.2
1997	55,939	26,921	48.1	29,018	51.9	17,565	60.5
1998	149,722	94,748	63.3	54,974	36.7	27,822	50.6
1999	242,541	160,947	66.4	81,594	33.6	40,928	50.2
2000	202,590	140,012	69.1	62,578	30.9	29,596	47.3
2001	153,865	105,215	68.4	48,650	31.6	23,260	47.8
2002	231,447	168,691	72.9	62,756	27.1	31,390	50.0
2003	188,632	135,900	72.0	52,732	28.0	27,644	52.4
2004	168,729	118,713	70.4	50,016	29.6	26,219	52.4
2005	130,428	83,571	64.1	46,857	35.9	22,798	48.7
2006	68,327	40,254	58.9	28,073	41.1	13,160	46.9
2007	78,974	40,868	51.7	38,106	48.3	18,963	49.8
2008	79,409	40,251	50.7	39,158	49.3	19,453	49.7
2009	124,134	65,808	53.0	58,326	47.0	31,086	53.3
2010	126,383	63,094	49.9	63,289	50.1	33,858	53.5
2011	137,781	67,537	49.0	70,244	51.0	37,581	53.5

Table A5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ^b		Number ^c	Percent ^c		Number	Percent	
Reviews of low-birth-weight children										
1994	—	44	27.7	115	51	44.3	—	15	29.4	36
1995	—	184	27.7	481	219	45.5	—	53	24.2	166
1996	—	329	36.4	575	232	40.3	—	44	19.0	188
1997	—	292	35.6	529	235	44.4	—	50	21.3	185
1998	—	1,231	33.8	2,409	1,142	47.4	—	244	21.4	898
1999	—	607	37.0	1,032	488	47.3	—	83	17.0	405
2000	—	609	39.0	952	452	47.5	—	99	21.9	353
2001	—	504	35.9	899	405	45.1	—	61	15.1	344
2002	—	698	35.7	1,255	549	43.7	—	112	20.4	437
2003	—	364	35.5	662	301	45.5	—	60	19.9	241
2004	—	643	36.1	1,139	554	48.6	—	84	15.2	470
2005	—	702	35.2	1,293	626	48.4	—	104	16.6	522
2006	—	421	34.3	808	415	51.4	—	78	18.8	337
2007	—	173	33.9	337	189	56.1	—	37	19.6	152
2008	11	264	28.6	658	358	54.4	2	60	16.9	296
2009	111	593	29.0	1,450	812	56.0	70	131	17.7	611
2010	826	1,175	29.3	2,837	1,402	49.4	704	97	13.9	601
2011	2,009	834	36.8	1,432	588	41.1	522	9	13.6	57
Redeterminations at age 18										
1994	—	—	—	—	—	—	—	—	—	—
1995	—	2	40.0	3	2	66.7	—	1	50.0	1
1996	—	707	34.4	1,348	584	43.3	—	119	20.4	465
1997	—	4,591	27.4	12,150	6,429	52.9	—	1,517	23.6	4,912
1998	—	3,070	28.1	7,845	4,388	55.9	—	1,026	23.4	3,362
1999	—	3,356	30.8	7,523	4,304	57.2	—	1,059	24.6	3,245
2000	—	3,575	32.4	7,446	4,034	54.2	—	1,017	25.2	3,017
2001	—	3,256	32.4	6,793	3,723	54.8	—	969	26.0	2,754
2002	—	3,819	33.1	7,730	4,125	53.4	—	1,100	26.7	3,025
2003	—	3,818	32.5	7,924	4,295	54.2	—	1,146	26.7	3,149
2004	—	3,531	30.5	8,054	4,646	57.7	—	1,299	28.0	3,347
2005	—	3,761	30.3	8,642	5,130	59.4	—	1,434	28.0	3,696
2006	—	2,584	27.7	6,756	4,127	61.1	1	1,212	29.4	2,914
2007	17	4,797	27.0	12,971	8,267	63.7	25	2,381	28.9	5,861
2008	235	5,092	28.9	12,520	8,329	66.5	109	2,107	25.6	6,113
2009	1,031	7,047	26.4	19,629	12,589	64.1	950	2,702	23.2	8,937
2010	4,042	5,964	26.4	16,655	9,764	58.6	4,138	1,136	20.2	4,490
2011	13,452	4,927	32.2	10,367	4,673	45.1	4,018	137	20.9	518
All other reviews of title XVI disabled children										
1994	—	—	—	—	—	—	—	—	—	—
1995	—	177	32.7	364	202	55.5	—	52	25.7	150
1996	—	69	32.9	141	55	39.0	—	17	30.9	38
1997	—	1	33.3	2	1	50.0	—	—	—	1
1998	—	4,456	33.6	8,811	5,511	62.5	—	1,305	23.7	4,206
1999	—	9,324	32.8	19,086	11,711	61.4	—	2,615	22.3	9,096
2000	—	6,434	37.8	10,580	6,237	59.0	—	1,427	22.9	4,810
2001	—	4,619	39.1	7,189	4,257	59.2	—	955	22.4	3,302
2002	—	7,238	40.5	10,650	6,155	57.8	—	1,372	22.3	4,783
2003	—	6,248	42.0	8,628	4,996	57.9	—	1,149	23.0	3,847
2004	—	4,871	37.9	7,981	4,943	61.9	—	1,181	23.9	3,762
2005	—	3,121	37.2	5,279	3,326	63.0	—	769	23.1	2,557
2006	—	943	36.4	1,648	1,089	66.1	—	267	24.5	822
2007	—	269	40.3	399	264	66.2	2	80	30.5	182
2008	3	252	37.6	418	259	62.0	4	58	22.7	197
2009	41	506	42.7	678	426	62.8	40	76	19.7	310
2010	408	758	38.9	1,193	737	61.8	315	67	15.9	355
2011	2,028	1,052	41.5	1,480	740	50.0	634	23	21.7	83

Table A5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		Cessations
		Number	Percent ^b		Number ^e	Percent ^c		Number	Percent	
Total reviews, all title XVI disabled children										
1994	—	44	27.7	115	51	44.3	—	15	29.4	36
1995	—	363	30.0	848	423	49.9	—	106	25.1	317
1996	—	1,105	34.9	2,064	871	42.2	—	180	20.7	691
1997	—	4,884	27.8	12,681	6,665	52.6	—	1,567	23.5	5,098
1998	—	8,757	31.5	19,065	11,041	57.9	—	2,575	23.3	8,466
1999	—	13,287	32.5	27,641	16,503	59.7	—	3,757	22.8	12,746
2000	—	10,618	35.9	18,978	10,723	56.5	—	2,543	23.7	8,180
2001	—	8,379	36.0	14,881	8,385	56.3	—	1,985	23.7	6,400
2002	—	11,755	37.4	19,635	10,829	55.2	—	2,584	23.9	8,245
2003	—	10,430	37.7	17,214	9,592	55.7	—	2,355	24.6	7,237
2004	—	9,045	34.5	17,174	10,143	59.1	—	2,564	25.3	7,579
2005	—	7,584	33.3	15,214	9,082	59.7	—	2,307	25.4	6,775
2006	—	3,948	30.0	9,212	5,631	61.1	1	1,557	27.7	4,073
2007	17	5,239	27.7	13,707	8,720	63.6	27	2,498	28.7	6,195
2008	249	5,608	29.2	13,596	8,946	65.8	115	2,225	25.2	6,606
2009	1,183	8,146	27.2	21,757	13,827	63.6	1,060	2,909	22.8	9,858
2010	5,276	7,897	27.6	20,685	11,903	57.5	5,157	1,300	19.3	5,446
2011	17,489	6,813	33.9	13,279	6,001	45.2	5,174	169	20.4	658

Table A5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Reviews of low-birth-weight children							
1994	1,225	830	—	395	67.8	—	32.2
1995	4,231	2,320	—	1,911	54.8	—	45.2
1996	5,709	2,864	—	2,845	50.2	—	49.8
1997	7,091	4,824	—	2,267	68.0	—	32.0
1998	17,620	7,567	—	10,053	42.9	—	57.1
1999	9,773	4,804	—	4,969	49.2	—	50.8
2000	10,178	5,274	—	4,904	51.8	—	48.2
2001	9,086	4,717	—	4,369	51.9	—	48.1
2002	12,732	6,679	—	6,053	52.5	—	47.5
2003	7,283	3,940	—	3,343	54.1	—	45.9
2004	12,060	6,802	—	5,258	56.4	—	43.6
2005	13,710	7,346	—	6,364	53.6	—	46.4
2006	8,303	4,529	—	3,774	54.5	—	45.5
2007	3,175	1,578	—	1,597	49.7	—	50.3
2008	5,272	2,555	13	2,704	48.5	0.2	51.3
2009	12,511	6,465	181	5,865	51.7	1.4	46.9
2010	22,396	10,320	1,530	10,546	46.1	6.8	47.1
2011	19,359	8,451	2,531	8,377	43.7	13.1	43.3
Redeterminations at age 18							
1994	—	—	—	—	—	—	—
1995	71	67	—	4	94.4	—	5.6
1996	12,640	8,984	—	3,656	71.1	—	28.9
1997	48,834	28,539	—	20,295	58.4	—	41.6
1998	40,945	25,549	—	15,396	62.4	—	37.6
1999	49,557	31,828	—	17,729	64.2	—	35.8
2000	51,713	33,455	—	18,258	64.7	—	35.3
2001	48,944	32,392	—	16,552	66.2	—	33.8
2002	54,947	37,307	—	17,640	67.9	—	32.1
2003	53,905	36,826	—	17,079	68.3	—	31.7
2004	53,232	36,720	—	16,512	69.0	—	31.0
2005	55,331	36,629	—	18,702	66.2	—	33.8
2006	40,640	25,592	1	15,047	63.0	f	37.0
2007	71,359	43,517	42	27,800	61.0	.1	39.0
2008	69,430	41,746	344	27,340	60.1	.5	39.4
2009	100,986	61,461	1,981	37,544	60.9	2.0	37.2
2010	87,310	48,645	8,180	30,485	55.7	9.4	34.9
2011	93,256	47,836	17,470	27,950	51.3	18.7	30.0
All other reviews of title XVI disabled children							
1994	—	—	—	—	—	—	—
1995	3,535	2,730	—	805	77.2	—	22.8
1996	789	485	—	304	61.5	—	38.5
1997	14	9	—	5	64.3	—	35.7
1998	91,157	72,964	—	18,193	80.0	—	20.0
1999	183,211	141,359	—	41,852	77.2	—	22.8
2000	140,699	114,444	—	26,255	81.3	—	18.7
2001	95,835	78,470	—	17,365	81.9	—	18.1
2002	163,768	139,044	—	24,724	84.9	—	15.1
2003	127,444	107,919	—	19,525	84.7	—	15.3
2004	103,437	86,800	—	16,637	83.9	—	16.1
2005	61,387	49,487	—	11,900	80.6	—	19.4
2006	19,384	15,638	—	3,746	80.7	—	19.3
2007	4,440	3,510	2	928	79.1	f	20.9
2008	4,707	3,783	7	917	80.4	.1	19.5
2009	10,637	8,937	81	1,619	84.0	.8	15.2
2010	16,677	13,326	723	2,628	79.9	4.3	15.8
2011	25,166	18,232	2,662	4,272	72.4	10.6	17.0

Table A5.—XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Selected summary case information by decision status as of February 2012							
Fiscal year of initial DDS decision	Total initial decisions	Numbers of cases		Numbers as a percentage of total initial decisions			
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Total reviews, all title XVI disabled children							
1994	1,225	830	—	395	67.8	—	32.2
1995	7,837	5,117	—	2,720	65.3	—	34.7
1996	19,138	12,333	—	6,805	64.4	—	35.6
1997	55,939	33,372	—	22,567	59.7	—	40.3
1998	149,722	106,080	—	43,642	70.9	—	29.1
1999	242,541	177,991	—	64,550	73.4	—	26.6
2000	202,590	153,173	—	49,417	75.6	—	24.4
2001	153,865	115,579	—	38,286	75.1	—	24.9
2002	231,447	183,030	—	48,417	79.1	—	20.9
2003	188,632	148,685	—	39,947	78.8	—	21.2
2004	168,729	130,322	—	38,407	77.2	—	22.8
2005	130,428	93,462	—	36,966	71.7	—	28.3
2006	68,327	45,759	1	22,567	67.0	f	33.0
2007	78,974	48,605	44	30,325	61.5	0.1	38.4
2008	79,409	48,084	364	30,961	60.6	.5	39.0
2009	124,134	76,863	2,243	45,028	61.9	1.8	36.3
2010	126,383	72,291	10,433	43,659	57.2	8.3	34.5
2011	137,781	74,519	22,663	40,599	54.1	16.4	29.5

^a Data reflect results as of February 2012. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

^b Percentage of decisions at this level.

^c Percentage of cessations at this level appealed to next level.

^d We do not reflect the status and disposition of cases in the Federal courts here. However, we have included information on the status and disposition at ODAR for cases remanded to us by the courts. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

^e Number of persons appealing beyond the reconsideration level.

^f Less than 0.05 percent.

Source: Social Security Administration, Office of Quality Performance.

Table A6.—Title XVI Only Disabled Adult Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision

Fiscal year of initial DDS decision	Initial decisions							
	Total initial DDS decisions	Continuations		Cessations		Appeals to reconsideration		
		Number	Percent ^b	Number	Percent ^b	Number	Percent ^c	
1995	4,287	3,277	76.4	1,010	23.6	665	65.8	
1996	55,025	46,273	84.1	8,752	15.9	6,146	70.2	
1997	69,557	57,662	82.9	11,895	17.1	8,722	73.3	
1998	75,071	64,829	86.4	10,242	13.6	7,239	70.7	
1999	140,429	125,079	89.1	15,350	10.9	10,292	67.0	
2000	173,470	156,065	90.0	17,405	10.0	10,923	62.8	
2001	143,902	126,610	88.0	17,292	12.0	10,262	59.3	
2002	172,527	150,837	87.4	21,690	12.6	13,314	61.4	
2003	213,212	191,061	89.6	22,151	10.4	14,665	66.2	
2004	221,129	199,938	90.4	21,191	9.6	14,627	69.0	
2005	110,072	97,330	88.4	12,742	11.6	8,125	63.8	
2006	40,605	35,957	88.6	4,648	11.4	2,853	61.4	
2007	18,172	16,006	88.1	2,166	11.9	1,426	65.8	
2008	18,933	17,049	90.0	1,884	10.0	1,268	67.3	
2009	29,137	27,233	93.5	1,904	6.5	1,383	72.6	
2010	34,575	31,766	91.9	2,809	8.1	2,188	77.9	
2011	33,460	30,291	90.5	3,169	9.5	2,359	74.4	

Fiscal year of initial DDS decision	Reconsiderations						Appeals beyond reconsideration ^d			
	Pending	Continuations		Cessations	Appeals to beyond reconsideration		Pending	Continuations		
		Number	Percent ^b		Number ^e	Percent ^e		Number	Percent	Cessations
1995	—	241	36.2	424	267	63.0	—	87	32.6	180
1996	—	3,289	53.5	2,857	1,946	68.1	—	623	32.0	1,323
1997	—	5,271	60.4	3,451	2,575	74.6	—	986	38.3	1,589
1998	—	4,527	62.5	2,712	1,987	73.3	—	781	39.3	1,206
1999	—	6,610	64.2	3,682	2,508	68.1	—	973	38.8	1,535
2000	—	6,823	62.5	4,100	2,778	67.8	—	1,057	38.0	1,721
2001	—	6,224	60.7	4,038	2,618	64.8	—	934	35.7	1,684
2002	—	8,160	61.3	5,154	3,323	64.5	—	1,110	33.4	2,213
2003	—	9,656	65.8	5,009	3,335	66.6	—	1,232	36.9	2,103
2004	—	9,404	64.3	5,223	3,743	71.7	—	1,455	38.9	2,288
2005	—	5,233	64.4	2,892	2,052	71.0	—	772	37.6	1,280
2006	—	1,805	63.3	1,048	746	71.2	—	282	37.8	464
2007	—	963	67.5	463	342	73.9	—	149	43.6	193
2008	1	866	68.4	401	302	75.3	1	115	38.2	186
2009	14	995	72.7	374	278	74.3	25	84	33.2	169
2010	282	1,415	74.2	491	366	74.5	152	65	30.4	149
2011	927	1,123	78.4	309	167	54.0	142	9	36.0	16

Table A6.—Title XVI Only Disabled Adult Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

Fiscal year of initial DDS decision	Selected summary case information by decision status as of February 2012						
	Total initial decisions	Numbers of cases			Numbers as a percentage of total initial decisions		
		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
1995	4,287	3,605	—	682	84.1	—	15.9
1996	55,025	50,185	—	4,840	91.2	—	8.8
1997	69,557	63,919	—	5,638	91.9	—	8.1
1998	75,071	70,137	—	4,934	93.4	—	6.6
1999	140,429	132,662	—	7,767	94.5	—	5.5
2000	173,470	163,945	—	9,525	94.5	—	5.5
2001	143,902	133,768	—	10,134	93.0	—	7.0
2002	172,527	160,107	—	12,420	92.8	—	7.2
2003	213,212	201,949	—	11,263	94.7	—	5.3
2004	221,129	210,797	—	10,332	95.3	—	4.7
2005	110,072	103,335	—	6,737	93.9	—	6.1
2006	40,605	38,044	—	2,561	93.7	—	6.3
2007	18,172	17,118	—	1,054	94.2	—	5.8
2008	18,933	18,030	2	901	95.2	^f	4.8
2009	29,137	28,312	39	786	97.2	0.1	2.7
2010	34,575	33,246	434	895	96.2	1.3	2.6
2011	33,460	31,423	1,069	968	93.9	3.2	2.9

^a Data reflect results as of February 2012. The ultimate numbers of continuations and cessations are subject to change until all appeals are final.

^b Percentage of decisions at this level.

^c Percentage of cessations at this level appealed to next level.

^d We do not reflect the status and disposition of cases in the Federal courts here. However, we have included information on the status and disposition at ODAR for cases remanded to us by the courts. The excluded experience in the Federal courts has a minimal impact on the number of continuations.

^e Number of persons appealing beyond the reconsideration level.

^f Less than 0.05 percent.

Source: Social Security Administration, Office of Quality Performance.

**ESTIMATED FEDERAL BENEFIT SAVINGS FROM PERIODIC CONTINUING DISABILITY
REVIEW INITIAL CESSATIONS IN FISCAL YEAR 2011**

This appendix presents estimates of Federal benefit savings expected to ultimately ensue from continuing disability reviews (C-DR) that: (1) we initiated centrally; and (2) which resulted in an initial cessation or an initial field office (FO) failure-to-cooperate (FTC) termination in fiscal year (FY) 2011. Table B1 provides actual numbers of such initial cessations/terminations, along with the estimated numbers of such cessations/terminations that will ultimately result in termination of disability benefits. The totals in the table are disaggregated according to whether the reviews were initiated under the Old-Age and Survivors Insurance and Disability Insurance (OASDI) programs (title II of the Social Security Act (Act)) or under the Supplemental Security Income (SSI) program (title XVI of the Act). The estimates of ultimate cessations/terminations reflect all information on the status of appeals of these initial cessations/terminations as of February 2012 as well as estimates of the final disposition of such cases as based on the latest information concerning appeal and reversal rates at various stages of the appeals process.

**Table B1.—Cessations/Terminations Resulting From Periodic Continuing
Disability Reviews Initiated Centrally^a**

CDR cessations/terminations	CDRs initiated under title II			CDRs initiated under title XVI	Total
	Title II only reviews	Title II reviews involving title XVI recipients	Subtotal, title II		
Cessations from full medical reviews					
Initial cessations in FY 2011	12,507	4,605	17,112	73,413	90,525
Estimated ultimate cessations (after all appeals) resulting from initial cessations shown on previous line.	6,207	2,155	8,362	54,313	62,675
FO FTC terminations					
Initial FTC terminations in FY 2011	495	195	690	1,073	1,763
Estimated final FTC terminations after all appeals	469	179	648	1,068	1,716
Estimated total final cessations/terminations . . .	6,676	2,334	9,010	55,381	64,391

^a Does not include work CDRs or other CDRs initiated outside of the Social Security Administration's centralized process for initiating CDRs. See main text for further explanation.

Table B2 presents estimates of the Federal benefit savings resulting from CDRs for which initial cessations or initial FO FTC terminations of disability benefits occurred in FY 2011. We base these savings on the estimates of ultimate cessations/terminations that will remain after the appeals process is complete, as shown in table B1. We present the estimated CDR savings in table B2 for: (1) the OASDI program; (2) the SSI program; (3) the Medicare programs; and (4) the Medicaid program. The estimated savings for the Medicare programs include savings under the Hospital Insurance (HI) program and Parts B & D of the Supplementary Medical Insurance (SMI) program.

Table B2 displays the estimated benefit savings in three ways. First, we show the reductions in benefit payments for each fiscal year from 2010 through 2020. Second, we present medium-range (25-year) and long-range (75-year) savings for the programs financed by payroll taxes. We express these estimates as a percent of taxable payroll, and each is in the "negligible" range (i.e., less than 0.005 percent of taxable payroll). The third set are estimates of the present value of Federal benefits saved because of the CDRs, valued as of September 30, 2011. These estimates may be thought of as the amount of money as of September 30, 2011 that, together with earned interest, would be just sufficient to pay the estimated amount of benefits that will not be payable because of the CDRs.

We base all estimates on the intermediate assumptions of the 2012 Trustees Reports and the assumptions used for the 2012 SSI Annual Report. The Office of the Chief Actuary, Social Security Administration, prepared the estimates of OASDI and SSI savings. The Office of the Actuary, Centers for Medicare & Medicaid Services, prepared the Medicare and Medicaid estimates.

Table B2.—Estimated Federal Benefit Savings From Periodic Medical Continuing Disability Reviews Initiated Centrally^a With Initial Cessations and Initial FO FTC Terminations in FY 2011 by Program

Fiscal year	Program						Total
	OASDI	SSI ^b	Medicare			Medicaid ^b	
			HI	SMI-Part B ^c	SMI-Part D ^c		
A. Estimated amount of reduction in benefit payments (in millions)							
2010 ^d	\$2	\$2	—	—	—	—	\$4
2011	34	89	\$7	\$4	\$5	\$30	169
2012	90	263	21	15	16	103	507
2013	105	347	26	16	19	135	648
2014	100	325	26	16	19	23	509
2015	90	302	23	15	19	-12	437
2016	81	302	21	14	18	-15	421
2017	75	262	21	14	18	-7	383
2018	71	227	20	14	18	-1	349
2019	66	231	20	14	18	^g /	349
2020	62	216	19	14	18	4	333
11-year total	775	2,566	205	137	169	258	4,110
B. Estimated medium-range (25-year) and long-range (75-year) savings (as a percent of taxable payroll ^f)							
25-year: 2011-35	^g /	—	^g /	—	—	—	—
75-year: 2011-86	^g /	—	^g /	—	—	—	—
C. Present value of estimated lifetime benefits saved, as of the end of fiscal year 2011 (in millions)							
	1,170	3,140	302	245	280	276	5,413

^a We base the savings estimates on the 90,525 initial cessations and 1,820 initial FO FTC terminations from CDRs initiated centrally for which we have demographic, appellate, and benefit information. In particular, the estimates do not include savings for 3,631 initial cessations and 93 initial FO FTC terminations generated outside of the centrally-initiated CDR scheduling process (e.g., voluntary or third-party reports of medical improvement) for which we have no such information.

^b For the SSI and Medicaid programs, the savings are the Federal share of total benefit savings. Under the Affordable Care Act (ACA), SSI disabled children and disabled adults who would lose their categorical eligibility for Medicaid due to a CDR termination will continue to receive Medicaid beginning January 1, 2014, if their family income is less than 138 percent of poverty and their State of residence has elected to expand Medicaid coverage to this level of poverty. For disabled adults qualifying for Medicaid under that ACA provision, the Federal matching rate for their Medicaid costs will be significantly higher than the regular Medicaid matching rate, resulting in increased Federal costs attributable to those CDR terminations.

^c For the SMI program, the savings are the net effect of a reduction in benefit payments and a reduction in premium receipts.

^d Estimated savings in FY 2010 are attributable to the FO FTC terminations. The initial FO terminations in FY 2011 had payments suspended in FY 2010 due to an FTC with the FO in a CDR.

^e Between -\$0.5 million and \$0.5 million.

^f We present medium-range and long-range savings for those programs financed by payroll taxes. Includes estimated savings from suspended payments in FY 2010 attributable to FO FTC terminations in FY 2011.

^g Less than 0.005 percent.

Notes:

1. We base the estimates on the intermediate assumptions from the 2012 Trustees Reports and assumptions underlying the 2012 SSI Annual Report.

2. Federal SSI payments due on October 1st in FYs 2012, 2017, and 2018 are included with payments for the prior year.

3. The Office of the Chief Actuary in the Social Security Administration provided the estimates shown in the above table for savings in the OASDI and SSI programs. The Office of the Actuary in the Centers for Medicare & Medicaid Services provided the corresponding estimates for savings in the Medicare and Medicaid programs.

4. Totals may not equal sum of components due to rounding.

CONTINUING DISABILITY REVIEWS RESULTING FROM WORK ACTIVITY

Work continuing disability reviews (CDR) are different from the medical CDRs that are the focus of this report. Work CDRs evaluate whether a Social Security beneficiary, who is receiving benefits on the basis of a disability, is engaging in substantial gainful activity (SGA) after the trial work period (TWP). Reports of work and earnings trigger work CDRs.

The definition of disability involves the inability to engage in SGA. Disability beneficiaries must report any changes in work activity, and we must determine whether such work constitutes SGA. Additionally, our Continuing Disability Review Enforcement Operation (CDREO) is an automated process that identifies work activity by matching earnings reported to the Internal Revenue Service and posted to our Master Earnings File with the information in our other records.

When we learn of work activity, we analyze the work activity to determine if we must investigate further. Many work reports and CDREO alerts may not require a work CDR because the work occurs during the TWP. In addition, many CDREO alerts may identify payments that are not earnings from work activity (e.g., sick pay or long-term disability benefits); these payments also do not require a work CDR.

In fiscal year (FY) 2011, we completed 329,600 work CDRs. The results of those work CDRs are displayed in the table below.

Work CDRs in FY 2011	
Work CDRs completed during FY 2011	329,600
Reviews resulting in a finding of cessation of disability, or a subsequent reinstatement or suspension of benefits in the extended period of eligibility.....	132,100
Review resulting in no cessation of disability	197,500

A work CDR may result in a determination that disability has ceased because earnings constitute SGA for at least 1 month after the TWP or a determination that disability continues because earnings do not constitute SGA.

SUMMARY OF RELEVANT LEGISLATION FOR CONTINUING DISABILITY REVIEWS

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
<i>Section 1614(a)(4) of the Social Security Act (P.L. 92-603)</i>	October 30, 1972	<ol style="list-style-type: none"> 1.) Gives SSA the discretionary authority to conduct CDRs on Supplemental Security Income (SSI) recipients. 2.) On September 28, 1994, SSA issued a <u>Federal Register</u> notice that periodic SSI CDRs would begin on October 1, 1994. 	SSI
<i>Section 221(i) of the Social Security Act (P.L. 97-455)</i>	Act amended January 1983	<p>Requires SSA to submit an annual report to Congress on:</p> <ol style="list-style-type: none"> 1.) Periodic CDRs mandated by the <i>Social Security Disability Amendments of 1980</i>; and 2.) Determinations that the Commissioner of Social Security made to waive the requirement that continuing eligibility of disability beneficiaries with nonpermanent disabilities be reviewed at least once every 3 years. 	Old-Age, Survivors, and Disability Insurance (OASDI)
<i>Social Security Independence and Program Improvements Act of 1994 (P.L. 103-296)</i>	August 15, 1994	<p>Requires SSA to:</p> <ol style="list-style-type: none"> 1.) Conduct medical reviews on at least one-third of individuals attaining age 18 each year during fiscal year (FY) 1996-1998. This provision was repealed by P.L. 104-193. 2.) Perform CDRs for a minimum of 100,000 SSI recipients during each of FYs 1996, 1997, and 1998. 3.) Report activities on these provisions to the House Committee on Ways and Means and the Senate Committee on Finance no later than October 1, 1998.¹ 	SSI
<i>Contract with America Advancement Act of 1996 (P.L. 104-121)</i>	March 29, 1996	<ol style="list-style-type: none"> 1.) Provides for an adjustment in the discretionary spending caps for increase funding for CDRs for FY 1996, \$260 million; for FY 1997, \$360 million; for FY 1998, \$570 million; and for FY 1999 through FY 2002, \$720 million annually. 2.) Requires a Report to Congress annually 	OASDI/SSI

¹ SSA submitted this information in the FY 1997 CDR Report to Congress released to Congress on August 25, 1998.

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
		for FYs 1996 through 2002 on the amount of money spent on CDRs, the number of reviews conducted (by category), the disposition of such reviews (by program) and the estimated savings (by program) over the short-, medium-, and long-term.	
<i>Personal Responsibility and Work Opportunity Reconciliation Act of 1996</i> (P.L. 104-193)	August 22, 1996	<p>Requires SSA to:</p> <ol style="list-style-type: none"> 1.) Redetermine the eligibility of SSI beneficiaries using adult initial criteria during the 1-year period beginning with the beneficiary's 18th birthday. (Modified by P.L. 105-33) 2.) Perform a CDR not later than 12 months after birth for recipients whose low birth weight is a contributing factor material to the determination of their disability. (Modified by P.L. 105-33) 3.) Conduct CDRs for SSI recipients under age 18 with non-permanent disabilities at least every 3 years. Representative payees of these recipients must present evidence that the child is, and has been, receiving treatment considered medically necessary and available. <p>The legislation authorized \$150 million in FY 1997 and \$100 million in FY 1998 in additional funds to assist with these additional mandates.</p>	SSI
<i>Balance Budget Act of 1997</i> (P.L. 105-33)	August 5, 1997	<ol style="list-style-type: none"> 1.) Provides SSA with the authority to make redeterminations of disabled childhood recipients who attain age 18, using the adult eligibility criteria, more than 1 year after the date such recipient attains age 18. 2.) Permits SSA to schedule a CDR for low birth weight babies at a date after the first birthday if the Commissioner determines the impairment is not expected to improve within 12 months of the child's birth. 3.) 	SSI

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
<i>Ticket to Work and Work Improvement Act of 1999 (P.L. 106-170)</i>	December 17, 1999	1.) Prohibits the Commissioner from initiating CDRs during the period a beneficiary is using (as defined by the Commissioner) a Ticket to Work and Self-Sufficiency. 2.) Effective January 1, 2002, prohibits the Commissioner from scheduling medical CDRs due solely to an individual's work activity after the individual has been receiving benefits for 2 years. An individual will still be subject to regularly scheduled CDRs not triggered by work. Work activity will still be evaluated to determine eligibility for cash benefits.	OASDI/SSI