

August 21, 2019

The Honorable Charles E. Grassley Chairman, Committee on Finance United States Senate Washington, DC 20510

Dear Mr. Chairman:

We enclose our report on continuing disability reviews (CDR) for fiscal year (FY) 2015. In FY 2015, we completed 1,971,812 periodic CDRs to ensure that only those beneficiaries who remain disabled continue to receive monthly benefits. Of this total, we completed 799,013 full medical CDRs, despite handling a near record number of initial disability claims receipts.

We prioritized the cases that were most likely to have medical improvement so that we used our resources on the CDRs with the best rate of return. Based on these reviews in FY 2015, we made initial determinations that benefits should be ceased in 209,270 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 137,195 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 \$14.3 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 \$11.4 to \$1 for FYs 1998 through 2014. For FY 2015, we estimate that the CDR process yielded a savings-to-costs ratio of \$19.9 to \$1. The higher savings-to-costs ratio for FY 2015 is attributable to a variety of factors, including changes in the specific mix of CDR cases conducted, revised economic assumptions, refinements in the models used to estimate the CDR benefit savings, and variation in the cost of conducting these reviews.

The Bipartisan Budget Act (BBA) of 2015 includes a provision that authorizes a stream of funding for our agency, which would enable us to significantly expand our program integrity work. In recent years, we have received increased program integrity funding and further reduced the CDR backlog. We are pleased to report that we are now current with CDRs. If that funding continues to be provided to us by future appropriations, the resources would enable us to continue to remain current with full medical CDRs, and thus help ensure that only those individuals eligible for OASDI and SSI disability benefits continue to receive them. Based on the high savings-to-costs ratio yielded from conducting medical CDRs, the BBA funding will help us to continue to yield a significant positive return on that investment.

Page 2 – The Honorable Charles E. Grassley

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

I am also sending this report to Chairman Neal.

Sincerely,

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Andrew Saul Commissioner

Enclosure

cc:

The Honorable Ron Wyden, Ranking Member U.S. Senate Committee on Finance



August 21, 2019

The Honorable Richard E. Neal Chairman, Committee on Ways and Means United States House of Representatives Washington, DC 20515

Dear Mr. Chairman:

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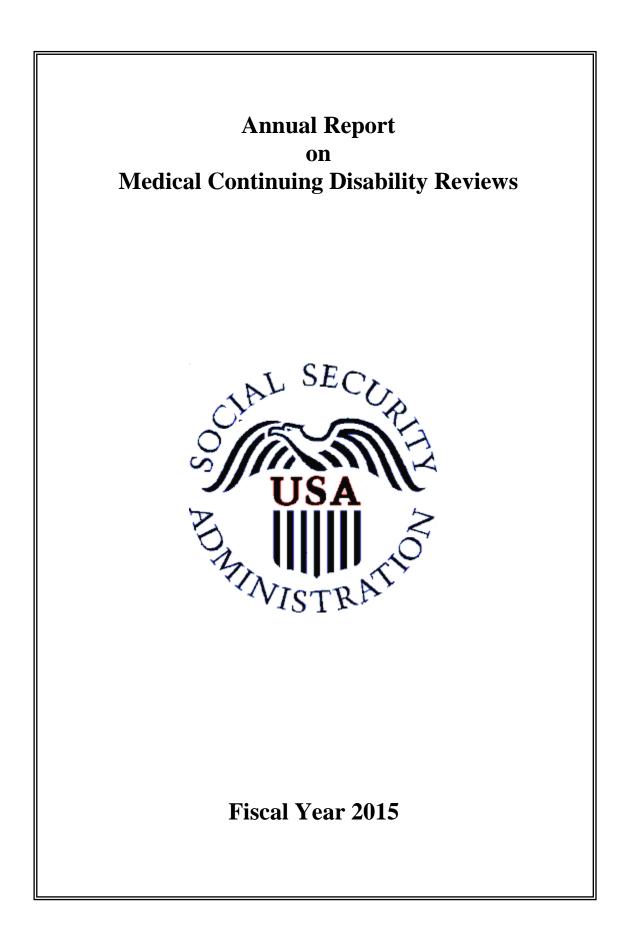
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Andrew Saul Commissioner

Enclosure

cc:

The Honorable Kevin Brady, Ranking Member U.S. House Committee on Ways and Means



ANNUAL REPORT ON MEDICAL CONTINUING DISABILITY REVIEWS FISCAL YEAR 2015

Overview

We perform medical continuing disability reviews (CDR)¹ 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 adult cases for which there is a lower likelihood of demonstrating medical improvement. In those cases, we send a questionnaire (mailer) to the beneficiary in order to obtain additional information, which we then use to determine if a full medical review is appropriate. Full medical reviews are expensive because each one requires a new medical evaluation and disability determination.

In fiscal year (FY) 2015, we spent \$717 million² to complete 1,971,812 periodic CDRs. Of this total, we completed 1,172,799 mailer CDRs. We also completed 799,013 full medical reviews that resulted in 209,270 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 137,195 individuals, along with their eligible dependents. OCAct also estimates that the periodic CDRs completed in FY 2015 will result in a present value of \$14.3 billion in lifetime net Federal program benefits saved.³ For FY 2015, the estimated ratio of net program savings to administrative costs is approximately \$19.9 to \$1.⁴

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 2015. We also are reporting on periodic CDRs for Supplemental Security Income (SSI) recipients. Section 1614(a) (4) of the Act gives us discretionary authority to conduct periodic CDRs on SSI

¹ Throughout this report, the term "CDR" will be used to refer exclusively to medical CDRs. Therefore, this report will not include any aspects concerning work CDRs. Some information on these work CDRs can be found in appendix D.

² The \$717 million in FY 2015 administrative costs include the fully-loaded costs (including overhead) of periodic CDRs (mailer CDRs and full medical reviews funded from dedicated Program Integrity funding) as well as appeals of CDR cessations (reconsiderations, hearings, and appeals council reviews funded from base Limitation on Administrative Expenses funding).

³ Estimated Federal program benefit savings include Medicare and Medicaid program effects. The Office of the Actuary in the Centers for Medicare and Medicaid Services provided the estimates for these programs.

⁴ See the "Cost Effectiveness" section for a full description and explanation of this ratio.

recipients. On September 28, 1994, we issued a <u>Federal Register</u> notice that we would begin conducting periodic SSI CDRs on October 1, 1994.

In addition, we provide: (1) data and information on periodic CDRs processed in FY 2015 in Appendix A; (2) detailed historical waterfall data and information on periodic CDRs processed in FYs 1993-2015 in Appendix B; (3) estimated Federal benefit savings resulting from periodic CDRs completed in FY 2015 in Appendix C; (4) data on CDRs initiated as the result of work and reported earnings in Appendix D; and (5) a summary of CDR legislation in Appendix E.

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.⁵

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 outside the centralized process 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 2015 CDR Workload

In FY 2015, we completed 1,971,812 periodic CDRs, which resulted in 204,649 initial cessations and 4,621 terminations due to beneficiaries' failure to cooperate (FTC) in the field office (FO) CDR process. Of the total 1,971,812 CDRs, we initiated 1,945,070 reviews under our centrally initiated review process. Of the 4,621 beneficiaries we terminated because of FO FTC, 4,474 were from centrally initiated CDRs and 147 from outside the centralized process. For determining cost effectiveness, we consider only those cases initiated under our centralized release process.

We released approximately 1.6 million CDR mailers. After reviewing profile data and the mailer responses, we completed 1,172,799 mailers, deferring a full medical review. We referred the

⁵ At this time, we do not use the mailer process for SSI disabled children and for SSI child recipients with a medical redetermination upon attainment of age 18 under the adult disability standard.

cases we could not complete under the mailer process because of an indication of medical improvement to the DDSs for a full medical review.⁶

We completed 794,392 full medical CDRs. Of this total, we completed 767,797 centrally initiated reviews, 12,476 reviews initiated outside of our centralized process, and 14,119 administrative closures. We also reported 4,621 initial FO FTC terminations.⁷

We issued initial cessation determinations for 201,304 individuals or approximately 10.3 percent of the 1,945,070 centrally initiated reviews. We also terminated benefits in 4,474 FO FTC cases. OCAct estimates that, after all appeals, these decisions will result in termination of benefits for 137,195 individuals.

The table in Appendix A shows a breakout by program of periodic CDRs processed in FY 2015 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 B 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.⁸

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. Thus, our annual budget request, related performance documents, and annual Congressional Operating Plan include the number of CDRs we can complete.

Estimated Savings

For the estimated 137,195 final cessations, resulting from centrally initiated periodic CDRs in the DDSs and FOs, we estimate:

- Over the period FY 2014-FY 2024, net Federal benefit reductions for the OASDI, SSI, Medicare, and Medicaid programs will be about \$9.9 billion;
- The present value of future net Federal benefits saved for the OASDI, SSI, Medicare, and

⁶ We did not work all mailers released in FY 2015. Because of the time needed to complete a case, we worked some mailers released in FY 2014, and some mailers released in FY 2015 were pending at the end of the fiscal year. We will report these cases in future reports.

⁷ Beneficiaries who failed to comply with our field office's (FO) 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 failure-to-cooperate (FTC) events that occur after the reviews are underway in the full medical review column of the chart in Appendix A.

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

Medicaid programs is \$14.3 billion; and

• Net 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, for reviews initiated under the OASDI program.

We provide year-by-year estimates and estimates by program in Appendix C. These estimates do not include savings from an additional 3,345 initial DDS cessations resulting from 12,476 CDRs we did not initiate centrally, or from 147 FO terminations that resulted from FO FTC determinations for CDRs that we did not initiate centrally.

Cost Effectiveness

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 cost and efficiency of conducting CDRs, the scheduling of CDRs, the distribution of CDRs by program and type of beneficiary (e.g., OASDI vs. SSI; SSI adults vs. SSI children), and the estimates of the resulting net Federal benefit savings for CDRs with an initial decision completed in the year. The ratio of benefit savings to administrative costs computed for each fiscal year reflects (1) estimated net future lifetime Federal benefit savings for the CDRs with an initial decision completed in that year, and (2) the total administrative cost incurred in that year for conducting all CDRs in process at any stage in the year (including cases in process of an appeal), regardless of when the initial decision has been or will be completed.

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 on average per \$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,⁹ and accounting for the Federal share of Medicaid savings that result from conducting CDRs on SSI recipients, the estimated savings-to-cost ratios have generally increased over the last few years, reaching a level of about \$14.1 to \$1 reported for FY 2014. Over the period FYs 1996 through 2014, these estimated ratios have averaged slightly over \$11.4 to \$1.

For FY 2015 we compute the ratio of Federal benefit program savings from CDR cessations to CDR administrative costs in the year to be approximately \$19.9 to \$1. This ratio is computed by dividing (1) \$14.3 billion—the estimated present value of total net lifetime OASDI, Federal SSI, Medicare, and Federal Medicaid benefits saved from periodic CDRs with an initial cessation in FY 2015—by (2) the \$717 million we spent in FY 2015 to conduct periodic CDRs.

Much of the increase over the reported ratio for FY 2014 is the result of the timing of the processing of the initial decision of CDRs in 2014 and 2015. Preliminary work on a CDR at the

⁹ 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.

FO or DDS is often started in the year prior to the year an initial decision is issued, and work associated with the appeal of an initial cessation often occurs in one or more years following the year of the initial cessation. In FY 2015, CDR initial decisions increased substantially. A substantial amount of preparatory work was done in FY 2014 for the initial CDR decisions that were made in 2015, and so the costs of this preparatory work were associated with the 2014 initial decisions rather than with the 2015 decisions. In addition, costs for all future appeals from the large number of initial cessations in 2015 are not fully reflected in the \$717 million administrative cost figure for FY 2015, thus further contributing to an understatement of the costs associated with the initial decisions in 2015, and correspondingly overstating the true savings-to-cost ratio for 2015 initial CDR decisions. To some extent, this shifting of work and costs between fiscal years happens every fiscal year. However, the large increase in CDRs completed in FY 2015, combined with the availability of resources in FY 2014 to do preliminary work on cases that would have initial decisions completed in FY 2015, magnifies this effect.

As noted in our prior CDR reports to the Congress, the ratio of net benefit savings to administrative cost as computed is a rough approximation of the true savings-to-cost ratio for CDRs completed in 2015 because the \$14.3 billion savings in the numerator of the ratio is the net future Federal benefit savings estimated to result from CDRs with an initial cessation in FY 2015, while the \$717 million in administrative costs in the denominator of the ratio is the estimated total amount spent on all CDR activity in FY 2015. Therefore, the change in the ratio of net Federal benefit savings to administrative costs should be viewed over a period of several years, understanding that the change from one year to the next will often be more or less than the general trend in the ratio.

Quality Assurance

During FY 2015, our Quality Assurance (QA) review of 20,821 periodic CDRs handled by the DDSs showed an overall performance accuracy rate for continuances and cessations of 96.7 percent. Specifically, FY 2015 QA reviews reflect the following:

QA Review Results								
Program	Number Reviewed	Accuracy Rate						
OASDI only	6,376	96.5						
SSI only	12,603	96.8						
Concurrent (both OASDI and SSI)	1,842	96.5						

Conclusion

During the past 20 fiscal years, we completed 27.1 million periodic CDRs. For part of this 20-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.

The Bipartisan Budget Act (BBA) of 2015¹⁰ includes a provision that authorizes a stream of funding for our agency, which would enable us to significantly expand our program integrity work. In recent years, we have received increased program integrity funding and further reduced the CDR backlog. We are pleased to report that we are now current with CDRs. If that funding continues to be provided to us by future appropriations, the resources would enable us to continue to remain current with full medical CDRs, and thus help ensure that only those individuals eligible for OASDI and SSI disability benefits continue to receive them. Based on the high savings-to-costs ratio yielded from conducting medical CDRs, the BBA funding will help us to continue to yield a significant positive return on that investment.

¹⁰ P. L. 114-74, 129 Stat. 584

		0	s Processed		,		ons/terminatio	ns
-						ns from full Il reviews	Estimated	Estimated
Program involvement	Total CDRs processed	Mailers only	Initial FO FTC terminations ^a	Full medical reviews	Initial cessations	Estimated cessations after appeals	final FO FTC terminations	total final cessations/ terminations
I. Periodic CDRs (initiated centrally)								
Total OASDI ^b	1,273,792	983,332	2,077	288,383	46,962	22,887	1,949	24,836
OASDI Only Disabled workers	916,239	803,514 712,856	1,526 1,402	213,961 201,981	33,723 32,051	16,070 15,175	1,443 1,320	17,513 16,495
Auxiliaries and survivors Concurrent OASDI and SSI		90,658 179,818	124 551	11,980 74,422	1,672 13,239	895 6,817	123 506	1,018 7,323
Disabled workers Auxiliaries and survivors	/	124,604 55,214	401 150	58,623 15,799	10,520 2,719	5,278 1,539	362 144	5,640 1,683
Total SSI Only Disabled adults	346,767	189,467 189,467	2,397 313	479,414 156,987	154,342 24,336	109,980 11,052	2,379 309	112,359 11,361
Disabled children Low birth weight Age 18 redeterminations	14,768	0 0 0	2,084 447 935	322,427 14,321 84,499	130,006 8,481 48,036	98,928 7,273 38,201	2,070 445 931	100,998 7,718 39,132
Other SSI children		0	702	223,607	73,489	53,454	694	54,148
Total OASDI and SSI	1 0 45 0 70	1 172 700	4 47 4		001 004	122.077	4 220	127 105
(initiated centrally)	1,945,070	1,172,799	4,474	767,797	201,304	132,867	4,328	137,195
II. Other Periodic CDRs ^c (not initiated centrally)	12,623	0	147	12,476	3,345	(d)	(d)	(d)
III. Administrative Closures ^e	14,119	0	0	14,119	0	N/A	N/A	N/A
Total Periodic CDRs	1,971,8 <u>1</u> 2	1,172,799	4,621	794,392	204,649	N/A	N/A	N/A

Periodic Continuing Disability Reviews (CDR) Processed in FY 2015

a Beneficiaries who failed to comply with our field office's (FO) 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 failure-to-cooperate (FTC) events that occur after the reviews are underway in the full medical review column.

b Old-Age, Survivors, and Disability Insurance (OASDI) program under title II of the Social Security Act.

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.

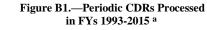
HISTORICAL EXPERIENCE UNDER THE CONTINUING DISABILITY REVIEW PROCESS

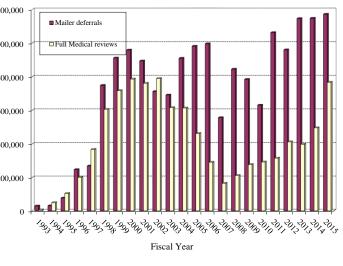
Following enactment of the Social Security Disability Amendments of 1980, section 221(i) of the Social Security Act (Act) generally requires us to review the continuing eligibility of disabled beneficiaries entitled to benefits under the Old-Age, Survivors, and Disability Insurance (OASDI) programs (title 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 B1 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 B1. 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 4.474 centrally initiated medical CDRs in fiscal year (FY) 2015.

Review Was	Deferred Bas Mailer Profi		sults of the	1,200,000
Fiscal year	Title II	Title XVI	Total	
1993	29,691	_	29,691	1,000,000 - Full 1
1994	30,995		30,995	
1995	78,435	_	78,435	000.000
1996	191,738	56,290	248,028	800,000
1997	167,759	101,856	269,615	
1998	585,267	164,116	749,383	600,000
1999	503,186	409,111	912,297	000,000
2000	698,579	261,129	959,708	
2001	541,491	353,138	894,629	400,000
2002	508,028	204,872	712,900	
2003	569,093	122,853	691,946	
2004	725,478	185,522	911,000	200,000 -
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	10,10,10
2009	537,373	247,650	785,023	ů ,
2010	455,257	176,358	631,615	
2011	889,284	174,121	1,063,405	
2012	711,643	249,426	961,069	^a Excludes 4,
2013	939,470	207,477	1,146,947	
2014	889,603	259,235	1,148,838	
2015	983,332	189,467	1,172,799	

Table B1.—Cases for Which a Full Medical





,474 FTC terminations processed in FY 2015.

Tables B2-B6 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, post-transplant end-stage renal disease cases, and vocational rehabilitation reports).

			Initi	al decisions			
Fiscal year of initial DDS	Total initial —	Continuations		Cessations	AĮ	ppeals to reconside	eration
decision	DDS decisions	Number	Percent ^b Numb	ber Percent ^b	Number	Percent ^c	
Title II only revi	ews						
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	3,092	55.8
2008	71.150	64,057	90.0	7.093	10.0	4,208	59.3
2009	77,551	71,308	91.9	6,243	8.1	3,745	60.0
2010	84,835	76,965	90.7	7,870	9.3	4,900	62.3
2011	97,696	86,041	88.1	11,655	11.9	6,930	59.5
2012	139,251	119,297	85.7	19,954	14.3	12,067	60.5
2012	136,828	118,862	86.9	17,966	13.1	11,934	66.4
2013	180,706	156,280	86.5	24,426	13.5	17,416	71.3
2014	201,981	169,930	84.1	32,051	15.9	22,326	69.7
Title II reviews i	nvolving title XVI recip	pients					
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.
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	58.5
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	61.0
2008	35,914	32,125	89.4	3,789	10.6	2,467	65.1
2009	35,099	32,191	91.7	2,908	8.3	1,948	67.0
2010	32,419	29,000	89.5	3,419	10.5	2,287	66.9
2010	28,597	25,017	87.5	3,580	12.5	2,287	64.
2012	38,306	32,488	84.8	5,818	15.2	3,824	65.
2012	39,475	34,044	86.2	5,431	13.8	3,845	70.8
2013	49,898	42,699	85.6	7,199	14.4	5,318	70.0
2014	58,623	42,099	82.1	10,520	14.4	7,537	73.5
2013	38,023	40,105	02.1	10,520	1/.7	1,551	/1.0

Table B2.—Title II Disabled Worker Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision, Level of Decision, and Program Involvement

	Initial decisions										
Fiscal year of initial DDS	Total initial	Continuations		Cessations	Aj	opeals to reconside	eration				
decision	DDS decisions	Number	Percent ^b Number	Percent ^b	Number	Percent ^c					
Total reviews, tit	le 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	5,090	57.9				
2008	107,064	96,182	89.8	10,882	10.2	6,675	61.3				
2009	112,650	103,499	91.9	9,151	8.1	5,693	62.2				
2010	117,254	105,965	90.4	11,289	9.6	7,187	63.7				
2011	126,293	111,058	87.9	15,235	12.1	9,248	60.7				
2012	177,557	151,785	85.5	25,772	14.5	15,891	61.7				
2013	176,303	152,906	86.7	23,397	13.3	15,779	67.4				
2014	230,604	198,979	86.3	31,625	13.7	22,734	71.9				
2015	260,604	218,033	83.7	42,571	16.3	29,863	70.1				

Table B2.—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.)

			Reconside	erations		_	Appe	als beyond re	econsiderati	on ^d
Fiscal year of initial DDS		Continua	ations		Appeals to reconside			Continuations		
decision	Pending	Number	Percent ^b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessations
Title II only review	ç									
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
1994		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	2,010
1997	_	13,243	64.3	7,338	5,587	76.1	_	2,795	50.0	2,000
1997		16,849	69.0	7,569	5,867	70.1	_	3,123	53.2	2,792
1999	_	10,045	71.1	4,086	2,999	73.4	_	1,557	51.9	1,442
2000		10,045	71.0	4,000	2,771	66.9	_	1,382	49.9	1,389
2000		9,694	71.6	3,849	2,771 2,316	60.2		1,382	49.3	1,389
2001	_	9,094 9,676	71.0	3,933	2,510	65.5	_	1,141	49.4	1,175
2002	_	5,865	68.7	2,666	1,746	65.5	_	824	47.2	922
2003		5,518	66.3	2,802	1,893	67.6	_	902	47.6	922
2004 2005	_	6,087	68.1	2,802	1,893	69.0	_	902 996	50.6	973
2005	_	4,364	65.7	2,835	1,909	69.0 74.4		863	50.8	836
2008	_		69.9	2,285		74.4	_	322	30.8 47.6	354
2007 2008	_	2,160		1,262	676 996			522 504		492
	1	2,946	70.0	1,262		78.9	_		50.6 43.4	
2009		2,710	72.4		752	72.7		326		426
2010	1	3,443	70.3	1,456	1,125	77.3		478	42.5	647
2011		4,585	66.2	2,345	1,785	76.1	3	692	38.8	1,090
2012	5	7,740	64.2	4,322	3,220	74.5	118	1,164	37.5	1,938
2013	63	7,836	66.0	4,035	2,901	71.9	717	785	35.9	1,399
2014	613	11,179	66.5	5,624	3,878	69.0	2,477	531	37.9	870
2015	7,834	10,378	71.6	4,114	2,337	56.8	2,101	82	34.7	154
Title II reviews invo	olving title X									
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	_	3,484	64.5	1,915	1,374	71.7	_	612	44.5	762
2006		2,742	63.8	1,556	1,156	74.3	_	528	45.7	628
2007		1,350	67.6	648	502	77.5	_	223	44.4	279
2008		1,671	67.7	796	618	77.6	_	269	43.5	349
2009		1,336	68.6	612	484	79.1	_	179	37.0	305
2010		1,538	67.2	749	573	76.5		197	34.4	376
2011		1,428	61.6	890	688	77.3	1	203	29.5	484
2012		2,282	59.7	1,542	1,191	77.2	35	336	29.1	820
2012	22	2,202	60.5	1,510	1,071	70.9	244	227	27.4	600
-010			60.4	2,035	1,422	69.9	966	113	24.8	343
2014	184	3,099	00.4	2.011	1.47.7	(14.4	900		7.4 A	141

Table B2.—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.)	

			Reconside	erations			Appeals beyond reconsideration ^d			
Fiscal year of initial DDS		Continuations			Appeals to beyond reconsideration			Continuations		
decision	Pending	Number	Percent b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessations
Total reviews, title	II disabled w	orkers								
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	_	8,929	65.4	4,722	3,197	67.7		1,453	45.4	1,744
2005	_	9,571	66.7	4,768	3,343	70.1		1,608	48.1	1,735
2006	_	7,106	64.9	3,839	2,855	74.4		1,391	48.7	1,464
2007	_	3,510	69.0	1,580	1,178	74.6		545	46.3	633
2008	_	4,617	69.2	2,058	1,614	78.4		773	47.9	841
2009	1	4,046	71.1	1,646	1,236	75.1		505	40.9	731
2010	1	4,981	69.3	2,205	1,698	77.0		675	39.8	1,023
2011	_	6,013	65.0	3,235	2,473	76.4	4	895	36.2	1,574
2012	5	10,022	63.1	5,864	4,411	75.2	153	1,500	35.2	2,758
2013	85	10,149	64.7	5,545	3,972	71.6	961	1,012	33.6	1,999
2014	797	14,278	65.1	7,659	5,300	69.2	3,443	644	34.7	1,213
2015	10,574	13,584	70.4	5,705	3,248	56.9	2,950	96	32.2	202

 Table B2.—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.)

		Initial Decisio	on, Level of Decisio	-			
	-		2	case information by		s of February 2016	
	_		Numbers of cases		Numbers as a	percentage of total i	
Fiscal year of initial DDS decision	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 review	ws						
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	_	9,124	93.1	_	6.9
2005	133,945	124,230	_	9,715	92.7	_	7.3
2006	103,645	96,437	_	7,208	93.0	_	7.0
2007	40,703	37,644	_	3,059	92.5	_	7.5
2008	71,150	67,507	_	3,643	94.9	_	5.1
2009	77,551	74,344	1	3,206	95.9	f	4.1
2010	84,835	80,886	1	3,948	95.3	f	4.7
2011	97,696	91,318	3	6,375	93.5	f	6.5
2012	139,251	128,201	123	10,927	92.1	0.1	7.8
2013	136,828	127,483	780	8,565	93.2	.6	6.3
2014	180,706	167,990	3,090	9,626	93.0	1.7	5.3
2015	201,981	180,390	9,935	11,656	89.3	4.9	5.8
Title II reviews in	volving title XV	I 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	65,532	_	4,839	93.1	_	6.9
2006	62,642	58,739	_	3,903	93.8	_	6.2
2007	23,237	21,564	_	1,673	92.8	_	7.2
2008	35,914	34,065	_	1,849	94.9		5.1
2009	35,099	33,706	_	1,393	96.0	_	4.0
2010	32,419	30,735	_	1,684	94.8		5.2
2011	28,597	26,648	1	1,948	93.2	f	6.8
2012	38,306	35,106	35	3,165	91.6	.1	8.3
2013	39,475	36,584	266	2,625	92.7	.7	6.6
2014	49,898	45,911	1,150	2,837	92.0	2.3	5.7
2015	58,623	51,323	3,589	3,711	87.5	6.1	6.3

 Table B2.—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.)

	I	nitial Decisio	on, Level of Decisio	on, and Program In	ivolvement (Coni	t.)	
			Selected summary	case information by	y decision status a	s of February 2016	
			Numbers of cases		Numbers as a	percentage of total i	nitial decisions
Fiscal year of initial DDS decision	Total initial decisions Cor	Total initial decisions Continuations		Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Total reviews, title	II disabled worker	rs					
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	_	13,752	93.4		6.6
2005	204,316	189,762	_	14,554	92.9		7.1
2006	166,287	155,176	_	11,111	93.3		6.7
2007	63,940	59,208	_	4,732	92.6		7.4
2008	107,064	101,572	—	5,492	94.9		5.1
2009	112,650	108,050	1	4,599	95.9	f	4.1
2010	117,254	111,621	1	5,632	95.2	f	4.8
2011	126,293	117,966	4	8,323	93.4	f	6.6
2012	177,557	163,307	158	14,092	92.0	0.1	7.9
2013	176,303	164,067	1,046	11,190	93.1	.6	6.3
2014	230,604	213,901	4,240	12,463	92.8	1.8	5.4
2015	260,604	231,713	13,524	15,367	88.9	5.2	5.9

 Table B2.—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.)

^a Data reflect results as of February 2016. 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 hearing and Appeals Council levels 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 Operations.

			Initial c	lecisions			
Fiscal year of initial DDS	Total initial —	Continuations		Cessations	А	ppeals to reconside	ration
decision	DDS decisions	Number	Percent ^b Number	Percent b	Number	Percent ^c	
Title II only revie	200/5						
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	137	55.5
2010	6,979	6,560	94.0	419	6.0	219	52.3
2011	8,582	7,769	90.5	813	9.5	471	57.9
2012	13,012	11,797	90.7	1,215	9.3	741	61.0
2013	10,779	9,772	90.7	1,007	9.3	649	64.4
2014	10,181	9,017	88.6	1,164	11.4	755	64.9
2015	11,232	9,623	85.7	1,609	14.3	1,001	62.2
Title II reviews in	nvolving title XVI recip						
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	554	56.8
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	152	46.8
2008	4,051	3,690	91.1	361	8.9	190	52.6
2009	6,263	5,803	92.7	460	7.3	260	56.5
2010	7,212	6,612	91.7	600	8.3	352	58.7
2011	8,889	7,876	88.6	1,013	11.4	621	61.3
2012	12,129	10,660	87.9	1,469	12.1	962	65.5
2013	12,034	10,569	87.8	1,465	12.2	1,018	69.5
2014	12,138	10,439	86.0	1,699	14.0	1,182	69.6
2015	15,432	12,741	82.6	2,691	17.4	1,777	66.0
	le II disabled adult child						
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	852	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	252	47.5
2008	7,570	7,004	92.5	566	7.5	307	54.2
2009	11,817	11,110	94.0	707	6.0	397	56.2
2010	14,191	13,172	92.8	1,019	7.2	571	56.0
2011	17,471	15,645	89.5	1,826	10.5	1,092	59.8
2012	25,141	22,457	89.3	2,684	10.7	1,703	63.5
2013	22,813	20,341	89.2	2,472	10.8	1,667	67.4
2014	22,319	19,456	87.2	2,863	12.8	1,937	67.7
2015	26,664	22,364	83.9	4,300	16.1	2,778	64.6

Table B3.—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

			Reconside	erations			Appe	als beyond re	econsiderati	on ^d
Fiscal year of initial DDS		Continua	tions		Appeals to reconside			Continua	ions	
decision	Pending	Number	Percent ^b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessations
Title II only reviews	3									
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	_	224	69.6	98	62	63.3	—	23	37.1	39
2006	_	173	70.6	72	36	50.0	_	16	44.4	20
2007	_	66	66.0	34	19	55.9	_	14	73.7	5
2008	_	84	71.8	33	20	60.6	_	9	45.0	11
2009	_	96	70.1	41	27	65.9	_	12	44.4	15
2010	_	139	63.5	80	57	71.3	—	23	40.4	34
2011	_	304	64.5	167	119	71.3	1	35	29.7	83
2012	_	491	66.3	250	171	68.4	8	44	27.0	119
2013	5	418	64.9	226	145	64.2	49	26	27.1	70
2014	42	448	62.8	265	160	60.4	99	17	27.9	44
2015	355	461	71.4	185	87	47.0	76	—	—	11
Title II reviews invo	olving title X	VI recipient	S							
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		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		106	69.7	46	29	63.0	_	15	51.7	14
2008	_	116	61.1	74	61	82.4	_	19	31.1	42
2009	_	172	66.2	88	77	87.5	_	28	36.4	49
2010	1	215	61.3	136	106	77.9	_	35	33.0	71
2011		337	54.3	284	207	72.9	1	54	26.2	152
2012		586	60.9	376	288	76.6	8	72	25.7	208
2013	6	606	59.9	406	258	63.5	62	40	20.4	156
2014	60	678	60.4	444	280	63.1	193	20	23.0	67
2015	684	736	67.3	357	166	46.5	157	2	22.2	7
Total reviews, title	I disabled a	dult 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		553	64.9	299	169	56.5	_	69	40.8	100
2005		560	66.6	281	179	63.7	_	63	35.2	116
2006		459	64.5	253	159	62.8		59	37.1	100
2007		172	68.3	80	48	60.0		29	60.4	19
2008		200	65.1	107	81	75.7		28	34.6	53
2009		268	67.5	129	104	80.6		40	38.5	64
2010	1	354	62.1	216	163	75.5		58	35.6	105
2011	_	641	58.7	451	326	72.3	2	89	27.5	235
2012		1,077	63.2	626	459	73.3	16	116	26.2	327
2013	11	1,024	61.8	632	403	63.8	111	66	22.6	226
2014	102	1,126	61.4	709	440	62.1	292	37	25.0	111
2015	1,039	1,120	68.8	542	253	46.7	233	2	10.0	18
2013	1,059	1,177	00.0	542	200	-10.7	255	4	10.0	10

Table B3.—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.)

	_	Selected summary case information by decision status as of February 2016								
			Numbers of cases		Numbers as a percentage of total initial decisions					
Fiscal year of initial DDS decision	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 review	vs									
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	7,360	_	407	94.8	_	5.2			
2006	7,485	7,143	_	342	95.4	_	4.6			
2007	2,582	2,456	_	126	95.1	_	4.9			
2008	3,519	3,407		112	96.8		3.2			
2009	5,554	5,415	_	139	97.5	_	2.5			
2010	6,979	6,722	_	257	96.3	_	3.7			
2011	8,582	8,108	1	473	94.5	f	5.5			
2012	13,012	12,332	8	672	94.8	0.1	5.2			
2013	10,779	10,216	54	509	94.8	.5	4.7			
2014	10,181	9,482	141	558	93.1	1.4	5.5			
2015	11,232	10,084	431	717	89.8	3.8	6.4			
Title II reviews inv	volving title XV	I 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		571	94.6	_	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	_	204	93.6	_	6.4			
2008	4,051	3,825		226	94.4		5.6			
2009	6,263	6,003		260	95.8	_	4.2			
2010	7,212	6,862	1	349	95.1	f	4.8			
2010	8,889	8,267	1	621	93.0	f	7.0			
2011	12,129	11,318	8	803	93.3	.1	6.6			
2012	12,034	11,215	68	751	93.2	.6	6.2			
2013	12,034	11,137	253	748	91.8	2.1	6.2			
2014	15,432	13,479	841	1,112	87.3	5.4	7.2			

Table B3.—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.)

			Selected summary	case information by	y decision status a	s of February 2016	
			Numbers of cases		Numbers as a	percentage of total in	nitial decisions
Fiscal year of initial DDS decision	Total initial decisions Continuations		Cessations Cessations pending an with no appeal decision appeal pending		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Total reviews, title	e II disabled adult cl	hildren					
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	_	954	94.6	_	5.4
2005	17,710	16,717	_	993	94.4		5.6
2006	16,472	15,610	_	862	94.8		5.2
2007	5,754	5,424	_	330	94.3		5.7
2008	7,570	7,232	_	338	95.5		4.5
2009	11,817	11,418	_	399	96.6		3.4
2010	14,191	13,584	1	606	95.7	f	4.3
2011	17,471	16,375	2	1,094	93.7	f	6.3
2012	25,141	23,650	16	1,475	94.1	0.1	5.9
2013	22,813	21,431	122	1,260	93.9	.5	5.5
2014	22,319	20,619	394	1,306	92.4	1.8	5.9
2015	26,664	23,563	1,272	1,829	88.4	4.8	6.9

Table B3.—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.)

^a Data reflect results as of February 2016. 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 hearing and Appeals Council levels 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.

^fLess than 0.05 percent.

Source: Social Security Administration, Office of Operations.

	Initial decisions									
Fiscal year of - initial DDS	Total initial —	Continuations		Cessations	Ap	peals to reconside	ration			
decision	DDS decisions	Number	Percent ^b Number		Number	Percent ^c				
Title II only revie 1999	ws 1,237	1,178	95.2	59	4.8	36	61.0			
2000	1,237	1,178	95.2 96.4	39 47	4.8 3.6	30	61.0			
2000	1,003	963	96.0	47	4.0	27	72.3 67.5			
2001	751	726	96.7	40 25	3.3	15	60.0			
2002	280	261	93.2	23 19	6.8	13	68.4			
2003	260	253	95.2 96.9	8	3.1	6	75.0			
2004	306	233	91.5	26	8.5	15	57.7			
2005	209	199	91.3 95.2	20 10	4.8	6	60.0			
2000	209 70	63	90.0	7	10.0	5	71.4			
2007	121	113	93.4	8	6.6	6	75.0			
2008	326	319	97.9	7	2.1	5	71.4			
2009	834	817	98.0	17	2.0	12	70.6			
2010	1,179	1,140	96.7	39	3.3	33	84.6			
2012	971	918	94.5	53	5.5	38	71.7			
2012	976	931	94.5 95.4	45	3.5 4.6	38 34	75.6			
	870	806	93.4 92.6	43 64	4.0 7.4	53	82.8			
2014 2015	748	685	92.0 91.6	63	8.4	55 51	82.8 81.0			
2015	/40	085	91.0	03	0.4	51	81.0			
Title II reviews in	volving title XVI recipi	ents								
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	8	66.7			
2012	280	261	93.2	19	6.8	17	89.5			
2013	335	311	92.8	24	7.2	22	91.7			
2014	364	340	93.4	24	6.6	20	83.3			
2015	367	339	92.4	28	7.6	22	78.6			
	e II disabled widow(er)					1.5				
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	19	70.4			
2011	1,492	1,441	96.6	51	3.4	41	80.4			
2012	1,251	1,179	94.2	72	5.8	55	76.4			
2013	1,311	1,242	94.7	69	5.3	56	81.2			
2014	1,234	1,146	92.9	88	7.1	73	83.0			
2015	1,115	1,024	91.8	91	8.2	73	80.2			

Table B4.—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

			Reconside					als beyond re	econsiderati	on ^d
Fiscal year of initial DDS		Continua	tions		Appeals to reconside		Continua ions			
decision	Pending	Number	Percent b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessations
Title II only review	s									
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		10	83.3	2	1	50.0	_	1	100.0	
2011		33	100.0		_	_	_	_		
2012		31	81.6	7	7	100.0	_	4	57.1	3
2013	1	26	78.8	7	5	71.4	2	2	66.7	1
2014	3	43	86.0	7	6	85.7	2	2	50.0	2
2015	13	32	84.2	6	4	66.7	3	1	100.0	_
TT'41 TT ' '	1									
Title II reviews invo	olving title X		IS OO O	2	2	100.0		1	50.0	1
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						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	1	1	100.0		1	100.0	
2010	_	6	85.7	1	1	100.0	_	1	100.0	1
2011		5	62.5	3	2	66.7		1	50.0	1
2012		14	82.4	3	2	66.7	_	1	50.0	1
2013		20	90.9	2	1	50.0				1
2014		12	60.0	8	6	75.0	4	1	50.0	1
2015	9	13	100.0	_				—		
Total reviews, title	II disabled w	/idow(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		16	84.2	3	2	66.7	_	2	100.0	
2011		38	92.7	3	2	66.7	_	1	50.0	1
2012	_	45	81.8	10	9	90.0	_	5	55.6	4
2013	1	46	83.6	9	6	66.7	2	2	50.0	2
2014	3	55	78.6	15	12	80.0	6	3	50.0	3
	22	45	88.2	6	4	66.7	3	1	100.0	

Table B4.—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.)

	_		Selected summary	case information by	decision status as of February 2016					
	_		Numbers of cases		Numbers as a	percentage of total in	nitial decisions			
Fiscal year of initial DDS decision	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 review	vs									
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	828	_	6	99.3		.7			
2011	1,179	1,173	_	6	99.5	_	.5			
2012	971	953	_	18	98.1	_	1.9			
2013	976	959	3	14	98.3	0.3	1.4			
2014	870	851	5	14	97.8	.6	1.6			
2015	748	718	16	14	96.0	2.1	1.9			
Title II reviews inv	volving title XV	I 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	274	_	3	98.9	_	1.1			
2010	313	307	_	6	98.1	_	1.9			
2012	280	276	_	4	98.6		1.4			
2012	335	331	_	4	98.8		1.2			
2013	364	353	4	7	97.0	1.1	1.2			
2014	367	352	9	6	95.9	2.5	1.6			

Table B4.—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.)

			Selected summary	case information by	y decision status a	s of February 2016	
			Numbers of cases		Numbers as a j	percentage of total in	nitial decisions
Fiscal year of initial DDS decision	Total initial decisions Continuations		Cessations Cessations pending an with no appeal decision appeal pending		Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Total reviews, title	e 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	1,102	_	9	99.2	_	.8
2011	1,492	1,480	—	12	99.2	—	.8
2012	1,251	1,229		22	98.2		1.8
2013	1,311	1,290	3	18	98.4	0.2	1.4
2014	1,234	1,204	9	21	97.6	.7	1.7
2015	1,115	1,070	25	20	96.0	2.2	1.8

Table B4.—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.)	

^a Data reflect results as of February 2016. 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 hearing and Appeals Council levels 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 Operations.

F 1 <i>î</i>	Initial Decision and Level of Decision Initial decisions									
Fiscal year of initial DDS	Total initial —	Continuation	ons	Cessations	Ap	peals to reconsid	eration			
decision	DDS decisions	Number	Percent ^b Number	Percent ^b	Number	Percent ^c				
Reviews of low-t	oirth-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	924	30.4			
2009	12,511	5,741	45.9	6,770	54.1	2,092	30.9			
2010	22,396	9,048	40.4	13,348	59.6	4,425	33.2			
2011	19,359	7,608	39.3	11,751	60.7	3,795	32.3			
2012	16,416	6,487	39.5	9,929	60.5	3,022	30.4			
2012	19,299	7,672	39.8	11,627	60.2	3,955	34.0			
2013	18,126	7,174	39.6	10,952	60.4	3,923	35.8			
2014	14,321	5,840	40.8	8,481	59.2	2,973	35.1			
Redeterminations	s 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	17,773	50.8			
2008	69,430	34,547	49.8	34,883	50.2	17,651	50.6			
2009	100,986	51,712	51.2	49,274	48.8	27,205	55.2			
2010	87,310	41,545	47.6	45,765	52.4	24,844	54.3			
2010	93,256	42,772	45.9	50,484	54.1	26,502	52.5			
2012	81,568	36,585	44.9	44,983	55.1	22,871	50.8			
2012	91,519	40,507	44.3	51,012	55.7	27,542	54.0			
2013	85,708	37,022	43.2	48,686	56.8	26,501	54.4			
2014	84,499	36,463	43.2	48,036	56.8	24,622	51.3			

Table B5.—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	Total initial —	Continuatio	ons	Cessations	Ap	peals to reconsid	eration
decision	DDS decisions	Number	Percent ^b Number	Percent ^b	Number	Percent ^c	
All other review: 1994	s of title XVI disabled	children					
1994	3,535	2,501	70.7	1,034	29.3	541	52.
1995	789	399	50.6	390	49.4	210	53.
1990	14	8	57.1	6	42.9	3	50.
1998	91,157	67,203	73.7	23,954	26.3	13,267	55.
1998	183,211	129,420	70.6	53,791	20.3	28,410	52.
2000	140,699	106,583	75.8	34,116	29.4 24.2	17,014	49.
2000	95,835	72,896	76.1	22,939	23.9	11,808	49. 51.
2001	163,768	130,434	79.6	33,334	20.4	17,888	53.
2002	127,444	100,522	79.0	26,922	20.4 21.1	14,876	55.
2003	103,437	80,748	78.9	20,922 22,689	21.1 21.9	12,852	55. 56.
	61,387		74.3	15,790			53.
2005 2006	19,384	45,597	74.3		25.7 25.6	8,400	53. 52.
		14,428		4,956 1,279		2,591	52. 52.
2007	4,440	3,161	71.2	1,279	28.8	668	52.
2008	4,707	3,473	73.8	1,234	26.2	671	54.
2009	10,637	8,355	78.5	2,282	21.5	1,200	52.
2010	16,677	12,501	75.0	4,176	25.0	2,143	51.
2011	25,166	17,157	68.2	8,009	31.8	3,933	49.
2012	64,834	41,269	63.7	23,565	36.3	12,306	52.
2013	52,998	33,760	63.7	19,238	36.3	10,537	54.
2014	88,993	57,060	64.1	31,933	35.9	18,935	59.
2015	223,607	150,118	67.1	73,489	32.9	42,530	57.
	l title XVI disabled chi						
1994	1,225	771	62.9	454	37.1	159	35.
1995	7,837	4,648	59.3	3,189	40.7	1,211	38.
1996	19,138	11,048	57.7	8,090	42.3	3,169	39.
1997	55,939	26,921	48.1	29,018	51.9	17,565	60.
1998	149,722	94,748	63.3	54,974	36.7	27,822	50.
1999	242,541	160,947	66.4	81,594	33.6	40,928	50.
2000	202,590	140,012	69.1	62,578	30.9	29,596	47.
2001	153,865	105,215	68.4	48,650	31.6	23,260	47.
2002	231,447	168,691	72.9	62,756	27.1	31,390	50.
2003	188,632	135,900	72.0	52,732	28.0	27,644	52.
2004	168,729	118,713	70.4	50,016	29.6	26,219	52.
2005	130,428	83,571	64.1	46,857	35.9	22,798	48.
2006	68,327	40,254	58.9	28,073	41.1	13,160	46.
2007	78,974	40,868	51.7	38,106	48.3	18,951	49.
2008	79,409	40,251	50.7	39,158	49.3	19,246	49.
2009	124,134	65,808	53.0	58,326	47.0	30,497	52.
2010	126,383	63,094	49.9	63,289	50.1	31,412	49.
2011	137,781	67,537	49.0	70,244	51.0	34,230	48.
2012	162,818	84,341	51.8	78,477	48.2	38,199	48.
2013	163,816	81,939	50.0	81,877	50.0	42,034	51.
2014	192,827	101,256	52.5	91,571	47.5	49,359	53.
2015	322,427	192,421	59.7	130.006	40.3	70,125	53.

Table B5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

			Reconsid	erations			Appe	als beyond re	econsiderati	on ^d	
 Fiscal year of initial DDS 		Continua			Appeals to reconside			Continua	tions		
decision	Pending	Number	Percent ^b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessations	
Reviews of low-b	irth-weight ch	ildren									
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	—	38	20.1	151	
2008	—	264	28.6	660	361	54.7	—	64	17.7	297	
2009	—	592	28.3	1,500	869	57.9	—	155	17.8	714	
2010	—	1,190	26.9	3,235	1,884	58.2	1	280	14.9	1,603	
2011	2	1,068	28.2	2,725	1,679	61.6	5	232	13.9	1,442	
2012	3	868	28.8	2,151	1,216	56.5	61	144	12.5	1,011	
2013	31	1,091	27.8	2,833	1,521	53.7	531	122	12.3	868	
2014	134	1,145	30.2	2,644	1,251	47.3	894	29	8.1	328	
2015	1,454	597	39.3	922	314	34.1	295	1	5.3	18	
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	_	1,298	27.9	3,348	
2005	—	3,756	30.3	8,647	5,135	59.4	_	1,436	28.0	3,699	
2006	—	2,581	27.6	6,759	4,130	61.1	—	1,220	29.5	2,910	
2007	—	4,793	27.0	12,980	8,273	63.7	_	2,449	29.6	5,824	
2008	1	5,091	28.8	12,559	8,361	66.6	_	2,254	27.0	6,107	
2009	_	7,047	25.9	20,158	13,359	66.3	4	3,300	24.7	10,055	
2010	4	5,994	24.1	18,846	12,580	66.8	7	2,747	21.8	9,826	
2011	9	6,494	24.5	19,999	13,424	67.1	83	2,619	19.6	10,722	
2012	30	5,640	24.7	17,201	11,093	64.5	437	1,932	18.1	8,724	
2013	232	6,192	22.7	21,118	12,236	57.9	3,017	1,435	15.6	7,784	
2014	1,084	5,830	22.9	19,587	10,416	53.2	6,796	536	14.8	3,084	
2015	11,102	3,822	28.3	9,698	3,869	39.9	3,567	40	13.2	262	

 Table B5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

			Reconsid		l Level of Dec		,	als beyond re	considerati	on ^d
- Fiscal year of initial DDS		Continua			Appeals to b reconsidera		rippo	Continua		
decision	Pending	Number	Percent b	Cessations	Number ^e Pe	rcent c	Pending	Number	Percent	Cessations
All other reviews 1994	of title XVI d	lisabled chile	lren					_		
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		268	24.6	821
2007		269	40.3	399	264	66.2		80	30.3	184
2008		252	37.6	419	259	61.8		61	23.6	198
2009		506	42.2	694	448	64.6		95	21.2	353
2010		764	35.7	1,379	953	69.1	1	159	16.7	793
2011	2	1,306	33.2	2,625	1,806	68.8	5	344	19.1	1,457
2012	3	3,717	30.2	8,586	5,938	69.2	273	889	15.7	4,776
2013	64	3,085	29.5	7,388	4,601	62.3	1,466	412	13.1	2,723
2014	916	5,466	30.3	12,553	7,382	58.8	5,612	254	14.4	1,516
2015	20,777	9,325	42.9	12,428	5,504	44.3	5,128	39	10.4	337
Total reviews, all	title XVI disa									
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	—	2,563	25.3	7,580
2005		7,579	33.2	15,219	9,087	59.7	—	2,309	25.4	6,778
2006		3,945	30.0	9,215	5,634	61.1	—	1,566	27.8	4,068
2007		5,235	27.6	13,716	8,726	63.6	—	2,567	29.4	6,159
2008	1	5,607	29.1	13,638	8,981	65.9		2,379	26.5	6,602
2009		8,145	26.7	22,352	14,676	65.7	4	3,550	24.2	11,122
2010	4	7,948	25.3	23,460	15,417	65.7	9	3,186	20.7	12,222
2011	13	8,868	25.9	25,349	16,909	66.7	93	3,195	19.0	13,621
2012	36	10,225	26.8	27,938	18,247	65.3	771	2,965	17.0	14,511
2013	327	10,368	24.9	31,339	18,358	58.6	5,014	1,969	14.8	11,375
2014	2,134	12,441	26.3	34,784	19,049	54.8	13,302	819	14.3	4,928
2015	33,333	13,744	37.4	23,048	9,687	42.0	8,990	80	11.5	617

Table B5.—Title XVI Disabled Child Reviews: Disposition ^a of Medical Continuing Disability Reviews by Fiscal Year of
Initial Decision and Level of Decision (Cont.)

				case information by	, ,	5	
			Numbers of cases		Numbers as a	percentage of total i	nitial decisions
Fiscal year of initial DDS decision	Total initial decisions Cor	ntinuations	Cessations pending an appeal decision	Cessations with no appeal pending	Continuations	Cessations pending an appeal decision	Cessations with no appeal pending
Reviews of low-bi	rth-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 9,773	7,567 4,804		10,053 4,969	42.9 49.2		57.1 50.8
1999 2000	10,178	4,804 5,274		4,909	49.2 51.8		48.2
2000	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 2008	3,175	1,579 2,559		1,596 2,713	49.7 48.5		50.3
2008	5,272 12,511	2,339 6,488		6,023	48.3 51.9		51.5 48.1
2009	22,396	10,518	1	11,877	47.0	f	53.0
2010	19,359	8,908	7	10,444	46.0	f	53.9
2012	16,416	7,499	64	8,853	45.7	0.4	53.9
2013	19,299	8,885	562	9,852	46.0	2.9	51.0
2014	18,126	8,348	1,028	8,750	46.1	5.7	48.3
2015	14,321	6,438	1,749	6,134	45.0	12.2	42.8
Redeterminations	at age 18						
1994	71	67		4	04.4		5.6
1995 1996	12,640	8,984	_	3,656	94.4 71.1	—	5.6 28.9
1990	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 2005	53,232 55,331	36,719 36,626	_	16,513 18,705	69.0 66.2		31.0 33.8
2005	40,640	25,597		15,043	63.0		37.0
2000	71,359	43,581		27,778	61.1		38.9
2008	69,430	41,892	1	27,537	60.3	f	39.7
2009	100,986	62,059	4	38,923	61.5	f	38.5
2010	87,310	50,286	11	37,013	57.6	f	42.4
2011	93,256	51,885	92	41,279	55.6	.1	44.3
2012	81,568	44,157	467	36,944	54.1	.6	45.3
2013 2014	91,519 85,708	48,134 43,388	3,249 7,880	40,136 34,440	52.6 50.6	3.6 9.2	43.9 40.2
2014 2015	85,708 84,499	43,388	14,669	29,505	47.7	9.2 17.4	40.2 34.9
			14,009	29,505	47.7	17.4	54.9
1994	of title XVI disable	a children	_			_	_
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 81.3		22.8
2000 2001	140,699 95,835	114,444 78,470	_	26,255 17,365	81.5 81.9	—	18.7 18.1
2001 2002	163,768	139,044	_	24,724	84.9		15.1
2002	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	15,639	—	3,745	80.7	—	19.3
2007	4,440	3,510		930	79.1		20.9
2008	4,707	3,786	—	921	80.4	—	19.6
2009 2010	10,637 16,677	8,956 13,424		1,681 3,252	84.2 80.5	f	15.8 19.5
2010 2011	25,166	13,424 18,807	1 7	5,252 6,352	80.3 74.7	f	25.2
2011	64,834	45,875	276	18,683	70.8	.4	23.2
2012	52,998	37,257	1,530	14,211	70.3	2.9	26.8
	88,993	62,780	6,528	19,685	70.5	7.3	22.1
2014 2015	223,607	159,482	25,905	38,220			

Table B5.—Title XVI Disabled Child Reviews: Disposition ^a of Medical Continuing Disability Reviews by Fiscal Year of
Initial Decision and Level of Decision (Cont.)

		In	itial Decision and	Level of Decision ((Cont.)		
			Selected summary	case information by	y decision status a	s of February 2016	
			Numbers of cases		Numbers as a	percentage of total in	nitial decisions
Fiscal year of initial DDS decision	Total initial decisions Cor	ntinuations	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 o	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	130,321		38,408	77.2	_	22.8
2005	130,428	93,459	_	36,969	71.7	_	28.3
2006	68,327	45,765		22,562	67.0		33.0
2007	78,974	48,670		30,304	61.6		38.4
2008	79,409	48,237	1	31,171	60.7	f	39.3
2009	124,134	77,503	4	46,627	62.4	f	37.6
2010	126,383	74,228	13	52,142	58.7	f	41.3
2011	137,781	79,600	106	58,075	57.8	0.1	42.2
2012	162,818	97,531	807	64,480	59.9	.5	39.6
2013	163,816	94,276	5,341	64,199	57.5	3.3	39.2
2014	192,827	114,516	15,436	62,875	59.4	8.0	32.6
2015	322,427	206,245	42,323	73,859	64.0	13.1	22.9

 Table B5.—Title XVI Disabled Child Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

^a Data reflect results as of February 2016. 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 hearing and Appeals Council levels 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 Operations.

			1111	ial Decision	Initial de					
Fiscal year of initial DDS	Total init	ial ———	Continuati	ons		Cessatior	18	Appeals	to reconside	eration
decision	DDS decisio		Number	Percen	t ^b	Number	Percent ^b	Nu	mber	Percent
1995	4,2	287	3,277	70	5.4	1,010	23.6		665	65.
1996	55,0	025	46,273	84	4.1	8,752	15.9	6	5,146	70.
1997	69,5	557	57,662	82	2.9	11,895	17.1	8	3,722	73.
1998	75,0	071	64,829	8	5.4	10,242	13.6	7	,239	70.
1999	140,4	429	125,079	8	9.1	15,350	10.9	10),292	67.
2000	173,4	470	156,065	90).0	17,405	10.0	10),923	62.
2001	143,9	902	126,610	8	3.0	17,292	12.0	10	,262	59.
2002	172,5	527	150,837	8	7.4	21,690	12.6	13	3,314	61.4
2003	213,2	212	191,061	89	9.6	22,151	10.4	14	,665	66.
2004	221,1	129	199,938	90).4	21,191	9.6	14	,627	69.
2005	110,0	072	97,330	8	3.4	12,742	11.6	8	3,125	63.
2006	40,6	505	35,957	8	3.6	4,648	11.4	2	2,853	61.
2007	18,1	172	16,006	8	3.1	2,166	11.9	1	,426	65.
2008	18,9	933	17,049	90	0.0	1,884	10.0	1	,267	67.
2009	29,1	137	27,233	93	3.5	1,904	6.5	1	,376	72.
2010	34,5	575	31,766	9	1.9	2,809	8.1	1	,984	70.
2011	33,4	460	30,291	90).5	3,169	9.5	2	2,191	69.
2012	46,4	439	39,954	8	5.0	6,485	14.0	4	,343	67.
2013	34,9	941	30,850	8	3.3	4,091	11.7	2	2,885	70.
2014	49,8	810	43,552	8	7.4	6,258	12.6	4	,574	73.
2015	156,9	987	132,651	84	4.5	24,336	15.5	17	,225	70.
			Reconside	rations			Appea	als beyond re	considerati	on ^d
Fiscal year of initial DDS		Continu	ations		Appeals to reconside			Continua	tions	
decision	Pending	Number	Percent b	Cessations	Number ^e	Percent c	Pending	Number	Percent	Cessation
1005		241	36.2	424	267	63.0		87	32.6	15

Table B6.—Title XVI Only Disabled Adult Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision

	Reconsiderations						Appea	als beyond re	consideration	on "	
Fiscal year of initial DDS		Continua	ations	Appeals to beyon tions reconsideration			Continuations				
decision	Pending	Number	Percent b	Cessations	Number ^e	Percent c	Pending	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		284	38.1	462	
2007		963	67.5	463	342	73.9		152	44.4	190	
2008		866	68.4	401	302	75.3		121	40.1	181	
2009		995	72.3	381	284	74.5		101	35.6	183	
2010		1,416	71.4	568	456	80.3		156	34.2	300	
2011		1,498	68.4	693	553	79.8	1	176	31.9	376	
2012	5	2,686	61.9	1,652	1,273	77.1	20	373	29.8	880	
2013	32	1,784	62.5	1,069	760	71.1	200	140	25.0	420	
2014	225	2,624	60.3	1,725	1,141	66.1	855	72	25.2	214	
2015	6,343	7,186	66.0	3,696	1,984	53.7	1,813	35	20.5	136	

			Selected summary	case information by	y decision status a	s of February 2016		
	-		Numbers of cases		Numbers as a percentage of total initial decisions			
Fiscal year of initial DDS decision	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	38,046	_	2,559	93.7	_	6.3	
2007	18,172	17,121	_	1,051	94.2	_	5.8	
2008	18,933	18,036	_	897	95.3	_	4.7	
2009	29,137	28,329	_	808	97.2	_	2.8	
2010	34,575	33,338	_	1,237	96.4	_	3.6	
2011	33,460	31,965	1	1,494	95.5	f	4.5	
2012	46,439	43,013	25	3,401	92.6	0.1	7.3	
2013	34,941	32,774	232	1,935	93.8	.7	5.5	
2014	49,810	46,248	1,080	2,482	92.8	2.2	5.0	
2015	156,987	139,872	8,156	8,959	89.1	5.2	5.7	

 Table B6.—Title XVI Only Disabled Adult Reviews: Disposition^a of Medical Continuing Disability Reviews by Fiscal Year of Initial Decision and Level of Decision (Cont.)

^a Data reflect results as of February 2016. 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 hearing and Appeals Council levels 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 Operations.

ESTIMATED NET FEDERAL BENEFIT SAVINGS FROM PERIODIC CONTINUING DISABILITY REVIEW INITIAL CESSATIONS IN FISCAL YEAR 2015

This appendix presents estimates of net Federal benefit savings expected to ultimately ensue from continuing disability reviews (CDR) 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) 2015. Table C1 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, Survivors, 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 2016 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.

Disa	ability Review	's Initiated Centrally"			
	C	CDRs initiated under title II			
CDR cessations/terminations	Title II only 7 reviews	Fitle II reviews involving title XVI recipients	Subtotal, title II	CDRs initiated under title XVI	Total
Cessations from full medical reviews					
Initial cessations in FY 2015	33,723	13,239	46,962	154,342	201,304
Estimated ultimate cessations (after all appeals) resulting from initial cessations shown on previous line FO FTC terminations	16,070	6,817	22,887	109,980	132,867
Initial FTC terminations in FY 2015	1,526	551	2,077	2,397	4,474
Estimated final FTC terminations after all appeals	1,443	506	1,949	2,379	4,328
Estimated total final cessations/terminations	17,513	7,323	24,836	112,359	137,195

Table C1.—Cessations/Terminations Resulting From Periodic Continuing Disability Reviews Initiated Centrally^a

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

Table C2 presents estimates of the net Federal benefit savings resulting from CDRs for which initial cessations or initial FO FTC terminations of disability benefits occurred in FY 2015. We base these net savings on the estimates of ultimate cessations/terminations that will remain after the appeals process is complete, as shown in table C1. We present the estimated net CDR savings in table C2 for: (1) the OASDI program; (2) the SSI program; (3) the Medicare programs; and (4) the Medicaid program. The estimated net savings for the Medicare programs include net savings under the Hospital Insurance (HI) program and Parts B & D of the Supplementary Medical Insurance (SMI) program.

Table C2 displays the estimated net benefit savings in three ways. First, we show the reductions in benefit payments for each fiscal year from 2014 through 2024. Second, we present medium-range (25-year) and long-range (75-year) net 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 net Federal benefits saved because of the CDRs, valued as of September 30, 2015. These estimates may be thought of as the amount of money as of September 30, 2015 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 2016 Trustees Reports and the assumptions used for the 2016 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.

-				Program Medicare			
Fiscal year	OASDI	SSI ^b	HI	SMI-Part B ^c		Medicaid ^b	Total
A. Estimated net amount of re	eduction in ben	efit payments (in	n millions)				
2014 ^d	\$6	\$6	_			e	\$12
2015	90	167	\$17	\$13	\$15	\$4	305
2016	268	561	60	44	55	2	990
2017	303	599	71	51	66	-4	1,086
2018	304	590	73	53	72	13	1,106
2019	282	652	69	52	72	41	1,168
2020	260	636	65	50	69	48	1,128
2021	250	604	65	50	70	49	1,088
2022	241	606	64	51	70	49	1,081
2023	231	528	63	52	70	48	992
2024	222	464	62	52	70	47	918
11-year total	2,457	5,413	610	468	628	297	9,873
B. Estimated medium-range (25-year) and lo	ong-range (75-ye	ar) net savi	ngs (as a percer	nt of taxable pay	roll ^f)	
25-year: 2015-39	<u>g</u> /		<u>g</u> /				
75-year: 2015-90	<u>g</u> /	_	<u>g</u> /				_

Table C2.—Estimated Net Federal Benefit Savings From Periodic Medical Continuing Disability Reviews Initiated Centrally^a With Initial Cessations and Initial FO FTC Terminations in FY 2015 by Program

esent value of estimated net lifetime Federal benefits saved, as of the end of fiscal year 2015 (in millions)

3,542	7,024	1,043	945	1,171	546	14,270
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^a We base the net savings estimates on the 201.304 initial cessations and 4.474 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 3,345 initial cessations and 147 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 the Federal poverty level 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 2014 are attributable to the FO FTC terminations. The initial FO terminations in FY 2015 had payments suspended in FY 2014 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 2014 attributable to FO FTC terminations in FY 2015.
- g Less than 0.005 percent.

Notes:

1. We base the estimates on the intermediate assumptions from the 2016 Trustees Reports and assumptions underlying the 2016 SSI Annual Report.

2. Federal SSI payments due on October 1st in FYs 2017, 2018, 2023, and 2024 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 Disability Insurance (SSDI) beneficiary 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. SSDI 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 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) 2015, we completed 247,163 work CDRs. The results of those work CDRs are displayed in the table below. A work CDR may result in a determination that disability has ceased because earnings constitute SGA for at least one month after the TWP or a determination that disability continues because earnings do not constitute SGA.

Work CDRs in FY 2015	
Work CDRs completed during FY 2015	247,163
Reviews resulting in a finding of cessation of disability,	
or a subsequent reinstatement or suspension of	
benefits in the extended period of eligibility	123,343
Review resulting in continuance of disability	123,820

SUMMARY OF RELEVANT LEGISLATION FOR FY 2015 CDR ANNUAL REPORT TO CONGRESS

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
Section 1614(a)(4) of the Social Security Act (P.L. 92-603)	October 30, 1972	 Gives SSA the discretionary authority to conduct CDRs on SSI recipients. On September 28, 1994, SSA issued a <u>Federal Register</u> notice that periodic SSI CDRs would begin on October 1, 1994. 	SSI
Section 221(i) of the Social Security Act (P.L. 97-455)	Act amended January 1983	 Requires SSA to submit an annual report to Congress on: 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. 	DI
Social Security Independence and Program Improvements Act of 1994 (P.L. 103-296)	August 15, 1994	 Requires SSA to: 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 Supplementary Security Income (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
Contract with America Advancement Act of 1996 (P.L. 104-121)	March 29, 1996	 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. 	DI/SSI

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

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
		2.) Requires a Report to Congress annually 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.	
Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (P.L. 104-193)	August 22, 1996	 Requires SSA to: 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. The legislation authorized \$150 million in FY 1997 and \$100 million in FY 1998 in additional funds to assist with these additional mandates. 	SSI
Balance Budget Act of 1997 (P.L. 105-33)	August 5, 1997	 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. 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. 	SSI

LEGISLATION	DATE ENACTED	PROVISIONS	PROGRAM
Ticket to Work and	December 17, 1999	1.) Prohibits the Commissioner from	DI/SSI
Work Improvement		initiating CDRs during the period a	
Act of 1999		beneficiary is using (as defined by the	
(P.L. 106-170)		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.	