

May 7, 2025

The Honorable Frank Bisignano  
Commissioner of Social Security  
6401 Security Boulevard  
Baltimore, MD 21235

Dear Commissioner Bisignano,

Congratulations on your confirmation and thank you for taking on the responsibility of leading the Social Security Administration. Having witnessed your capacity to transform companies into thriving enterprises, we trust that you will succeed in streamlining operations, increasing efficiency, and improving customer service while enhancing the delivery of SSA's critical services to millions of Americans.

The National Organization of Social Security Claimants' Representatives (NOSSCR) is a specialized bar association of thousands of attorneys and advocates who represent Social Security disability claimants nationwide throughout the adjudicative process. Given our dedicated practice area, we are uniquely positioned to assist you, and SSA generally, in your mission to reduce inefficiencies while providing and effectuating timely and accurate disability decisions.

While we trust that your approach at SSA will drive the agency forward, given the unique operations of the agency, these topics require that SSA remain open to collaboration with stakeholders. NOSSCR and other advocacy groups are eager to work with you and SSA to deliver efficient, world-class service to claimants, while not sacrificing due process or accuracy. As a start, NOSSCR has identified the following challenges facing SSA's disability adjudication process, and we write to offer this outline of our proposed solutions.

**Issue:** Not enough healthcare institutions participate in the agency's Health Information Technology (HIT or MEGAHIT) integration.

***Solution:*** *Incentivize participation through public encouragement and commendation, and by publishing the data on comparative processing times where medical records were gathered exclusively using HIT, versus claims where non-HIT development was required, so providers can see the real difference their participation makes.*

**Issue:** TEFCA is a new framework for health information exchange created by HHS to remove barriers. Social Security historically hasn't participated with HHS to grow this framework, preventing the successful expansion of this program.

***Solution:*** Publicly support a “public benefits” use case for TEFCA so that this expansion can become a reality, in cooperation with HHS ONC. Adding a “public benefits” use case for TEFCA would allow for the continuation and expansion of the agency’s ability to obtain needed health information through the HIT integration.

**Issue:** Social Security receives robust structured health data and could receive more. This data should provide cost and processing time reductions, but it is refused, destroyed, or ignored by a process that conforms “evidence” for disability evaluation to hundreds or thousands of pages of TIFF/PDF files, as if we still live in the paper-file past and need to review a claim by turning pages.

***Solution:*** Let data remain data and welcome it. Allow existing sources to send additional analysis that could flag compassionate allowances or fraud, work with existing SSA contractors to turn on the analysis of health data the way they do for hospitals, and help disability adjudicators adjust to reviewing both compiled and traditional-format information. This will require adjustment, but Social Security's transition years ago to an “all evidence” policy will facilitate this more expansive view of health data as essential to improved disability claims systems.

**Issue:** It takes months for the agency to attach properly executed representative paperwork (Form SSA-1696) to claimants’ applications/files, adding to the backlog, increasing calls to field offices, and freezing the work of representatives who would otherwise be able to ensure accurate file completion. As the data from the recent Disability Determination Ready Claim Process (DDRC) proof of concept revealed, this failure to timely attach a representative to a claim significantly slows claim processing and prevents efficiency programs (like the DDRC) from realizing their potential.

***Solution:*** Prioritize processing of the Form SSA-1696 so that representatives can immediately assist with file completion.

**Issue:** Claimants and representatives do not know why initial and reconsideration claims are denied because the detailed decision rationale is not made available until the hearing level.

***Solution:*** Provide representatives with a copy of the Disability Determination Explanation (DDE) at the time of initial denial. This will allow us to understand why the claim was denied and, if warranted, target our appeal and development to the issue at hand. Many meritless appeals could be avoided entirely.

**Issue:** The online initial and reconsideration claim data does not describe whether the claim was approved or disapproved—only that a decision was made.

**Solution:** *Provide the type of decision in the representative portal (favorable, unfavorable, partially favorable) so that representatives can take the next appropriate action (and avoid unnecessary communications and system-clogging appeals when the decision remains unknown near the close of the appeals window).*

**Issue:** Claimants' work activity and earnings are often unexplained until the hearing level, resulting in wasted time and resources while the agency attempts to understand whether the work is disability-preclusive.

**Solution:** *Provide representatives with a copy of and/or access to copies of any earnings record, earnings query, new hire/unemployment query, summary earnings, and certified earnings available on the claim. Currently, the documents contained within the "D" section of the ERE are hidden from representatives until the claim is pending at the hearing level—years into the claim. Early access to this information would allow representatives the opportunity to help resolve outstanding wage/employment issues and properly identify and remove claims where a claimant does not qualify based on work or earnings. Often claimants are inaccurate historians of this information, and representatives are not aware of the disqualifying earnings until seeing the information at the hearing stage. Granting access to this information at its earliest availability would allow representatives to help the agency reduce unnecessary claim volume while providing claimants with proper guidance years earlier.*

**Issue:** Claimants' online mySocialSecurity accounts frequently "freeze" vital information like earnings reports once a disability claim is pending. These accounts also fail to define what the agency means by the "percentage complete" tracker during the life of a claim. Moreover, the information available to the claimants on their online accounts does not correspond to information available to the representatives, resulting in more calls to the agency to inquire about case status. Finally, children and claimants without a permanent address are prohibited from creating online mySocialSecurity accounts, increasing foot traffic and telephone calls at local offices.

**Solution:** *Do not freeze claimants' access to any of their mySocialSecurity information when they have a disability claim pending. Define what the agency means by "percentage complete" within claimants' online accounts and make this same information available to representatives. Create an alternate identity-verification mechanism so children and those without permanent addresses can establish online accounts.*

**Issue:** Reconsideration lacks flexibility, leading to redundant work and wasted resources.

**Solution:** *Utilize AI to create a pilot where only certain types of cases are flagged for reconsideration—those cases that were 1) denied at initial due to missing information, and 2) those types of claims that are routinely paid at hearing level (utilize agency historical data to identify factors that lead to frequent award at the hearing level). This new Reconsideration should route to a special cadre where agency personnel can review the results and potentially award the claims quickly and cheaply. If an award is not possible, a quick denial can be issued, allowing for a faster hearing level filing. The existing proof of concept, Disability Determination Ready Claim Process (DDRC), should also be continued as an optional Reconsideration step for those who choose it.*

**Issue:** When new processes or forms are introduced by the agency, or when agency-wide reminders are issued regarding claims' processing, the information received by frontline staff is not made available to the representative community; thus, there are often disconnects in what we anticipate will happen and the processes agency staff use.

**Solution:** *Make available to representatives the instructions/reminders that are provided to SSA frontline staff so that we can better understand how claims should be processed and assist with troubleshooting when problems arise.*

**Issue:** Representation is lacking at the initial and reconsideration levels, resulting in missed paperwork, incomplete claims, and unnecessary appeals.

**Solution:** *Add reputable nonprofit organizations' referral service numbers directly to early Social Security notices, including those that are sent when individuals start an application but have not yet completed it, and on initial and reconsideration denial letters. (NOSSCR's referral service number is 845-682-1881. The NADR referral service number is 800-747-6131). It is well established that representatives can help the agency reduce processing time and backlogs by submitting the proper paperwork at the proper time. Currently, the numbers for NOSSCR and NADR are provided proactively only at the ALJ hearing stage, requiring a claimant to call SSA at earlier points. This increases SSA's call volume while decreasing valuable representation. However, please note that it has been a significant problem in the past that new or disreputable organizations ask to be included on these notices, resulting in dozens of nonworking numbers and sham nonprofits interfering with the decades-long positive performance of the NOSSCR and NADR referral services.*

**Issue:** While representation is lacking at the initial and reconsideration levels, some registered representatives *only* represent claimants at these levels. Yet, registered representatives who have not yet appeared at a hearing or before the Appeals Council are prevented from accessing *any* data that is housed within the ERE, even data that is otherwise available at the initial and reconsideration levels. This is solely because the ERE system was historically owned by OHO and the system registration rules have not been updated since initial and reconsideration data was added to the ERE.

***Solution:*** *Authorize agency staff to verify the credentials of any registered representative instead of just those who have cases pending at the hearing or Appeals Council levels. Granting ERE access to all verified registered representatives will significantly reduce calls and visits to field offices by representatives who only represent claimants at the initial and reconsideration levels, as these representatives will finally have valuable data at their fingertips.*

**Issue:** Despite Social Security’s well-drafted template Notice of Disapproved Claim, at least one state DDS is undermining the language by adding a sentence that pushes claimants to reapply when they shouldn’t. NOSSCR has identified this problem in Oklahoma, where the DDS is adding to the page they control (where sources of evidence are listed and the denial step of the sequential evaluation is detailed) a final sentence “If your condition gets worse and keeps you from working, please contact any Social Security office about filing another application.” This advice is usually wrong (a legitimate appeal may also include a worsening condition) and undercuts the language provided on the template notice which properly alerts the claimant to what may be lost by serial new applications.

***Solution:*** *Issue corrective direction to every state DDS that they must not undermine the legal guidance provided in the initial decision notice.*

**Issue:** Representatives are unable to access the new Hearing Recordings and Transcriptions (HeaRT) within the ERE, wasting valuable agency time with appeals that are unable to contain clear citations.

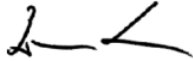
***Solution:*** *Make available the HeaRT transcripts immediately post-hearing on the ERE, so that representatives can review detailed hearing transcripts, ensuring that appeals can be clear and properly targeted.*

**Issue:** Effectuation of awarded claims that have previously touched Federal Court frequently takes *years*, forcing claimants to wait even longer for their already-awarded benefits, creating a significant backlog for the agency, and increasing the telephone and foot traffic to field offices and payment centers.

***Solution:*** *Prioritize effectuation of these “Court Branch” cases. To help efficiently resolve these claims, NOSSCR requests a point of contact within this processing branch who can provide support for case escalation for our members’ clients where the traditional channels have not proven effective.*

Thank you for your attention to these issues. We look forward to working closely with you as the agency moves to optimize efficiencies under your leadership. We care deeply about the success of Social Security's disability program and stand ready to work with you and your staff to ensure that the agency's mission is realized.

Sincerely,

A handwritten signature in black ink, appearing to be 'D. Camp', with a stylized flourish at the end.

David Camp  
Chief Executive Officer and General Counsel