

118TH CONGRESS
2D SESSION

H. R. 8546

To require the Commissioner of the Social Security Administration to take certain actions to improve the processing of claims and appeals for disability insurance benefits and supplemental security income, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

MAY 23, 2024

Mr. NEGUSE introduced the following bill; which was referred to the
Committee on Ways and Means

A BILL

To require the Commissioner of the Social Security Administration to take certain actions to improve the processing of claims and appeals for disability insurance benefits and supplemental security income, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Social Security Admin-
5 istration Processing Claims Improvement Act of 2024”.

6 **SEC. 2. FINDINGS.**

7 Congress finds the following:

1 (1) A recent Social Security Administration In-
2 specter General report found that nearly half of the
3 151,000,000 callers to field offices and the national
4 800-number went unanswered.

5 (2) In 2021, over 9,000,000 people received So-
6 cial Security disability insurance benefits.

7 (3) According to the National Academy of So-
8 cial Insurance, over half of all beneficiaries rely on
9 Disability Insurance and Supplemental Security for
10 90 percent or more of their income.

11 (4) Benefits are interrupted following the denial
12 and often remain paused until a review—which can
13 take anywhere from 14 to 22 months—is complete.

14 (5) Since 2011, the number of beneficiaries in-
15 creased by more than 22 percent while over the
16 same period, Social Security Administration’s oper-
17 ating budget fell by more than 17 percent, after ad-
18 justing for inflation.

19 **SEC. 3. SOCIAL SECURITY ADMINISTRATION CLAIMS PROC-**
20 **ESSING REVIEW.**

21 Not later than 1 year after the date of enactment
22 of this Act, and on an annual basis thereafter, the Com-
23 missioner shall conduct a review to—

24 (1) identify—

1 (A) processing error trends of claims proc-
2 essors and the training needs of claims proc-
3 essors and case managers;

4 (B) possible improvements to the proc-
5 essing of claims with respect to covered bene-
6 fits, including decision-making of claims proc-
7 essors;

8 (C) the most common causes of overpay-
9 ments of covered benefits; and

10 (D) the most common reasons for denying
11 an application for a covered benefit;

12 (2) evaluate—

13 (A) any written or verbal instructions or
14 training given to benefits counselors;

15 (B) any guidance or regulation promul-
16 gated by the Commissioner that is related to
17 determinations of eligibility for covered benefits
18 and whether updates to such guidance are nec-
19 essary to provide claims processors with better
20 resources to carry out the duties of such proc-
21 essors, including any guidance regarding the
22 processing of claims for a covered benefit; and

23 (3) after the training programs under section 4
24 are established, identify improvements to the train-
25 ing programs with regard to—

1 (A) the processing of claims for a covered
2 benefit; and

3 (B) decision-making for claims processors
4 when reconsidering the eligibility of a claimant
5 for a covered benefit.

6 **SEC. 4. TRAININGS FOR CLAIMS PROCESSORS.**

7 (a) ANNUAL TRAINING PROGRAM.—

8 (1) ESTABLISHMENT.—Not later than 1 year
9 after the first review under section 3 is conducted,
10 the Commissioner shall establish, and update on an
11 ongoing basis, a national training program for
12 claims processors who review claims for covered ben-
13 efits, including appeals of continuing disability re-
14 views.

15 (2) PARTICIPATION.—Not later than 180 days
16 after the date that the annual training program
17 under paragraph (1) is established, the Commis-
18 sioner shall require that each claims processor par-
19 ticipates in such program at least once each year,
20 beginning in the second year in which the claims
21 processor carries out the duties of a claims processor
22 for the agency.

23 (3) REQUIRED ELEMENTS.—The training estab-
24 lished under paragraph (1) shall include the fol-
25 lowing:

1 (A) Training on the quality assurance
2 standards established under section 6.

3 (B) Disability etiquette training for case
4 managers and claims processors to learn effective
5 communication and empathy.

6 (C) Training regarding internal communications
7 to prevent overpayments and subsequent
8 benefit denials.

9 (b) ONGOING TRAINING PROGRAM.—

10 (1) ESTABLISHMENT.—Not later than 1 year
11 after the first review under section 3 is conducted,
12 the Commissioner shall establish, and update on an
13 ongoing basis, an ongoing training program for
14 claims processors who review claims for covered benefits,
15 including appeals of continuing disability reviews.
16

17 (2) PARTICIPATION.—Not later than 180 days
18 after the date that the ongoing training program
19 under paragraph (1) is established, the Commissioner
20 shall require each claims processor to participate
21 in such program on an ongoing basis, beginning
22 in the second year in which the claims processor carries
23 out the duties of a claims processor for the
24 agency.

1 (3) REQUIRED ELEMENTS.—The training pro-
2 gram established under paragraph (1) shall include
3 the following:

4 (A) Workshops with claims processors
5 every 6 months.

6 (B) Collaborative review of a complex case
7 by all claims processors at a field office every
8 2 months.

9 (4) DEFINITIONS.—In this subsection:

10 (A) COMPLEX CASE.—The term “complex
11 case” means a case that—

12 (i) has its processing time increased
13 because of a mistake or error that is at-
14 tributable to the Social Security Adminis-
15 tration;

16 (ii) has conflicting evidence from mul-
17 tiple health care providers; or

18 (iii) involves an individual with a lapse
19 for a period of time that is greater than 2
20 weeks.

21 (B) LAPSE.—The term “lapse” means,
22 with respect to an individual receiving a covered
23 benefit, a physical or mental impairment, as de-
24 termined by a health care provider, that pre-
25 vents the individual from providing information

1 required for a continuing disability review (as
2 defined in section 201(g)(1)(A) of the Social
3 Security Act (42 U.S.C. 401(g)(1)(A)).

4 (c) CONSULTATION REQUIRED.—When establishing
5 the training programs described in subsections (a) and
6 (b), the Commissioner shall consult with an entity that
7 advocates for, and provides resources and information to,
8 individuals with disabilities to assist such individuals in
9 overcoming barriers to independent living, including an
10 entity carrying out a community rehabilitation program
11 (as such term is defined in section 7 of the Rehabilitation
12 Act of 1973 (29 U.S.C. 705)).

13 **SEC. 5. REPORTS.**

14 (a) REPORT ON BACKLOGS.—Not later than 180
15 days after the date after the date of enactment of this
16 Act, and on an annual basis thereafter, the Commissioner
17 shall submit to Congress a report on the status of backlogs
18 for determinations of eligibility for covered benefits and
19 continuing disability review determinations, including,
20 with respect to both such determination backlogs—

- 21 (1) information on wait times for such deter-
22 minations; and
23 (2) recommendations on streamlining and im-
24 proving the determination processes.

1 (b) REPORT ON ACCESSIBILITY.—Not later than 180
2 days after the date of enactment of this Act, and on an
3 annual basis thereafter the Commissioner shall submit to
4 Congress a report that includes—

5 (1) a plan to ensure that all services at the So-
6 cial Security Administration, including appeals of
7 covered benefit denials, are in a format that is ap-
8 propriate for the specific needs of individuals with
9 disabilities, such as audio versions of notifications,
10 large print and braille options, and easy-to-read in-
11 formation; and

12 (2) the amount of funding needed to carry out
13 the plan described in subparagraph (A).

14 **SEC. 6. QUALITY ASSURANCE STANDARDS.**

15 Not later than 180 days after the date of enactment
16 of this Act, the Commissioner shall establish, and update
17 on an ongoing basis, quality assurance standards to stand-
18 ardize how staff at field offices assist claimants, which
19 shall include—

20 (1) guidelines on how to answer questions of
21 claimants in a timely and polite manner; and

22 (2) a process for a claimant to submit feedback
23 to the Commissioner on whether the claims proc-
24 essor who processed the application of such claimant
25 met such standards.

1 **SEC. 7. DEFINITIONS.**

2 In this Act:

3 (1) COVERED BENEFIT.—The term “covered
4 benefit” means—

5 (A) a disability insurance benefit under
6 section 223 of the Social Security Act (42
7 U.S.C. 423); and

8 (B) a supplemental security income benefit
9 under title XVI of the Social Security Act (42
10 U.S.C. 1381 et. seq).

11 (2) COMMISSIONER.—The term “Commis-
12 sioner” means the Commissioner of the Social Secu-
13 rity Administration.

14 (3) CONTINUING DISABILITY REVIEW.—The
15 term “continuing disability review” has the meaning
16 given the term in subsection (g)(1)(A) of section 201
17 of the Social Security Act (42 U.S.C. 401(g)(1)(A)).

18 **SEC. 8. SOCIAL SECURITY ACT AMENDMENTS.**

19 (a) ADDITIONAL REVIEW.—

20 (1) TITLE II AMENDMENT.—Section 205(b)(1)
21 of the Social Security Act (42 U.S.C. 405(b)(1)) is
22 amended by striking “Any such decision by the
23 Commissioner of Social Security which involves a de-
24 termination of disability and which is in whole or in
25 part unfavorable to such individual” and inserting
26 the following: “In the case of any such decision that

1 involves a determination of disability and that is in
2 whole or in part unfavorable to such individual, the
3 Commissioner shall require a person, other than the
4 person who made the initial unfavorable determina-
5 tion, to review the initial decision and make a rec-
6 ommendation as to whether the initial decision
7 should be modified. The Commissioner shall make a
8 final decision in accordance with such recommenda-
9 tion. Any such final decision which is in whole or in
10 part unfavorable to such individual”.

11 (2) TITLE XVI AMENDMENT.—Section
12 1631(c)(1)(A) of such Act (42 U.S.C.
13 1383(c)(1)(A)) is amended by striking “Any such
14 decision by the Commissioner of Social Security
15 which involves a determination of disability and
16 which is in whole or in part unfavorable to such in-
17 dividual” and inserting the following: “In the case of
18 any such decision that involves a determination of
19 disability and that is in whole or in part unfavorable
20 to the individual, the Commissioner shall require a
21 person, other than the person who made the initial
22 unfavorable determination, to review the initial deci-
23 sion and make a recommendation as to whether the
24 initial decision should be modified. The Commis-
25 sioner shall make a final decision in accordance with

1 the recommendation. Any such final decision that is
2 in whole or in part unfavorable to the individual”.

3 (b) MODERNIZATION OF INFORMATION SUBMIS-
4 SION.—Part A of title XI of the Social Security Act (42
5 U.S.C. 1301 et. seq) is amended by inserting after section
6 1143 the following:

7 **“SEC. 1143A. MODERNIZATION OF INFORMATION SUBMIS-**
8 **SION.**

9 “With respect to any information required to be sub-
10 mitted by an individual to the Social Security Administra-
11 tion regarding a proceeding or determination for a benefit
12 under title II or a supplemental security income benefit
13 under title XVI, the Commissioner shall accept such infor-
14 mation in the following ways:

15 “(1) Email.

16 “(2) Fax machine, until December 31, 2045.”.

17 (c) SOCIAL SECURITY WAGE REPORTING APP.—Part
18 A of title XI of the Social Security Act (42 U.S.C. 1301
19 et. seq) is amended by adding at the end the following:

20 **“SEC. 1150D. SOCIAL SECURITY WAGE REPORTING APP.**

21 “The Commissioner of the Social Security Adminis-
22 tration shall ensure that an individual who receives a dis-
23 ability insurance benefit under section 223 may use the
24 SSA Mobile Wage Reporting App for the purpose of track-
25 ing the wages and employment of such individual.”.

1 (d) EFFECTIVE DATE.—The amendments made by
2 this section shall take effect 2 years after the date of en-
3 actment of this section.

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