DRAFT

March xx, 2025

The Honorable Susan Collins Chair Senate Appropriations Committee Washington, DC 20510

The Honorable Tom Cole Chair House Appropriations Committee Washington, DC 20515 The Honorable Patty Murray Ranking Member Senate Appropriations Committee Washington, DC 20510

The Honorable Rosa DeLauro Ranking Member House Appropriations Committee Washington, DC 20515

Dear Senator Collins, Senator Murray, Representative Cole, and Representative DeLauro,

We, the undersigned organizations, are writing to express our concerns regarding <u>a recent</u> <u>announcement by the Social Security Administration</u> immediately terminating the Retirement and Disability Research Consortium (RDRC) cooperative agreements.¹

As you may know, the RDRC plays a critical role in improving SSA's efficiency, fiscal oversight, and decision-making by conducting independent, data-driven research. Its work helps SSA streamline programs, reduce improper payments, and ensure benefits reach those who need them most, all of which are essential in today's budget-conscious environment.

SSA's announcement of the termination claimed a rationale of ending "fraudulent and wasteful initiatives and contracts." However, this rationale could not be further from the truth of the work conducted by the RDRC. The \$15 million annual cost of the RDRC is a small investment in research to improve the efficiency and accountability of an agency with a \$14 billion administrative budget charged with delivering \$1.6 trillion to beneficiaries. ² SSA serves over 70 million Americans (20% of the US population) directly by administering retirement benefits, disability benefits, and survivor's benefits. In theory, however, the agency serves all Americans over their life course, providing necessary documentation and tracking earnings. The RDRC helps SSA discover ways to make its programs and services work better for the American public and run more efficiently.

The current DRC mechanism was established by the first Trump administration in 2017, building on decades of precursor SSA investment in external experts to complement SSA's limited

¹ https://www.ssa.gov/news/press/releases/2025/#2025-02-21

² <u>https://www.ssa.gov/budget/assets/materials/2024/2024OP.pdf</u>, <u>https://www.ssa.gov/budget/assets/materials/2025/2025BO.pdf</u>

internal research capacity.³ The six centers⁴ making up the current RDRC consortium were selected through a competitive grant process. Their (now terminated) research included:

Preventing Overpayments and Strengthening Fiscal Monitoring

RDRC research has examined SSA's overpayment issues, helping identify why errors occur, how they impact beneficiaries, and what policy solutions could reduce them. This has included assessing income reporting complexities for SSDI and SSI recipients, which often leads to overpayments and long-term financial hardship when beneficiaries are asked to repay. RDRC research has helped the agency refine its monitoring systems and develop policies to reduce improper payments, ensuring taxpayer dollars are used efficiently.

Supporting Evidence-Based Policy Reforms

The RDRC provided crucial data on the effectiveness of SSA policies, including return-to-work initiatives, disability adjudication processes, and retirement policy changes. For example, RDRC studies helped evaluate the impact of SSA's Ticket to Work program, identifying barriers that prevent beneficiaries from returning to employment.

Efficiently Improving Service Delivery

RDRC research also focused on how to efficiently improve communications and enhance customer satisfaction. E.g., the RDRC was assessing an innovative model that would use volunteers, rather than SSA staff, to handle many queries from the public. The research indicated that almost two-thirds of retirees still contact SSA staff in-person or by phone, but up to half of these queries could potentially be handled by trained volunteers. This work would adapt for SSA a variant of the federal government's State Health Insurance Assistance Program which trains volunteers to offer counseling on Medicare, Medicaid, and other health insurance options.

These are just a few of the many examples of high-impact research that is well worth SSA's investment in the RDRC. The centers also had a training mission to develop new scholars into experts on SSA programs so as to attract the brightest minds into improving the functioning of these SSA programs that are essential for meeting the needs of individuals who rely on support from the agency.

The Bottom Line

Without the RDRC, SSA loses a critical tool for preventing overpayments, improving program integrity, and ensuring benefits are efficiently distributed. The consortium's research helped SSA run its programs with accountability and precision, making it an asset for those who want to see smarter, more effective government rather than wasteful spending. We urge you to work with the Administration and your colleagues on SSA's oversight committees in the House and Senate to restore support for the RDRC program immediately.

³ https://www.ssa.gov/policy/docs/ssb/v80n1/v80n1p1.html

⁴ National Bureau of Economic Research; Boston College; City University of New York Baruch College; University of Maryland, Baltimore County; University of Michigan; and University of Wisconsin-Madison.

Sincerely,

cc Acting SSA Commissioner Lee Dudek The Honorable Mike Crapo The Honorable Ron Wyden The Honorable Jason Smith The Honorable Richard Neal