



A Qualitative Investigation of Barriers to Disability Benefits in 2025

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Disability Rights Education
& Defense Fund



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American Association of People with Disabilities

“In the last year, it’s gotten a lot worse”

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By Katie Savin, Callie Freitag, and Matthew Borus

March 2026

Disability Rights Education and Defense Fund (DREDF) is a leading national civil rights law and policy center directed by individuals with disabilities and parents who have children with disabilities. Founded in 1979, DREDF works to advance the civil and human rights of people with disabilities through legal advocacy, training, education, and public policy and legislative development.

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Access Note

The hyperlinks in this report signal a technical term, which is used upon the term's first appearance in a section. These hyperlinks go to the Glossary in the Appendix at the bottom of the report, except for the Timeline of the Appendix, which contains hyperlinks to the web. Alternative formats of this report are available at dredf.org/SSA-barriers-2025 and aapd.com/SSA-barriers-2025.

Disclaimer

The authors conducted this research independently and are solely responsible for the content and views expressed in this report. The Disability Rights Education & Defense Fund (DREDF) and the American Association of People with Disabilities (AAPD) generously agreed to host this report and assist in its dissemination, but gave no direction regarding the scope or contents of this report.

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“From the minute you're born, everybody gets a Social Security number . . . Social Security is one place that has something for all of us, because that's what it was created to do. It was created to support people and keep families intact, and keep people economically sustained. **Now it's the place that people aren't comfortable going to.**”

- Angela

an attorney in the Philadelphia region

Executive Summary

Background

In 2025, the [Social Security Administration \(SSA\)](#) underwent a rapid series of administrative, staffing, and policy changes following the inauguration of the second Trump administration and its creation of the [Department of Government Efficiency \(DOGE\)](#). These changes included the largest-ever SSA staffing cut (Romig & O'Connor, 2025a), the consolidation of ten [regional offices](#) down to four, the push to move customer service activities online, the expansion of automated and Artificial Intelligence (AI)-based services, and frequently changing policies regarding [overpayment](#) withholding rates and access to walk-in services at [field offices](#). Media reports and SSA press releases have often presented conflicting accounts of how these unprecedented changes impact SSA [claimants](#), especially those applying for benefits under SSA's two major disability programs, [Social Security Disability Insurance \(SSDI\)](#) and [Supplemental Security Income \(SSI\)](#).

In this report, we offer findings from a rigorous qualitative study to contribute to an evidenced-based understanding of the effects of these changes. Between July and September 2025, we interviewed 52 attorney and non-attorney [benefits specialists](#) at 32 organizations that assist claimants with obtaining and maintaining SSI and SSDI benefits. Collectively, the organizations included in this study represent over 8,000 SSI and SSDI claimants across the country. To contextualize our findings in the rapidly changing policy landscape, we draw on reporting, SSA records such as press releases and emergency messages, and other research.

Findings

We found that the SSA policy and process changes implemented by the second Trump administration created significant barriers for those seeking to apply for and maintain disability benefits, as well as the attorneys and benefit specialists who represent them. We organized our findings into seven interrelated themes that together characterize how disability benefit access changed in 2025:

1. **SSA's 2025 changes in context: "It's always been bad... it has, I think, gotten worse."** [Respondents](#) compared their experiences with SSA in 2025 to their past experiences, concluding that many of the challenges they faced in 2025 are new and unprecedented.
2. **Difficulties accessing disability benefits: "Getting stuck in a loop."** We identified five major areas to which respondents attributed worsening disability benefits access: (a) changes to the phone system, (b) field offices' appointment and walk-in policies, (c) staffing cuts and reassignments, (d) increased processing times and [denials](#), and (e) increased overpayments and [payment center](#) issues.
3. **The dire consequences of unresponsive customer service: "This woman is dying."** Respondents underscored the dire consequences of these access barriers on their clients, describing instances of health deterioration, homelessness and even death as claimants awaited benefits.
4. **Differential impact of SSA's administrative burdens: "It just doesn't anticipate the client base that we work with."** Respondents observed that [administrative burdens](#) in disability benefit access were disproportionately borne by people with limited technological literacy and internet access, those with psychiatric, cognitive or communication disabilities, people with unstable housing, and members of [mixed-status](#) immigrant families.
5. **The erosion of accountability mechanisms within SSA: "There's no accountability on their end."** Respondents described the erosion of accountability mechanisms within SSA resulting in part from the consolidating of regional offices, which greatly diminished advocates' ability to resolve errors when routine problem-solving failed.
6. **Unpredictability and contradiction in SSA operations: "They're making up their own rules."** Respondents commonly described SSA staff arbitrarily departing from national policy and inventing their own rules, undermining SSA's rules-based system.
7. **Impacts on the advocates and organizations who serve disability claimants: "The amount of resources spent just to get basic information is phenomenal."** Deterioration of customer service has had a cumulative impact

on advocates and organizations that serve SSI and SSDI claimants, as the increasingly granular work of representing clients to SSA strained capacity, ultimately placing needed benefits even further out of reach for many.

Recommendations

The following recommendations are grounded in advocates' explicit recommendations and in policy implications derived by the authors through systematic analysis of advocate interview data.

1. **Staff SSA to meet service needs** rather than relying on automation to substitute for human capacity, linking staffing levels to measurable service outcomes such as the ability to schedule field office appointments within 30 days at most, and more quickly in urgent situations.
2. **Expand and clarify the right to walk-in services at SSA field offices**, particularly for those who cannot reliably navigate phone or online systems.
3. **Increase caller control over field office phone rerouting** by allowing callers to remain on hold for their intended office rather than being automatically rerouted.
4. **Return the automatic withholding rate for Social Security, including SSDI, overpayments to 10 percent**, with advance notice and clear implementation guidance.
5. **Improve the timeliness and accuracy of disability claim processing**, including establishing a limited mechanism to correct clearly erroneous [DDS](#) decisions before cases enter the [appeals](#) pipeline.
6. **Avoid reliance on online-only customer service systems** to ensure access for all beneficiaries and provide authorized representatives with secure access to beneficiary account information to improve advocate efficiency.
7. **Provide alternatives to AI-based phone systems, particularly for callers with communication disabilities**, such as the ability to bypass automated responders and access traditional menus or live staff.

8. **Ensure clear and effective pathways for issue escalation**, including adequately staffed, authorized, and resourced Regional Communications Directors with expectations for timely responses.
9. **Protect data privacy and benefit access for immigrant and mixed status families**, including avoiding unnecessary data sharing, discriminatory [administrative burdens](#), and exclusion of representative payees based on immigration status.
10. **Listen to advocates and beneficiaries through ongoing communication**, including regular meetings and advance consultation on policy or procedural changes that affect customer service, benefit processing, or payment systems.

In order to implement all of these recommendations, ongoing public reporting of customer service metrics with clear explanations and contextual information (e.g., reporting [1-800-number](#) call abandonment rates alongside average wait times) is critical.

Conclusion

The Social Security Administration's disability programs are built through complex, rule-based systems that depend on public trust and accountability to law and policy. Experienced advocates we interviewed described longstanding issues with these systems, including application processing delays, understaffing, and long wait times on the phone and in the field office. However, changes initiated in 2025 undermined their sense that persistence and deep knowledge of program rules could eventually make the system work. In addition to intensified delays and understaffing, respondents described rapidly changing policies, unprecedented errors, and pervasive chaos.

Disruptions were particularly consequential for their claimants who are unhoused, live in rural areas, have limited internet access, or have psychiatric or cognitive disabilities. Increased reliance on digital systems often excluded those most in need of assistance while reduced staffing and weakened escalation pathways limited advocates' ability to intervene when errors occurred. Since this study examined the experiences of representatives, it does not speak to the challenges of unrepresented clients. Given

the barriers we document, challenges faced by unrepresented claimants and beneficiaries are likely even more severe.

The harms documented in this report during 2025 were not inevitable, but they are all tied to policy choices whose impact, without intervention, will continue to compound. At the same time, respondents also pointed to SSA's capacity for change upon engagement with research and advocates, and to the resiliency of its remaining dedicated civil servants. The evidence in this report highlights the importance of reinvesting in the Social Security workforce, restoring and enhancing access to staff in person and on the phone, rebuilding systems of accountability, and designing technology that complements rather than replaces staff interaction.

Introduction

In January 2025, the second Trump administration took office and created the [Department of Government Efficiency \(DOGE\)](#). Within weeks of its inception, DOGE initiated a series of administrative and policy changes at the [Social Security Administration \(SSA\)](#), including its largest-ever staffing cut (Romig & O'Connor, 2025a). Since then, SSA has cut its workforce at every level, halving [headquarters](#) staff, nearly eliminating regional office staff, and cutting thousands of front-line employees who staffed local [field offices](#). In addition to staffing reductions, SSA frequently changed policy and added restrictions on access to SSA services that had the potential to create significant barriers for disabled [claimants](#) and beneficiaries.

As the changes rolled out throughout 2025, media reports described the impacts of staffing cuts on workers and claimants and characterized SSA's rapidly changing policies as confusing and chaotic (e.g. Lopez, 2025a; Healy et al., 2025). A piece released by *ProPublica* in September 2025 provided an in-depth look at what happened inside the Social Security Administration when DOGE took over, outlining plans to expose alleged fraud and achieve "quick wins" at the expense of opportunities to address longstanding issues (Hager, 2025). Reporting by *The New York Times* emphasized the strain of staffing reductions and reassignments on SSA field office workers (Siegel Bernard, 2025), while *The Washington Post* showcased stories of benefit claimants' frustrations as they attempted to navigate SSA's new automated phone system (Kornfield & Natanson, 2025). These reports raise serious questions about SSA's claims of improved customer service, which rest on reduced call wait times to the national [1-800 number](#) (Mackey, 2025).

The analysis thus far of the impacts of SSA's policy and process changes on disability benefits is limited but compelling. An Urban Institute analysis of SSA data through July 2025 shows that disability applications have decreased by 7 percent in the last year, a possible symptom of longer wait times and field office closures (Smalligan, 2025). While SSA claims to have reduced the backlog of disability claims, the smaller backlog may come at a cost to claimants seeking benefits: SSA is denying more disability applications at the initial stage. These early findings suggest the DOGE disruptions at SSA are associated with meaningful reductions in disability benefits under this administration.

This report contributes to the existing reporting and research by offering qualitative insight from interviews into how SSA’s changing policies have affected disability benefit claimants and the people who represent them in 2025. Between July and September 2025, we interviewed 52 attorney and non-attorney benefits specialists at 32 organizations that assist claimants with SSA’s two major disability programs: [Supplemental Security Income \(SSI\)](#) and [Social Security Disability Insurance \(SSDI\)](#). Collectively, the organizations included in this study represent over 8,000 SSI and SSDI claimants across the country.

In the interviews, we asked about how—if at all—access to SSA services has changed since the new presidential administration initiated policy changes and staffing cuts, beginning in early 2025. We probed on issues related to customer service processes (e.g. phone, field office, and website access) and whether [respondents](#) had perceived changes at any stage of the application or benefit maintenance process (e.g. applications, [denials](#), [hearings](#), [overpayments](#)). We asked if any groups were experiencing outsized impacts of SSA’s policy changes (e.g. immigrants, trans people, people with different types of disabilities). Throughout our interviewing process, we were careful to ask respondents if the issues they described were new or worsening in the new administration, or if they were ongoing issues with SSA that had not changed in 2025.

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This report is based on qualitative data. While the findings presented here are different from the tables and statistics found in some reports, our interviews allow close insights into how SSA processes have changed in 2025. Some of our findings, like the obstacles faced by rural elders attempting to access benefits online, or the handmade signs posted in the windows of one Social Security field office, would not be captured by SSA’s metrics or other quantitative sources. Other qualitative findings can help uncover the mechanisms behind changes observed in quantitative data, like the reduced call wait times and increased denials reported by SSA. Such insights are particularly important in the current moment, as SSA has removed data from their website, making it difficult for the public to track the impact of SSA’s policy and procedural changes on claimants. By aiming for geographic variation and systematically interviewing over fifty respondents, and then subjecting interview

transcripts to a rigorous process of qualitative coding by multiple members of the research team, we ensure that the cases presented here are not outliers or exceptions, but reflections of trends that appeared across the study.

This report begins with a **Background** which provides a summary of the policy and procedure changes at SSA in 2025. Then, in **Methods**, we describe the qualitative methods we used to carry out this study. Next, we outline the seven themes that came up repeatedly for respondents in different regions nationwide:

1. **“It’s always been bad... it has, I think gotten worse”**: SSA’s 2025 changes in context
2. **“Getting stuck in a loop”**: Difficulties accessing disability benefits
3. **“This woman is dying”**: The dire consequences of unresponsive customer service
4. **“It just doesn’t anticipate the client base that we work with”**: Differential impacts of SSA’s administrative burdens
5. **“There’s no accountability on their end”**: The erosion of accountability mechanisms within SSA
6. **“They’re making up their own rules”**: Unpredictability and contradiction in SSA operations
7. **“The amount of resources spent just to get basic information is phenomenal”**: Impacts on advocates and organizations who serve disability claimants

The first four themes outline the new challenges our respondents faced accessing SSA services in 2025 and the impacts those challenges have on the claimants they represent. In **Theme 1**, “It’s always been bad... it has, I think, gotten worse,” respondents compared their experiences with SSA in 2025 to their past experiences during the pandemic shutdowns or earlier. Many concluded that their experiences in 2025, so far, have been more challenging. In **Theme 2**, “Getting stuck in a loop,” we identified five major areas described by respondents in which SSA policy changes have created new barriers to accessing benefits: (a) changes to the phone system, (b) field offices’ appointment and walk-in policies, (c) staffing cuts and reassignments, (d)

increased processing times and denials, and (e) increased overpayments and [payment center](#) issues.

In **Theme 3**, “This woman is dying’: The dire consequences of unresponsive customer service,” we highlight respondents’ discussions of how customer service challenges and benefit delays can have significant economic and health consequences, including homelessness and death, for claimants waiting for benefits. In **Theme 4**, “It just doesn’t anticipate the client base that we work with” we discuss how those most in need of services tend to face the greatest obstacles to accessing them. These differential impacts were particularly marked in the context of SSA’s push to move services online and replace human customer service with Artificial Intelligence (AI) chatbots, and the Trump administration’s enforcement of anti-immigration policies through SSA.

The remaining themes shift focus from the experience of attempting to access disability benefits to operations within the Social Security Administration in 2025, and finally to the impact on service organizations operating in the new environment. In **Theme 5**, “There’s no accountability on their end,” we describe how the elimination of previously used avenues for issue escalation, including formal channels within SSA’s regional office structure and informal relationships with SSA staff, have resulted in increased bureaucratic errors and widespread demoralization among the advocates we interviewed. In **Theme 6**, “They’re making up their own rules,” we highlight a common observation among respondents that field offices and SSA staff were arbitrarily departing from national policy, and at times seemed to be inventing rules of their own. Finally, in **Theme 7**, “The amount of resources spent just to get basic information is phenomenal,” we explore the impact of all of the preceding developments on the advocates who serve disability claimants. We find that the increasing difficulty of even routine matters saps individual and organizational capacity, ultimately placing needed benefits even further out of reach for many claimants. We conclude with recommendations to reduce barriers and bolster SSA’s capacity to serve its constituents.

Background

Disability Benefits and SSA Customer Service

What [SSA](#) describes as “customer service” are the basic processes which are essential for millions of people to access and maintain their SSA benefits. These procedures are particularly important for someone applying for or receiving disability benefits. The SSA’s disability programs require extensive medical and income documentation and can involve extensive back-and-forth between SSA offices and [claimants](#). Disability claimants, and the representatives who help a small percentage of them, call or visit SSA to ask questions about their applications or benefits, submit documents, and verify that documents have been received. For some eligibility and benefit maintenance processes, claimants must also schedule meetings with SSA officials to determine eligibility and benefit amount, verify income, and appeal [denials](#) or terminations. These are complex processes that make significant psychological and labor demands of claimants (Borus, 2022; Savin and Barnes, 2025).

Because SSA’s bureaucratic processes are complex, some claimants seek representation to help them navigate the application process or appeal denials, terminations, and [overpayments](#) they think were wrongfully applied. Legal aid organizations, Protection and Advocacy organizations, Aging and Disability Resource Centers, and private firms across the country help people apply for and maintain their disability benefits each year. Representation may be particularly important for people with cognitive, psychiatric, intellectual, or developmental disabilities. For these claimants, SSA’s complex administrative processes can compound with disability-related symptoms, making it harder for claimants to comply with SSA rules (Savin and Barnes, 2025).

The changes at SSA may threaten the economic wellbeing and health of the already marginalized applicants and beneficiaries of SSA’s two major disability programs, [Supplemental Security Income \(SSI\)](#) and [Social Security Disability Insurance \(SSDI\)](#). Both programs provide limited monthly cash income to people with long-term, work-

These processes are complicated, and the reduction and termination of benefits can be catastrophic for disability beneficiaries.

limiting disabilities.¹ Most people who apply for disability benefits experience work-limiting impairments and earnings declines for months—sometimes years—before applying for benefits (Messel & Strand, 2019; Costa, 2017). Research shows that many people experience homelessness, file bankruptcy, or even die while waiting for SSA to make final decisions about their eligibility (GAO, 2020; Freitag, 2025). Less than half of people who apply for disability benefits from SSA are approved, with most denied for not meeting SSA’s disability determination criteria (CBPP 2025; CBPP 2024).

Once approved for disability benefits, recipients may still experience challenges with SSA that threaten their livelihood.

SSA requires disability beneficiaries to inform them of any financial changes, report work activity, and undergo [Continuing Disability Reviews \(CDRs\)](#) so they can maintain their disability benefits. These processes are complicated and many beneficiaries do not understand the reporting requirements (Hoffman et al., 2023). If beneficiaries do not appropriately follow SSA reporting guidelines, their benefits may be reduced or terminated. The reduction and termination of benefits can be catastrophic for disability beneficiaries, many of whom struggle to get by financially, going without necessities and accruing difficult-to-escape debt when large expenses arise (Freitag, 2024; Savin, 2021; Harper et al., 2018).

Changes to SSA Customer Service Processes in 2025

Changes to SSA’s customer service processes began soon after the second Trump administration took office. Coinciding with the creation of the [Department of Government Efficiency \(DOGE\)](#) and President Trump’s statement of intent to reform the federal workforce, federal employees received an email on January 28, 2025, outlining a deferred resignation program commonly referred to as the [“Fork in the](#)

¹ SSDI provides partial wage replacement for people who have accrued enough work credits (quarters of payroll tax contributions) to qualify. In contrast, SSI eligibility does not require work credits; instead, people are eligible for SSI’s monthly cash grants if they have low income and assets and meet SSA’s disability criteria. About 15 percent of SSDI beneficiaries also receive SSI (Social Security Administration, 2025a).

[Road](#)” offer. Employees who chose this option retained pay and benefits and were exempted from typical work requirements through September 30, 2025 (U.S. Office of Personnel Management, 2025). In February, the Social Security Administration announced plans to reduce its workforce to a staffing target of 50,000 (an estimated 12% reduction) as well as a reorganization plan that would reduce its regional structure from ten regions to four (Hinkle, 2025a). In March, the Associated Press reported on a DOGE list that showed federal real estate leases it intended to cancel. On the list were 47 SSA offices, 26 of which had expected termination dates in 2025 (Kinnard, 2025). Several days later, DOGE clarified its intent to close five permanent remote [hearing offices](#), arguing that most [hearings](#) are now virtual, and refuted claims that it was closing [field offices](#) (Higham, 2025).

In addition to staffing reductions and office closures, SSA initiated (and sometimes reversed) a series of policy changes affecting how SSA claimants can apply for benefits and interact with the agency. On March 18, they announced that claims for any SSA program—disability (SSI and SSDI), retirement, survivors and family benefits, and Medicare—could no longer be completed entirely by phone as of March 31, describing this as part of the agency’s efforts to mitigate fraud. The announced changes would also eliminate the option for beneficiaries to make direct deposit changes by phone, instead requiring individuals to prove their identity in person at a field office if they cannot use a [mySSA](#) account. Less than two weeks later and facing significant public backlash, SSA at first partly (Medicare, SSI and SSDI only) and a couple of weeks later fully (all programs) reversed this decision to allow most phone applications. However, direct deposit changes would still require either multi-factor online identification using a mySSA account, or an in-person visit to a field office. Romig (2025) estimated that for nearly 6 million seniors unable to access SSA services online, this change would necessitate an average of a 45-mile drive to a field office. These were not the only instances of rapidly changing policy at SSA. On July 18, SSA announced a plan to implement an identification check (PIN) requiring callers requesting claims status, address changes, tax documents, or benefits eligibility letters to get a one-time code from SSA online. By July 30, SSA had withdrawn the original plan and clarified that use of the PIN would be optional, except for those making direct deposit changes by phone (Alms, 2025a; Social Security Administration, 2025b).

At the same time SSA was changing its policies about what transactions could be completed by phone, it was also implementing a new phone system and working to

reduce call wait times for its national [1-800 number](#). The new phone system had first been adopted at the end of the Biden administration, with the Trump administration continuing implementation in 2025, adding new features and restoring some that had previously been discontinued. The new phone system expanded the call volume capacity, introduced the option to receive a call back instead of wait on hold, and expanded automated and Artificial Intelligence (AI) services. While the SSA's [Office of Inspector General \(OIG\)](#) confirmed that call wait times had dropped to an average of 7 minutes in September 2025 from a peak of 30 minutes in January 2025, these figures do not reflect the wait times of callers who selected the "callback" option and waited for SSA to return their call (Office of the Inspector General 2025). These figures also do not reflect the 1 in 4 calls that callers abandoned while waiting, nor do they indicate whether a caller was able to adequately resolve their issue during the call. Reductions in call wait times for the 1-800 number may have come at the expense of call wait times to field offices, which are not reported in publicly available SSA data, because SSA reassigned field office staff to the 1-800 number throughout 2025.

Reduction in call wait times for the 1-800 number may have come at the expense of longer call wait times to field

SSA has also enacted multiple policy changes since January 2025 that affect claimants' benefits. Under the Biden administration, SSA had reduced the amount it would automatically withhold from OASDI (Old Age, Survivors, and Disability Insurance) recipients' checks—a practice SSA uses to recoup funds when they determine they have overpaid a recipient—from 100 percent to 10 percent. In early March 2025, SSA reversed course and increased the overpayment withholding rate to 100 percent for new SSDI overpayments determined after March 27, 2025. The new withholding rate would affect retirement, survivor and family benefits and SSDI. These changes did not impact SSI, which has always had a default withholding rate of 10 percent (Hinkle, 2025b). At the end of April, SSA quietly reversed this decision and set a new withholding rate of 50 percent. No press release was issued by SSA (Hilzenrath & Fleischer, 2025). A timeline of these changes at SSA during 2025 appears at the end of this report.

Many of SSA's changes to customer service processes appear aligned with [SSA Commissioner](#) Frank Bisignano's stated goals of a "digital-first" approach to SSA

operations, which include moving services online, automating some phone interactions, reducing call wait times, and halving in-person field office visits (Rein et al., 2025; Alms, 2025b). These goals stand the chance to improve SSA customer service for a broad swath of claimants and their representatives. But the associated changes may also reduce accessibility of SSA services for people who are unable to navigate the digital systems without human assistance. Reduced access to SSA services may result in fewer people being able to successfully claim and maintain disability benefits.

In September, the Urban Institute published a report exploring SSA's claim it reduced the backlog of disability claims (Smalligan, 2025). The report brings to light two trends from state-level data regarding the reduced backlog: a decrease in new claims and an increase in denials of [initial applications](#). Though small declines in applications are not out of the ordinary, the report questions what other factors, such as access barriers, may be contributing to the 7 percent decrease in fiscal year 2025. While the number of cases processed by SSA did increase, the approval rate dropped almost 3 percent in fiscal year 2025, an unusual rate of change. While the report does not definitively say why the number of initial denials has increased, the trend is cause for concern. Contrary to SSA's claims, the reduction in backlog could be stemming from a reduction in the number of applications due to access barriers and an increase in initial denials, not increased efficiency at SSA.

Outside of SSA, related government agencies have taken steps that directly impact SSI and SSDI applications, including the elimination of the [SSI/SSDI Outreach, Access, and Recovery Technical Assistance \(SOAR TA\) Center](#), on August 18. SOAR caseworkers provide free assistance with initial SSI and SSDI application to some of Social Security's most vulnerable beneficiaries, those who are unhoused or at risk of homelessness, and have qualifying physical or mental impairments. While just 31 percent of initial applications completed without assistance are approved, 65 percent of SOAR-assisted initial applications are approved, getting critical funds to individuals and communities facing cycles of poverty and homelessness. The SOAR model also alleviates burden on SSA staff, as the national SOAR Technical Assistance (TA) Center trains caseworkers to prepare accurate, complete applications that are therefore quicker to review and approve (by over two months on average, according to a recent report), reducing the need for resource-intensive [appeals](#) (Policy Research Associates, 2025; SSA, 2026).

Methods

In order to understand the ongoing impact of these changes, we conducted interviews from July to September 2025 with 52 attorneys and non-attorney [benefits specialists](#) at 32 organizations that assist [SSI](#) and [SSDI claimants](#) with filing [initial applications](#), appealing [denials](#), and dealing with other issues affecting their benefits (e.g. [overpayments](#) and [continuing disability reviews](#)). In almost a third of the interviews (n=9), we spoke with multiple [respondents](#) who worked in the same organization, often in different roles such as staff and supervising attorneys or [paralegals](#) and attorneys, which allowed them to share multiple perspectives on the same population. The organizations included in this study represent over 8,000 SSI and SSDI claimants across the country.

The organizations included in this study represent over 8,000 SSI and SSDI claimants across the country.

We recruited most respondents through national listservs of SSI and SSDI benefit advocates. In some cases, we reached out directly to potential respondents at legal aid organizations, Protection and Advocacy organizations, Aging and Disability Resource Centers, and Independent Living Centers to attain geographic variation from all regions of the country. (Note that we did not recruit respondents from U.S. territories, since most residents of U.S. territories are not eligible for SSI.)

Table 1 displays the number of interviews we conducted by region, which we defined using [SSA's](#) former regional office organization. While regions are named for the cities in which they are headquartered, readers should note that many respondents were from areas far from those cities. A respondent from the Chicago region might serve a handful of urban neighborhoods, or they might serve multiple rural or suburban counties in another midwestern state. We aimed for at least 1-2 organizations in each region. Our sampling strategy resulted in over-representation of states in the Chicago region (Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin) and the Philadelphia region (District of Columbia, Delaware, Maryland, Pennsylvania, Virginia, and West Virginia), and under-representation of states in the Boston region (Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont), Dallas region (Arkansas, Louisiana, New Mexico, Oklahoma, Texas), and Kansas City region (Iowa, Kansas, Missouri, and Nebraska).

Table 1. Interview Sample by SSA Regional Office Organization

SSA Regional Office	Total Interviews	# Respondents in Interviews
Atlanta Section (AL, FL, GA, KY, MS, NC, SC, TN)	2	4
Boston Section (CT, ME, MA, NH, RI, VT)	1	2
Chicago Section (IL, IN, MI, MN, OH, WI)	11	18
Dallas Section (AR, LA, NM, OK, TX)	1	1
Denver Section (CO, MT, ND, SD, UT, WY)	2	2
Kansas City Section (IA, KS, MO, NE)	1	2
New York Section (NY, NJ)	3	3
Philadelphia Section (DC, DE, MD, PA, VA, WV)	7	13
San Francisco Section (AZ, CA, HI, NV)	2	3
Seattle Section (AK, ID, OR, WA)	2	4
Total	32	52

In May 2025, we developed an interview guide after conducting an open-ended conversation with a few key informants who worked in various capacities in a large legal services organization, which helped identify key domains for inquiry. We used this guide to interview our respondents between July and September 2025. Taking a semi-structured approach, we asked questions about barriers that SSI and SSDI claimants face in accessing Social Security Administration (SSA) services, and how—if at all—access to SSA services has changed since the new presidential administration initiated policy changes and staffing cuts, beginning in early 2025. We probed on SSA access issues including phone, [field office](#), and website access, and asked about common issues with applying for and maintaining benefits, including hearings and overpayments. We also made sure to ask if certain groups (e.g. immigrants, trans people, people with different types of disabilities) had been differentially impacted by SSA’s policy changes. Throughout our interviewing process, we were careful to ask

respondents if the issues they described were new or worsening in the new administration, or ongoing issues with SSA that had not changed in 2025.

We conducted interviews by Zoom. Interviews ranged from roughly 45-90 minutes. Interviewers wrote memos of their initial reactions following each interview, which were then used to inform codebook development and theme identification. We used auto-transcription to initially transcribe the recorded interviews, which members of the research team then corrected manually. We took an iterative, flexible, and collaborative approach to coding (Deterding & Waters, 2018). First, we co-created an initial codebook and each coded one common transcript separately, returning to discuss the coding process and further refine the codebook. As we coded, each team member contributed to a collaborative memo used as coding discussion prompts and for theme identification.

Throughout the coding process, we met weekly to discuss, refine, and add codes. These meetings also informed the themes we selected for preliminary analysis and for this report. Each transcript was coded twice: first by a [principal investigator \(PI\)](#) who did not conduct the interview, then by a [research assistant \(RA\)](#). The second round of coding was conducted after PIs had finalized a codebook so RAs could verify codes applied by the PI and add any new codes that were created after the first round of coding. The themes we identified for this report emerged as common and important through this collaborative coding and analysis process. During the data analysis and write up process, some respondents provided us with updates on how ongoing SSA policy changes were impacting their work. These updates were incorporated into our analysis and included in the findings where relevant.

All respondents are referred to by pseudonyms that were either generated by the respondent or assigned arbitrarily by the research team if none was provided. Respondents expressed fears that SSA might retaliate against them or their organizations for participating in this study. Therefore, we further masked participant identities by obscuring individual states and job titles. While our respondents held a variety of titles and roles, we protected their privacy by describing respondents as one of three roles that best fit their work: attorneys, paralegals, or benefit specialists. We

We were careful to ask respondents if the issues they described were new or worsening in the new administration, or ongoing issues with SSA that had not changed in 2025.

primarily refer to the people we interviewed as respondents, but we refer to them as “advocates” when they describe themselves as such or when the processes they’re describing apply to their role as people who represent, or advocate for, SSA claimants. Many, but not all, of the people we interviewed described themselves as advocates. Others thought of their roles in more neutral terms, as representatives or benefit specialists.

Findings

1. SSA’s 2025 Changes in Context

“It’s always been bad... it has, I think, gotten worse”

The legal advocates and [benefits specialists](#) we spoke to were all quick to tell us that it has never been easy to access disability benefits, nor to contact [SSA](#) when issues arise. Some [respondents](#), like Marie Theresa, a benefits specialist in the Philadelphia region, had a hard time distinguishing which challenges were new and which were longstanding. She said, “It’s never really been a great system, no, so I think I think it’s hard to capture how bad it is now, given that it’s always been difficult.”

Many others made clear that policy and organizational changes initiated by the new administration have made an already difficult situation much harder to navigate. “Just to be frank, it has always been bad,” said Nina, an attorney in the Chicago region. “It has, I think, gotten worse.” Respondents from across the country echoed this sentiment. Michael, an attorney in the Atlanta region, shared, “There’s never been a time when I could call up my local office [and] immediately talk to someone... But, I will say that in the last year, it’s gotten a lot worse.” Miranda, an attorney in the Philadelphia region, summed up the observations shared by many respondents, saying:

“People have been asking a lot of, ‘How’s it different now?’ The bottom line... is that it was really hard to be poor and have cancer under Biden, and it’s really hard to be poor and have cancer under Trump... That said, it is a hundred percent getting worse and not in all explicitly malicious ways, but in a lot of like, ‘Oh, that never got processed.’ ‘Oh, you can only talk for five minutes.’”

Respondents named challenges like difficulty reaching SSA staff by phone or in-person, staffing shortages, increased bureaucratic errors, rising rates of [denials](#), and inaccurate [overpayment](#) notices as some of the key issues that had worsened, in their view, since the new administration took office.

As researchers, we were careful to ask respondents to situate their descriptions of the SSA phone system within their past experience. Some respondents harkened their experiences in 2025 back to the [field office](#) closures and phone issues they experienced early during the COVID-19 pandemic that began in 2020. “Once the offices shut down on that fateful day in 2020, they've never been able to get away from that,” said Angela, an attorney in the Philadelphia region. Lea, an attorney in the San Francisco region, said, “Not since 2020 have we had such phone issues as we did in [2025]; 2025 is the next most egregious to 2020.” Respondents were mixed about whether SSA customer service had improved since the pandemic. Some, like Amara, an attorney from the Philadelphia region, said “the trajectory was improving because offices reopened, you could go in, there were multiple ways to reach them.” Jane, a [paralegal](#) in the Kansas City region, did not see such improvement, saying, “since the pandemic, it’s just gotten worse and worse and worse.” Others, like Jordan, a benefits specialist in the Atlanta region, were more neutral, not saying that SSA customer service had improved or worsened since the pandemic, but that “things that have been problematic [have] never gotten better.” The variation in experiences during and after pandemic-related SSA office closures may reflect geographic differences in SSA operations (Welter, 2025). Staff cuts throughout 2025 were uneven; while the agency cut 11% of their staff on average, some field offices lost a quarter of their staff and in rural areas, some field offices were forced to shut down altogether (Williamson, 2026). Yet, regardless of whether they perceived that SSA service had improved since the start of the pandemic, most respondents agreed that their experiences with SSA in 2025 had worsened compared to prior years.

"It is a hundred percent getting worse and not in all explicitly malicious ways, but in a lot of like, 'Oh, that never got processed.'"

Other respondents contextualized the worsening customer service they experienced in 2025 within the agency’s years-long staffing decline. “Social Security has been struggling for a number of years to have sufficient staffing,” said Edith, an attorney in

the Chicago region. Drake, a benefits specialist in the Denver region, noted that, "It's always been difficult to reach Social Security. Even before this current administration, Social Security had published that they're at their lowest staffing level in 50 years, but the highest applications." Drake and other respondents noted that SSA staff have been asked to do more with less over the years, making it more difficult for clients and advocates to work with them. Yet, with the new administration's policy and organizational changes, Drake said, "That difficulty increased."

"When you cut staff, how do you expect things to improve?"

Lea interpreted the new administration's approach toward SSA as a continuation of the first Trump Administration's efforts to "starve" the agency. She said,

"There is some history with the prior administration. I think that they did this kind of smart thing where they just starved Social Security of funds and resources...They just sort of ground it to a halt by starving it. And I think that was pretty effective, the first time around... It makes it really hard for them to get anything done, which is kind of smart. You don't have to change any of the regulations, but you grind the agency to a halt so they can't do the work... I think that all set it up for this second Trump administration to come in, and have this framework where... the agency's already in this smallest budget it's been at in a long time... Then they put in these new changes that are also doing a good job of really slowing things down and making [SSA] harder to access."

Lea also observed that in between the two Trump administrations, the Biden administration attempted to restore funding for SSA staffing, but was ultimately unsuccessful. Pam, an attorney in the Chicago region, noted that the [SSA Commissioner](#) under the Biden administration, Martin O'Malley, "did a lot of work in trying to improve the customer experience," but that these changes had been unrolled or stymied by the new administration. Pam said, "I get a lot of emails sent to my inbox... [saying] 'Things are improving.' Well, not in [my state] they're not. When you cut staff, how do you expect things to improve?"

2. Difficulties Accessing Disability Benefits

“Getting stuck in a loop”

All [respondents](#) reported that [SSA](#)’s customer service processes—communication by phone, in-person, by mail, and online—had deteriorated in the months following the new administration’s takeover of SSA. Edith, an attorney in the Chicago region, summarized the key problems faced by the respondents in this study, saying, “SSA has become increasingly difficult to reach because of office closures, phone disconnection issues, and staff shortages.” As a result of these issues, Jane, a [paralegal](#) in the Kansas City region, shared, “I just have so many cases that are stuck in purgatory because they don’t have enough workers to work them, and they don’t have enough workers to answer the phone to tell me what’s happening to them. So [the] communication breakdown is quite serious.” When clients and advocates can’t reach SSA, claims issues go unresolved, processing times increase, and [claimants](#) face delayed, denied, reduced, or terminated benefits.

“I just have so many cases that are stuck in purgatory because they don’t have enough workers to work them, and they don’t have enough workers to answer the phone to tell me what’s happening to them.”

Rerouted and without help: Challenges with the new phone system

Phone communication is essential to accessing and keeping SSA benefits. The advocates we interviewed primarily call SSA [field office](#) staff to process and troubleshoot benefit claims. For claimants without reliable internet and transportation, the phone is their only link to SSA staff who can help them troubleshoot issues with their claims and benefits. Without phone access to field office staff, claims can languish while waiting for additional information to continue processing.

All respondents reported experiencing challenges with the new phone system that SSA began rolling out at the end of the Biden administration and completed implementing after the Trump administration took office. Under the Trump administration, phone system features that had been disabled under the Biden administration (e.g. busy signals, [polite disconnects](#)) were reintroduced, along with a

new system of rerouting field office calls to less busy offices, the expansion of automated and Artificial Intelligence (AI) phone services, and the option to receive a call back instead of waiting on hold.

Under the old system, Megan, a paralegal in the Boston region, said, “I could call an inside number to Social Security. I could talk to the person who was in charge of that client's file, and I could get things sorted out within days, if not weeks.” The new phone system changed that ease of access. Drake, a benefits specialist in the Denver region, explained how SSA’s phone system evolved over 2025:

“I think around February in particular, we started noticing changes where you'd call and sometimes it'd say there's no one available... Then it changed to you'd call and you'd wait on hold, and then after about 15 minutes, it would say ‘No one's available, please call again later’... You'd have to either keep calling and hoping that you get through or you'd pick another day for the same thing to happen.”

These dropped calls and statements that no SSA representative was available stood in contrast to SSA’s prior system, in which despite notoriously long wait times, waiting eventually paid off by connecting the caller to an SSA representative who could help with their case. The new system, our respondents reported, dropped calls as often as it connected them.

When respondents’ calls did go through, they faced a new challenge: frequently, their call would be answered by someone who couldn’t help them. The new SSA phone system had implemented a rerouting feature. When clients or advocates called one field office, calls would be frequently redirected to other field offices in their region. Amara, an attorney from the Philadelphia region, explained the runaround. “There was one instance where I called the [Field Office A] specifically because I knew I needed to ask them the question. After like 45 [minutes] to an hour on hold... I had been routed to [Field Office B].” Amara was then told that they couldn’t help her, and she would have to call back Field Office A—the one she called in the first place— but that field office wasn’t accepting any calls that day.

“Now with the new change, it's pretty easy to get a human on the line. They just can't help you.”

Rerouting calls to less busy offices would not be as much of a problem if SSA staff at all field offices had access to the same information about every claim and claimant. That, however, was not the case in summer 2025. Jamie, a benefits specialist in the Seattle region, shared that when their phone calls got routed to field offices that weren't working on the case they called about, "there is very little that [staff] can actually do to help us... so now with the new change, it's pretty easy to get a human on the line. They just can't help you." Until SSA implemented a technical fix to this issue after our interviews, field offices could see some, but not all, information about cases processed in other field offices. Under the new technical fix, field office staff are supposed to now be able to access and amend all claims, not just the ones processed in their office, though informal updates from our respondents suggest barriers persist. Future research will be necessary to assess the extent to which this change has addressed the problem.

Some respondents said that the new SSA phone system's rerouting of calls has resulted in shorter wait times on the phone, but these shorter wait times come at the expense of actually reaching someone who can help them with their case. As Tina, an attorney from the New York region, explained,

"I do think the wait times have gotten shorter, but I don't actually think it's because they're being more efficient. It seems like by putting up so many barriers, they're getting fewer people to be in line... And then again, because the phones are transferred to different places, even though you're getting answered, you're not getting helped."

This has led some of our respondents to be skeptical of reports from SSA "touting how fast people are getting through the phone," said Susannah, an attorney from the Philadelphia region. While SSA's phone wait times may look like they've decreased with the new system, our respondents said that they are frequently unable to complete the tasks that prompted their calls in the first place.

Respondents cited a couple of new phone system features that they found helpful in communicating with SSA staff. Amanda, an attorney from the Atlanta region, noted that "some offices have a callback feature now . . .and we have actually been able to get calls back, and within office hours, which is new." She went on to explain that "they give you an estimated wait time now, which they did not before." This was helpful for her work as in the past she would "just sit there and . . . [not] know if

someone is ever coming or not.” While the callback option was not always offered, and the callback did not always happen, these two changes were welcome improvements.

At the same time SSA began rerouting calls from one field office to another, SSA also increasingly encouraged claimants and representatives to use the national [1-800 number](#). The respondents we spoke with preferred to directly call the field offices, because the SSA field office staff had direct access to the detailed case information that could help them resolve the issues they were calling about. Nina, an attorney in the Chicago region, commented that specialized field office staff had been reassigned to the 1-800 number, which she interpreted to be driven by SSA’s focus on specific metrics. “My understanding is field office staff are being pulled to the 800 number to answer the 800 number... They're focused on throwing bodies at the 800 number in order to improve the optics of call answer times and call completion rates.” Yet, with the 1-800 number, clients and advocates face the same problems they do when their calls are rerouted to other field offices: they can’t get the help they need.

As Louie, a paralegal from the Chicago region, explained, “I really was rarely calling the 1-800 number. That number was typically for clients to call to make [initial applications](#), before the switch happened. But now because they're taking the field office access away from us... we have to call the 1-800 number.” Louie went on to explain how, when they called the 1-800 number, they were “asking very basic questions” about a recent decision on a client’s case. “They couldn’t tell me... And I’m calling [them] to clarify more because that’s exactly what the notice says to do. Then the person on the phone is like, ‘I don’t know... It’s hard for me to know.’” Louie called this experience “really frustrating” because they were unable to get the basic information they needed to update their client on the status of their case.

Nadine, an attorney in the Philadelphia region, described how her phone challenges were compounded by the expanded automated response² and AI systems SSA emphasized in 2025. “They [the staff on the 1-800 number] will tell you just to call your local field office to answer your own direct case questions... The 800 number isn’t an

² People who call the 1-800 may experience two different types of automated responses. The first, Interactive Voice Response (IVR), routes calls within the agency based on the caller’s stated need (e.g., “replace lost Social Security card”). The second, AI bots, answer frequently asked questions in response to the caller’s stated need as opposed to immediately routing them to a live agent.

option for us or our clients because of the specificity.” Nadine described this process as like “getting stuck in a loop” between the 1-800 number, field offices, and “getting through the AI that answers now.”

For both the 1-800 number and the field office phone lines, clients and representatives must now navigate the new AI system before reaching an SSA staff member. Jane, a paralegal in the Kansas City region, explained the change: “It used to be the field offices had a ‘press one for’-type menu, and that was annoying, but fine. I could navigate it quickly enough. And within the last month, they've switched to one of the AI assistants, which is far worse. Far less navigable... far less accessible.” The new AI system requires callers to say what they are calling about, but frequently does not interpret the caller’s statements correctly. “It was very hard to get through to an agent” for the first weeks after the new AI system was implemented, said Patrick, an attorney from the Chicago region. As Tina, an attorney from the New York region, explained, “if you can't tell the AI the right words, you can't get to the [agent answering the] phone.” It took a few weeks, but soon Patrick, Tina, and many of the other representatives we spoke with figured out what to say—and how often to repeat certain key words—to quickly bypass the [AI chatbot](#) to get to an SSA representative. Now, says Colin, an attorney in the Chicago region, “the AI system seems pretty manageable... Everybody just says [keyword] until it gives you a real person.” Colin, like other respondents, found the AI chatbot “manageable” not when he successfully used it, but when he could avoid interacting with it altogether.

"And within the last month, they've switched to one of the AI assistants, which is far worse."

Inconsistent and confusing field office policies

Under a policy initiated under the Biden administration, phone communication took on increased importance beginning on January 6, 2025, following an SSA directive urging people to call and schedule appointments to address their questions, rather than doing so through in-person walk-in visits to field offices (Bystry, 2024). Freddie, a benefits specialist in the Denver region, explained how the challenges with the new phone system have interacted with the new appointment policy, saying, “In January... Social Security implemented a no walk-in policy... Well, that was fine when we could call and make an appointment, but now we can't reach anybody [by phone] at Social Security... We can't get through to make an appointment.” When clients and

representatives are able to make appointments, they are “a month or two out,” said Diana, a benefits specialist in the Chicago region.

“To make an appointment... you need a phone that allows you stay on hold for a very long time.”

Even having an appointment isn’t a guarantee that an SSA staff member will show up for the meeting. Phone appointments have proved especially prone to no-shows from SSA staff, according to our respondents. “They [SSA staff] don’t call at the time that they say they’re going to call,” said Helena, an attorney in the Chicago region. Sometimes, the SSA staff don’t show up for the meeting, and “we don’t even get a courtesy call that they’re not going to call at all,” she said. This is particularly troublesome for low-income SSI claimants who don’t have easy phone or internet access and need to borrow someone else’s phone or find internet access for the meeting.

Requiring appointments, especially in-person appointments, causes access issues for many low-income clients with limited phone access. As Lea, an attorney in the San Francisco region, described, “To make an appointment, you generally need a phone... or access to the internet, or you need a phone that allows you to stay on hold for a very long time because it’s hard to get through.” Many of the low-income clients represented by the respondents had pre-paid phones with limited data and minutes, and did not have regular access to the internet. Without easy phone or internet access, our respondents reported that many of their low-income clients rely on dropping into field offices to resolve their Social Security claims issues.

Some respondents mentioned how their local field offices’ walk-in policy allows exceptions, but these rules are inconsistently enforced and cause confusion. Taylor, an attorney in the Dallas region, shared, “In our field office, you can walk in without an appointment if you just want to change your direct deposit or update your address or phone number... For all other matters, they have to have an appointment.” Taylor described how she had gone to the field office a few times since this rule took effect and heard an announcement in the waiting room telling people to go to another window to make an appointment if they didn’t have one. But, the announcement didn’t mention the exceptions, leading to more confusion among the clients and advocates waiting to meet with SSA staff.

In other field offices, Tina, an attorney from the New York region, observed, “The staff would just come out of the back and say, ‘If you don’t have an appointment, just leave.’” Tina noted that SSA staff would send people home without checking with walk-in clients about their reasons for coming to the field office that day. “They were just sending people home and telling them to call and make an appointment,” she said. In contrast, Patrick, an attorney from the Chicago region, shared that it was his understanding that “if a person is adamant... they’re supposed to allow you to sit there and wait, and you should be seen that day, assuming there’s the practical ability to do it.” This guidance, however, is inconsistently enforced at SSA field offices. If clients aren’t insistent, explained Patrick, they end up leaving SSA’s field offices more confused than when they arrived.

“They were just sending people home and telling them to call and make an appointment.”

Customer service strained amidst staffing cuts and reassignments

The respondents we spoke with interact regularly with SSA staff, ranging from their contacts at field offices, to administrative law judges, to staff at [hearing offices](#) and regional offices. They described collaborating with SSA staff to understand SSA policy, trouble-shoot complex cases, and advocate on behalf of their clients. Across multiple interviews, respondents commended the staff they worked with, and several emphasized that any concerns they had about changes at SSA from a national level were distinct from their relationships with and respect for overburdened frontline staff. Pam, an attorney from the Chicago region, contrasted her experiences calling the hearings office where she gets “pretty good service” and can “usually can find someone to answer [her] questions” with that of her local field offices. She described being unable to get through to the field office on the phone, which she attributed to staffing barriers as she wondered what “a field office that is down to two, three, maybe four staff... [is] supposed to accomplish?”

Many respondents attributed their recent SSA customer service challenges to staffing reductions and reassignments. “My understanding of what’s happening at the field offices is that some of them have lost a lot of staff,” said Nina, an attorney in the Chicago region. Jane, a paralegal in the Kansas City region, described the impact on her state’s [Disability Determination Services \(DDS\)](#) office, which are state agencies that process initial disability claims under contracts with SSA, saying,

“Since the beginning of the year, it's definitely gotten worse because they've undergone some funding cuts and stuff. I had called DDS to check on cases to see if they were being assigned to examiners. [The DDS worker] told me that normally, they're supposed to have 60 people on staff and they have 17, and they also have a hiring freeze. So, they're not allowed to get more people.”

Respondents in other regions noted SSA staff attrition as well. Freddie, a benefits specialist in the Denver region, said that SSA field office staffing has “been somewhat of a slow decline, but accelerated recently.” At her local field office, there used to be nine SSA claims representatives, a number that had dwindled to six by the start of 2025. Then, she said, “we lost three in the past six months.”

Some respondents attributed the decline in SSA field office staffing to the deferred resignation offer, or “[Fork in the Road](#)” email, along with two other government-wide programs that incentivized resignation and early retirement among federal employees. Jane, a paralegal in the Kansas City region, shared what happened in her field office “when all that [DOGE](#) stuff was going on” in early February. “They had sent out one of those voluntary early retirement things, and the field office that I work with out of [city] lost two or three employees... that took that early retirement.” She went on to describe the impact of these multiple retirements, saying that the field office “collectively lost like 120 years of experience... and now those people aren’t getting replaced,” due to SSA’s hiring freeze. By April 2025, SSA data showed that the agency lost 2,000 frontline staff to a program incentivizing staff resignation (Markowitz, 2025). By November 2025, SSA had lost 11% of their workforce, with staff reductions disproportionately impacting some field offices and rural areas (Williamson, 2026).

“The sense that I get from speaking to people... it’s just too much for them. They can’t deal with it anymore. It’s a horrible place to be.”

Other respondents shared that SSA staff may have been more willing to take early retirement due to the administrative and policy changes being implemented by the new administration. Angela, an attorney in the Philadelphia region, said, “There are always people that are on the verge of retiring. I think it wasn’t unusual that people would say... ‘I’m getting to retire, but I’m going to wait until this happens or that happens.’” But, the new administration changed SSA employees’ retirement calculations. She explained, “With the new administration’s picks... people just made the choice. ‘I

don't want to do this anymore. It's too hard.'" Similarly, Leala, an attorney in the New York region, observed that the new policy directives and working conditions at SSA prompted several administrative law judges she knew to retire. "I know that a lot of judges at the [state] hearing office took retirement, who I don't think otherwise would have," she said. "The sense that I get from speaking to people... it's just too much for them. They can't deal with it anymore. It's a horrible place to be."

Experienced staff are not easy to replace. Leala put it this way, "A lot of people who had deep wells of knowledge are gone... they each have their own little specialty of a thing that they know. And then when they're gone, that knowledge is gone." SSA's programs are complex and have layers of rules that take years to learn. "It can take a good three years to get someone fully trained," said Angela, an attorney in the Philadelphia region. Jane, a paralegal in the Kansas City region, worried about who would train new workers once the hiring freeze is lifted. "Not the people who have 30 or 40 years of experience because they're gone, you know?"

In light of staffing cuts, SSA has been reassigning staff to different tasks and departments. Respondents report that these reassignments have made it harder to solve their claims issues because the SSA staff they are able to connect with do not have the right training. Susannah, a supervising attorney from the Philadelphia region explained the issue, saying, "There's been a lot of reshuffling... a lot of the people who used to work on the policy side or like the back end were like reshuffled to work in the field office to be customer facing, but they don't have the right training, so they don't give the right information." Amara, an attorney from the Philadelphia region, meets regularly with an SSA field office staff member about her cases, but recently, the staff member has been reassigned and will cancel their meetings at the last minute. At times, she said, this staffer would be assigned to answer phones for the day, "and they won't let him take time away to go meet with us to solve our escalations." These reassignments have made it more difficult for respondents to meet with the correct SSA staff on both an ad-hoc and proactive basis.

"A lot of people who had deep wells of knowledge are gone... they each have their own little specialty of a thing that they know. And then when they're gone, that knowledge is gone."

Applications take longer, are denied more often, with more errors along the way

In 2025, increased delays in case processing affected every stage of the disability benefits process, from initial applications to post-award payments, according to our respondents. While delays have long been a problem plaguing the agency, respondents said they had become significantly worse in the past year, which they attributed to staffing cuts, system backlogs, the loss of experienced workers, and a new agency emphasis on alleged fraud. As Valerie, a benefits specialist from the Seattle region, explained, “It’s pretty apparent that if nothing else, it is taking a lot longer to get anything done on any level of this process, or the application process. Whether it be sitting at the field office, whether it be moving the case to DDS, whether it be waiting for the case to get assigned at DDS, it was already taking a long time before, but it has gotten worse.” Jane, a paralegal from the Kansas City region, also noted worse delays at every level of claims. She recounted that her local field office created a new voicemail recording to warn callers that “any initial application for disability will take 200 to 230-plus days to get reviewed due to a shortage of staff.” She added, “We have some that are nine to ten months waiting [for review] that we filed and called on, and they’re still pending at DDS for an examiner.” Jane tried to communicate a similar nuanced message as Valerie had, that delays in claims processing has always been an issue, but the present situation was markedly worse. She explained, “I first started here seven years ago, they’ve never been quick. But this is a little egregious.... They haven’t even started looking at it.”

Other respondents described a problem they encountered with claims at the [reconsideration](#) stage: claims being processed unusually quickly. Colin, an attorney in the Chicago region, said that “some of [their] reconsiderations have turned around in a matter of like two to three months,” which was much faster than usual. He worried that in these fast turnarounds, applications were “sort of poorly handled” without adequate review. He described one such circumstance in which his client was scheduled for a mental status exam with an SSA-contracted consultative examiner. When the examiner canceled the appointment, SSA denied the case without ever rescheduling the exam. Colin mused, “I mean, sure, they sped the whole thing up,

“It’s pretty apparent that... it is taking a lot longer to get anything done on any level of...the application process.”

but it starts to make you wonder why there even is a reconsideration step if they're just going to sort of delay the case for three, four months and then deny it anyway." Respondents like Colin who experienced seemingly rushed denials wondered if SSA was simply trying to decrease their processing time without actually giving applications fair or accurate consideration. Marie Theresa, a benefits specialist in the Philadelphia region, also noticed more frequent claim denials among her clients who she helped with initial applications. She warned that this was "maybe a rumor," when she shared that she heard that the "DDSEs are just being told to get these claims out."

These concerns were echoed by some respondents who emphasized that it was both the quantity and the quality of the denials that had changed for them. Across the country, respondents described an increase in denials that were inaccurate or erroneous. Riley, a benefits specialist from the New York region, described a trend she'd observed in 2025 of increased denials, even for clients who were "clearly eligible." She explained, "they are meeting every single eligibility standard, and they're just getting denied." Aubrey, a benefits specialist from the Chicago region, described seeing an increase in "erroneous denials coming through" with mistakes that were "very alarming to [her]." She described "two cases so far this year where it's very clearly an allowance and was processed as denial" which she "had never seen before this year." Similarly, Anne, an attorney from the Philadelphia region who described herself as "very middle of the road politically," recounted "really bad decisions, like legally incorrect decisions." She expressed her surprise and confusion as an administrative law judge with whom she had never had problems before had "looked at a totally different [medical] listing than the one I was alleging" in two separate cases. She wondered what could have prompted this change in his decisions, asking, "Did somebody say something? Did something go out saying we're having too many favorables? I don't know."

Valerie, a benefits specialist from the Seattle region, was also alarmed by the nature of denials she was seeing this year which she referred to as "egregious." Valerie noted a number of disturbing new trends that resulted in claims denials, such as cases where large amounts of medical evidence was seemingly disregarded. Clients had gone through extensive psychodiagnostic evaluations, only for DDS to do "backflips to try every which way to kind of just pick them apart" and then

"They are meeting every single eligibility standard, and they're just getting denied."

refer to [consultative exams](#). Valerie emphasized the success she used to have with her organization's historically thorough claims, which included extensive medical records for their clients, saying, "It has worked beautifully for 20 years since I've been involved in this . . . it's all upside down now." The increase in denials, especially those based on unfamiliar and unexpected rationales, left respondents uncertain how to best represent their disabled clients, as carefully honed strategies and extensive medical evidence no longer seemed adequate.

Increased overpayments and payment center issues

Respondents were cautious to note that [overpayments](#) and other payment issues were longstanding problems. While some felt that they could not quantify whether or not they had increased, across the majority of interviews they described seeing more "issues with people not getting the correct amount, not getting retroactive payments, or seeing retroactive payments delayed," as Michael, an attorney in the Atlanta region explained. He connected these problems to customer service and staffing issues more broadly, noting that if a beneficiary needs to communicate a status change that would lower their check amount, such as receiving housing support or working part-time, they need to "get someone at the local office to review a statement from the client." Given barriers to accessing field office staff, "fixing these issues becomes much harder."

"They're not getting notices for the check problems . . . clients are getting cut off without notice."

Several respondents also noted the changing quality of overpayments. John, an attorney in the Kansas City region, noted that overpayments went farther back in time and had more accounting errors than he'd previously seen. He said, "I've done more overpayments in this spring than I'd had done for the totality of the other times . . . they'll show me an accounting that includes amounts that were never sent to the client." Many respondents described recent overpayments using terms such as "bizarre," "weird," "lies," "make no sense," "inaccurate," or as Nadine, an attorney in the Philadelphia region put it, "mysterious overpayment that doesn't exist." Respondents described spending hours trying to resolve overpayments, which was particularly hard given communication issues. Many worried that unrepresented clients were simply paying for "nonexistent" overpayments because they were unable to fight them.

Louie, a paralegal in the Chicago region, also observed “a new wave” of overpayments for their clients and was particularly concerned that “they’re not getting notices for the check problems,” meaning that their “clients are getting cut off without notice.” Louie described being “really stressed out” about the delay or absence of overpayment notices, as it risked clients missing the deadline for them to appeal. Amara, an attorney from the Philadelphia region, also described clients not receiving their full benefits because of overpayment issues compounded by delayed processing times and lack of communication from SSA. She explained that while “Social Security is supposed to stop withholding the overpayment from your benefits while they make a decision on the request for reconsideration,” this was not happening for her client. At the time of the interview, it had been “two months since [Amara] submitted the request for reconsideration and they still haven’t stopped withholding because...they haven’t even processed it.” In situations like Louie’s and Amara’s, clients could have their already modest benefits withheld without notice and without cause.

Several respondents also reported seeing more overpayments that were seemingly dredged up from longer and longer ago. Tina, an attorney from the New York region, explained that over the few months prior to our August 2025 interview, “almost every single entitlement ...comes with an overpayment...Somehow a new overpayment has resurfaced from years and years ago, so it seems too common to be a fluke.” Indeed, the Trump administration resumed a program aimed at collecting debts from OASDI and SSI beneficiaries that were accrued prior to March 2020 (Victor Valley News Group, 2025).

“I’ve never seen a delay in getting paid this bad, ever.”

Many respondents also noted an increase in delays and errors from the [payment center](#) after initial benefit approval. Respondents described “weird stuff” happening like calculation errors, errors in deducting Medicare premiums or in-kind support, and in one case even sending a check to the wrong bank account. Silence, an attorney from the Chicago region, explained that she now had to ask additional questions after winning a case, saying, “You have to make sure, are they getting the right amount? Did they get the right amount of back pay?” While delays and communication with the payment center were a longstanding problem, respondents like Pam, an attorney in the Chicago region, emphasized, “I’ve never seen a delay in getting paid this bad, ever.”

Some payment center delays were related to issues with scheduling [Preeffectuation Review Contact \(PERC\)](#) appointments, in which SSI claimants who have been medically approved for benefits have an interview with SSA to confirm financial eligibility and determine their exact benefit amount. Respondents described scenarios that were unusual to them, such as SSA requiring in-person PERC appointments when they were typically conducted over the phone, or clients being told that they missed their PERC appointments when they were never notified of them to begin with. Lea, an attorney from the San Francisco region, said that “PERCs [have] become sometimes more of an issue,” including making sure that client benefits “get calculated correctly.” This, alongside delays in PERC appointments, that as Aubrey explained were “taking forever to get scheduled” in 2025, a matter of months whereas they used to take weeks. Delays or other barriers to PERC appointments meant that claimants were going longer without critical benefits for which they had already been found medically eligible.

As with overpayments, payment center issues set off long delays due to very slow and inconsistent communication. Payment centers are the offices that process and issue Social Security benefit payments once claimants are approved for benefits. Marie Theresa, a benefits specialist in the Philadelphia region, wondered if “God is in charge of the payment centers” as it “seems like nobody else is.” Overpayments and payment issues that resulted in reduced or halted checks to beneficiaries created major problems for our respondents’ clients, as they were often living precariously and depending on each check to meet their basic needs.

Marie Theresa wondered if “God is in charge of the payment centers” as it “seems like nobody else is.”

Improvement is possible: Recent action from SSA on payment center communication

In the fall of 2025, after we had conducted our interviews, a group of stakeholders asked SSA leadership to improve the pathways to escalate payment center issues. As part of their response, SSA leaders created a dedicated phone number that advocates can call and be routed to the payment center that had jurisdiction over their case. While this change occurred after we completed our interviews, informal reports suggest that it has proven to be a helpful resource.

We note this development here, amidst the other serious issues described in this report, to highlight a case in which SSA took steps to address and resolve the barriers facing disability claimants. While a new phone number can't fully remedy the payment center issues described above, it allows advocates to check on payment issues and escalate as necessary, a resource that some respondents reported wanting for years. We are heartened by any steps that may make the programs less burdensome to navigate. Future research should monitor how this and other new steps are implemented, whether they have adequate staffing without drawing workers away from other areas, and what advocates say about using the service.

3. The Dire Consequences of Unresponsive Customer Service

"This woman is dying"

When applications get stuck and [appeals](#) drag on, the consequences are severe. Because these issues can result in the denial or loss of benefits, [claimants](#) and their representatives need to be in close contact with [SSA](#) to make sure the proper paperwork is submitted on time and that claimants' benefits aren't wrongfully denied, reduced, or terminated.

SSI claimants, who only qualify for the program if they have low incomes and assets, are particularly at risk of severe economic consequences without benefits. Aubrey, a benefit specialist in the Chicago region, explained that while her clients wait for SSA to process their claims, "They are losing access to their housing. They're losing their food services... I would say at least 50 percent of our clients are already homeless by the time they get to us... I'd say another 25 percent become homeless while we're working with them." Leala, an attorney in the New York region, explained what her low-income clients go through when their benefits are suspended and awaiting resolution with SSA, saying, "For most of [my clients], it's horrible, right? If they're lucky, then they're on public assistance and have something. But a lot of people have nothing. They're in arrears, they've got eviction notices, they've got kids they need to feed."

"They are losing access to their housing... I'd say another 25 percent become homeless while we're working with them."

Some [respondents](#) worried that problems with SSA's customer service would worsen the health of their disabled SSI claimants and ultimately lead to their client's death. Anne, an attorney in the Philadelphia region, described a situation where she couldn't get the SSA staff to answer her questions for a client because the staff didn't know how to access some paperwork Anne had submitted three years before. "I was literally almost crying," Anne said. "This woman is dying. I mean, she is dying. All you have to do is push a little button to get this moving, and you're telling me you can't, because you don't know how to do it." Anne worried that SSA's delays meant her client would die before seeing benefits. "She's going to die. She has a very serious medical condition, and she's living outside," Anne said.

"This woman is dying. I mean, she is dying. All you have to do is push a little button to get this moving, and you're telling me you can't, because you don't know how to do it."

Challenges accessing SSA services can be particularly damaging for claimants managing multiple disabilities and economic precarity. Aubrey spoke about her multiply-disabled clients who "come to us because they desperately need the support." As many of the representatives we spoke with explained, Aubrey's clients have long struggled with SSA processes because they are not designed for the disabled people they serve. Aubrey said that her clients "really struggle with frustration tolerance and making appointments and executive functioning and things like that. So, every little thing just pushes the dial further away from them for actually being able to successfully win their case." Similarly, Freddie, a benefits specialist in the Denver region, shared about the difficulty two of their clients were having reaching SSA as they applied for benefits in 2025:

"In the past six months, [Social Security processes have] become not easier, but much harder. I have two [clients] with chronic suicidal ideation and I seriously worry about it... and unfortunately both of them are prone to suicidal ideation that have reached a point of overwhelm and are just saying, 'Hey, if I can't talk to these people, I give up. I'm never going to get my benefits.'"

Freddie worried that not only would their clients stop seeking benefits due to their inability to reach someone at SSA, but that SSA's lack of responsiveness would contribute to their client's suicidal ideation.

4. Differential Impacts of SSA's Administrative Burdens

“It just doesn't anticipate the client base that we work with”

As with many [administrative burdens](#), changes to [SSA's](#) policies and procedures are experienced unevenly: those most in need of services often shoulder the greatest burden. [Respondents](#) described how changes to SSA processes in 2025 disproportionately affected their clients who are unhoused, have psychiatric or cognitive disabilities, have limited English proficiency, have limited access to or familiarity with the internet, or belong to immigrant and [mixed-status](#) families.

Push to online services

Many respondents noted both benefits and drawbacks in SSA's increased usage of online services. “Social Security has really been pushing ... online services,” Patrick, an attorney from the Chicago region, explained. He noted that SSA has “improved those significantly,” citing the increased amount of “notices and information online now.” Angela, an attorney from the Philadelphia region, pointed to the COVID-19 pandemic as a turning point for SSA's online services, saying, “I love the electronic capacity that was developed since the pandemic. You know, everything from allowing electronic signatures to online [appeals](#).” Both Patrick and Angela followed up their comments with caveats, noting that while they found their work eased by the expanded online information and systems, processes were far from seamless and they still needed “some human connection...to make it work.”

Changes to SSA's policies and procedures are experienced unevenly: those most in need of services often shoulder the greatest burden.

Respondents feared that SSA's push to internet-based services left out many of their most vulnerable clients who struggled to access and use the internet. As Michael, an attorney in the Atlanta region, explained, “The one thing that is helpful is that you can... update income information online. But, obviously [only] if you've got a [My Social Security \(mySSA\)](#) account, which not everyone does, and not everyone has a reliable internet connection and not everyone's comfortable using the internet.” He went on to explain that digital exclusion cuts across age and disability categories, affecting “people who aren't computer savvy, who use a smartphone instead of a

computer, who don't have reliable internet access" including both "someone who's in their 20s, but unhoused" and "someone who's in their 70s and having issues with memory loss."

Shifting routine tasks online, in many cases, created new barriers and left respondents spending hours supporting clients through basic computer education and identity verification processes. Several respondents highlighted the current mySSA account set-up process as a particularly high barrier for multiple groups of clients. In order to carry out online tasks, beneficiaries and [claimants](#) are required to have a mySSA account. To begin this process, clients must have an email address, which many do not. Elaine, a benefits specialist in the Seattle region, explained, "[Online account

"[Online account management] is a great tool, but it's not a great tool if you can't access it."

management] is a great tool, you know, it's a great tool, but it's not a great tool if you can't access it that way...I always try to encourage people, but frankly... It usually takes about an hour to an hour and 15, 20 minutes. So, I can't sit there and set up everybody's email." Many respondents described barriers at this stage, and found themselves either unable to support their clients with mySSA access or spending hours of their time setting up email addresses for clients who rarely use the internet.

For those who made it past the email barrier, the photo and identity verification process created additional and often insurmountable obstacles. Miranda, an attorney in the Philadelphia region, described spending 40 minutes trying to help a senior client with the photo ID process before giving up: "You have to hold up your license, and he couldn't figure it out to the point where I was like, let's just call them. At this point, we spent more time trying to get [him] to flip [his] ID...And in the end, we couldn't." Many respondents described barriers to the identity verification process faced by people with unstable housing histories or disabilities impacting their memory, which meant that "for the majority of [their] clients, creating a mySSA account online is not possible," as Lea, an attorney from the San Francisco region, explained. She went on to enumerate the barriers:

"The kinds of information that they ask people, to verify who they are, don't really stipulate somebody who isn't computer savvy or knowledgeable, but also has had a life experience where they've had so many addresses associated with them, they're not going to remember which ones are theirs. Or like, the kinds of

questions about familial stuff. It just doesn't anticipate the client base that we work with. And so most of our clients have not been successful at creating mySSA accounts...It prevents them from accessing this whole world that Social Security is envisioning makes things easier."

Many respondents echoed this sentiment: that a process that creates theoretical efficiency, yet excludes the very people Social Security is designed to serve, is not an effective process. Respondents noted that not only was the mySSA account creation process inaccessible to many of their clients, it also was very frustrating. Nina, an attorney in the Chicago region, explained, "And so if your challenge is a behavioral health challenge or a cognitive challenge, like God help you. I mean, it's just hard and frustrating and there's not a human that you can feel like at least you can try to explain yourself to." Many respondents echoed this frustration in their own interactions with some of SSA's online systems, and noted that their clients who struggled more with problem-solving and emotional regulation became especially distressed.

"Most of our clients have not been successful at creating accounts...It prevents them from accessing this whole world that Social Security is envisioning makes things easier."

Advocate-facing online systems were more broadly appreciated by respondents, a more highly technology-literate group than the clients they serve. For example, some respondents noted that they had recently been granted increased access to information at the reconsideration stage, which has been helpful for their client representation. [Electronic Records Express \(ERE\)](#) is a system advocates use to manage claimant information such as medical records and information on where the disability claim is in the review process. Multiple respondents noted that they were newly able to view expanded information and decisions on their client cases through the ERE system, rather than "before, you always had to just keep calling and see, did they make a decision?" as Leala, an attorney from the New York region explained. Other respondents noted appreciation of online systems like the claim appeal system. Respondents' assessment of SSA's online services often hinged on whether claimants or beneficiaries had to interface with a system, and the ease with which advocates could access systems on behalf of their clients. For example, some respondents noted that if they could access mySSA information on behalf of their clients, it would be a more useful system.

Impacts of the phone chatbot

The introduction of the [AI chatbot](#) to the SSA phone system, discussed in [Section 2](#), was another source of inequitable access that respondents cited. They noted that clients with speech or communication disabilities were at a particular disadvantage in communicating with the AI chatbot. Jane, a [paralegal](#) in the Kansas City region, described these disability-specific barriers: “People who have any sort of speech issues or hearing issues are not going to be able to navigate that menu effectively at all.” Elaine, a benefits specialist from the Seattle region, described a client with a speech disability who came to the office for assistance navigating past the AI chatbot, who could not understand his speech. Claimants and beneficiaries with cognitive, psychiatric, or communication disabilities make up a substantial portion of the disabled population served by SSA, and respondents’ discussion of client barriers suggested that their needs were not considered in designing AI-based systems.

“People who have any sort of speech issues or hearing issues are not going to be able to navigate that menu effectively at all.”

Impacts on immigrant families

Respondents highlighted the growing barriers and fears faced by immigrant families, particularly mixed-status families, and their own challenges in advising them. These fears were rooted in concerns that SSA, like the Internal Revenue Service (IRS), would share data with the U.S. Immigration and Customs Enforcement (ICE) to help them identify and locate undocumented immigrants (Economic Policy Institute, 2025).

Several respondents described situations in which a citizen child received SSI and had an undocumented parent serving as a representative payee. This had never been a concern prior to the current Trump administration, but new threats to privacy and to mixed-status families prompted advocates like Nina from the Chicago region to wrestle with how to advise her clients: “I mean, it's hard for advocates to help families think about and assess unknown risks.” She described a case involving a citizen child SSI recipient with an undocumented parent who had long served as the representative payee. “Has there ever been a fear before now that SSA was gonna comply with some crazy order to share all kinds of data? No, there wasn't...But

now...counseling people on whether it's safe to do that, whether they should change their kid's payee to somebody else, if there even is anybody else, should they apply at all?" While undocumented parents can legally serve as representative payees for their disabled children, the SSA had in fact considered banning payments to anyone without a Social Security number in March 2025 (Alms & Wagner, 2025). In addition, the increasing exposure of SSA data and discussion of data sharing for the purposes of immigration crackdowns reverberated through immigrant communities and worried respondents on how they might protect and advise their clients.

In other situations, respondents described unprecedented burdens on immigrant clients to present proof of residency that delayed their claims. Taylor, an attorney from the Dallas region, described a case in which her client, a lawful permanent resident in a nursing home who had lost the ability to speak or walk, was denied SSI until she could hand-deliver the client's [green card](#), despite having proof of his lawful status via his [A-number](#). When she was able to do this and file the request for [reconsideration](#), she found "the damn case has been closed and that was back in May... they have not processed the reconsideration even though it's totally a non-medical issue." Taylor emphasized that her client's disability was not in doubt and neither was his immigration status, but his case was still delayed on the basis of a physical green card.

"Has there ever been a fear before now that SSA was gonna comply with some crazy order to share all kinds of data? No, there [h]asn't."

While access to services in languages other than English was a longstanding challenge, respondents described concerns that language barriers could worsen and that the previous administration's efforts to improve language access would be halted. Susannah, an attorney from the Philadelphia region, said that she was still "observing the impact" of the Trump administration's March 2025 executive order designating English as the official language of the United States. She worried that agency reviews happening in light of this policy could mean that SSA forms or letters would no longer be provided in multiple languages. Susannah noted that this could exacerbate existing problems as "clients continue to have trouble understanding letters" and that communities using "languages that are less commonly spoken" would be disproportionately impacted as these interpreters are already harder to access.

Taken together, these accounts suggest that recent changes such as efforts to tighten identity verification, as well as those presented as neutral or even beneficial, like shifts towards digital service delivery, differentially impact Social Security disability beneficiaries and claimants. Clients with psychiatric, cognitive and communication disabilities, unstable housing, limited internet access, low technological literacy, and those from immigrant families, faced more insurmountable barriers in their encounters with SSA. Respondents cautioned that as an agency dedicated to serving poor, older, and disabled people, SSA's approach to efficiency will continue to fail those who need its services the most.

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5. The Erosion of Accountability Mechanisms within SSA

"There's no accountability on their end"

Across interviews, [respondents](#) described the erosion of accountability systems within the [SSA](#). In this context, accountability refers to the ability of advocates to obtain accurate information, identify and contact responsible SSA staff, and escalate cases internally when errors or delays occur. Previously, escalation channels included a combination of informal and formal accountability mechanisms, such as direct relationships with SSA staff and chains of command within [field offices](#) and [regional offices](#), to move a case forward and attempt to address issues. Respondents described using these channels when, for example, frontline worker communication stalled, client paperwork was not processed, or procedural problems and bureaucratic errors arose.

In the current environment, respondents reported that these mechanisms have largely disappeared without replacement. At the same time, the number of issues requiring escalation increased, as remaining SSA staff have less training and carry heavier workloads than in the past. Even while many pointed to the presence of staff whom they appreciated and respected, respondents described an increase in staff interactions demonstrating a lack of knowledge of the regulatory policies that govern their work, which many of them attributed to inadequate training due to staff turnover.

We found that four interrelated factors compounded each other and contributed to this breakdown in SSA escalation mechanisms: (1) the loss of key SSA staff contacts through early retirements, buyouts, and reassignment; (2) the consolidation of ten regional offices into four, which effectively eliminated an escalation pathway for most respondents; (3) increased errors, inaccurate information, and reduced responsiveness from overburdened and inadequately trained SSA staff; and (4) increased difficulty in reaching the remaining staff due to changes to and new limits on communication channels. Together, these changes in SSA since January 2025 left advocates without an effective route to resolve client problems and no one to hold accountable when things went wrong. While previous interactions with SSA had been frustrating and required persistence, respondents described the current environment as qualitatively different, marked by new feelings of demoralization and helplessness.

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Loss of previous connections

Many respondents described how prior working relationships with particular SSA staff had allowed for timely problem-solving and facilitated their work with clients. As Elaine, a resource specialist from the Seattle region, explained, “I used to have a contact at Social Security that was great for me just to be able to email and say, hey this is the situation...and they were great about getting back to me.” These kinds of direct, personal lines of communication functioned as informal accountability systems within SSA, or mechanisms that helped advocates resolve errors and mitigate frequent delays like those discussed earlier in this report.

For others, these “backdoor” contacts helped mitigate the effects of longstanding administrative challenges with SSA, such as when paperwork processing and administration procedures stalled. Susannah Lee, a supervising attorney from the Philadelphia region, explained that she used to be able to “message my person and say, ‘hey, can you see why this isn’t working?’ And he would fix it.” Losing these informal channels removed a critical buffer between [claimants](#) and an already hard to access system. By summer 2025, many respondents’ connections with SSA staff had been severed through staff cuts and reassignments. Susannah lost “her person” and

she explained that “not having those contacts has been a real hindrance,” as she and her colleagues “no longer have that channel to someone to escalate things.”

Freddie, a benefits specialist from the Denver region, described “the biggest change” since the administration “is that... right now I don’t have email addresses for the people who used to be my problem solvers.” Prior to spring 2025 when her local field office was fully staffed, Freddie’s emails to her SSA contacts “would get an answer in half a day, a day.” By the time we spoke in the summer of 2025, however, her “emails [would] just go unanswered.”

Respondents also noted how staff loss and reassignment that persisted throughout the first several months of the new administration not only severed previous relationships but also undermined their ability to build and maintain new relationships. “As quickly as we think we have a contact, they’re gone, or they’re retired,” explained Angela, an attorney from the Philadelphia region. “It makes it doubly hard getting anything done... we don’t know where the expertise is in an office to get the answers that we need.”

“It makes it doubly hard getting anything done... we don’t know where the expertise is in an office to get the answers that we need.”

For some respondents, the SSA staff they had relied on were those whose formal responsibilities included responding to case escalations within field offices or through the now-dissolved regional office structure. As staffing cuts intensified, these positions were often left vacant or repurposed, reducing both front-line and management-level capacity for problem-solving. Amara, an attorney from the Philadelphia region, described how her designated SSA contact “often has to cancel or move things around because they don’t get their schedule far enough in advance anymore to know what days they’re available,” noting that sometimes “he’ll be put on the phone lines and be the only person on the phone line for that day with no notice.”

“The biggest change is that... right now I don’t have email addresses for the people who used to be my problem solvers.”

Hollowing out of regional office supports

Prior to February 2025, when advocates could not resolve issues with cases with SSA workers and managers at the field office level, they had the option of reaching out to their regional office for support with case escalation and complex problem-solving. A number of respondents pointed to their contacts in regional offices as key resources when faced with difficult cases. But, in February, the SSA announced plans to reduce its regional structure from the previous ten regional offices down to four. While SSA's press statement characterized this as "streamlining redundant layers of management" (Hinkle, 2025a), many respondents described it as a serious blow to customer service. The SSA budget justification for 2026 shows that regional office staff was cut by nearly 80% in 2025 (Romig & O'Connor, 2025b).

"Regional has been decimated," explained Nina, an attorney in the Chicago region. "We had a working relationship with the regional communications director... and that was a real help to the helper people, the advocates who are trying to help clients with sticky stuff that sometimes field offices didn't know what to do with." Edith, an attorney from the Chicago region, similarly described her Regional Communication Director (RCD) as "our go-to person." But when her office had recently tried to contact his, she said, "We got a response back: I am no longer with the office." As the regional infrastructure was scaled back, Edith was unsure if anyone would fill the role, saying, "I don't know if his position's been filled yet. I don't know if there's an intention to fill that position. I think they put our region under another region."

Valerie and her fellow benefit specialists from the Seattle region described the importance of their relationship with their RCD, "who finally, after fifteen years, we reached some sort of level of credibility with." Once they had established a strong relationship with their RCD, they could bring all of their concerns to them about access to SSA services. By the time of our interview, they too had lost access to their RCD, meaning that they'd "lost [their] ability to complain to anybody internally with SSA, which is sad," said Valerie. Valerie's colleague Nathan added that when they encountered "very egregious mistakes or errors...now we don't have anybody to go to for that."

"I don't know if his position's been filled yet. I don't know if there's an intention to fill that position."

Silence, an attorney from the Chicago region, said that before the regional office structure was scaled back, her “regional office was really good. You could go to them with ‘Hey, weird situation.’ And they had the staff to handle it,” including policy experts in issues that field office staff might now know as well. The regional office was also a resource for working through bureaucracy, where she could call and say, ‘Hey, I’ve called this field office five times and can’t get anybody to call me back.’ And then they send that to the manager and you get an answer.” But by summer 2025, amidst the loss of regional staff, and after her region folded into a larger geographic area, the resources she had once relied on were “just gone... There’s no one there.” She sought other paths for escalation, including appealing to Congressional constituent service staff, a route that other respondents told us of as well. However, this approach has its limits. Legislative staffers do not operate within the SSA, and their power is largely limited to attempting to gain the attention of a dwindling number of SSA staff.

In the fall of 2025, after we had conducted our interviews, a group of stakeholders asked SSA leadership to strengthen protocols by which advocates like our respondents could escalate and seek to resolve issues that were stuck at the field office level. In their response, leadership stated their support for the role of Regional Communication Directors as ombudsmen for critical cases. The above accounts, however, raise major questions about whether the restructured and scaled-back regional offices have the capacity to play that role. If regional offices are to serve the problem-solving role they played before this year, they will need the workforce to make that possible.

Increased errors, untrained and overburdened staff

Respondents reported that after the loss of many SSA staff, particularly experienced staff who opted to leave the agency, the remaining staff seemed overwhelmed and less knowledgeable than in the past. As Silence, an attorney from the Chicago region, explained it, “Nobody knows the rules because they do not have the training time.” Many respondents described conversations with staff who offered inaccurate information and demonstrated uncertainty about how to do their job, putting respondents in the strange role of training the new SSA workforce. Colin, another attorney in the Chicago region, explained, “I’m a little bit worried about the turnover because I have felt that I was talking to a lot of like lower-information employees lately where you have to do a lot of explaining...I can't count the number of times I've had to pull up the regulations and read the regulations to an employee when that's what governs their job.” While some respondents noted that educating SSA staff on program rules was not out of the ordinary, they explained that the amount of SSA staff training they were currently doing was “ten times worse than it was even during COVID,” said Nadine, an attorney in the Philadelphia region.

“I can't count the number of times I've had to pull up the regulations and read the regulations to an employee when that's what governs their job.”

Respondents reported that SSA workers sometimes shared misinformation, including false policies that risked excluding eligible clients from access to benefits. “We’ve had more than one client be told that if you aren’t a U.S. citizen, you can’t apply for SSI, which is just false,” explained Miranda, a staff attorney in the Philadelphia region. She attributed the inaccurate information to lack of training, as many other respondents did, yet worried about its impact. “I don’t think they think they’re lying—they don’t know they’re giving false information. But if you’re not an advocate, why wouldn’t you believe what a government worker tells you?”

When respondents described finding errors or inconsistencies, they had enough confidence and expertise to name and try to correct inaccuracies, even if SSA staff denied the problem. Nadine described a client whose check was reduced for “a mysterious [overpayment](#) that doesn’t exist.” Despite trying to communicate with field office staff to clear up the mistake, the client’s check continued to be reduced monthly. Nadine worried, as did other respondents, that the increased errors they observed were the tip of the iceberg, as they will “just see everything become more compounded going forward... We’re going to see a lot more mistakes.” Anne, a staff attorney in the Philadelphia region, described pushing back on inaccuracies even at the field office managerial level. “Managers will tell me things and I’ll say, ‘That’s just not true... They’ll say, ‘Well, that changed when the new administration came in,’ and I’m like, ‘No, it didn’t.’” But respondents knew that unlike themselves, many claimants and beneficiaries did not have representation and would not know to push back or reeducate SSA staff when they erred. Seeking accountability in an environment of increased errors and inaccuracies created barriers to advocates doing their work on behalf of clients. “If that’s happening for me” wondered Irol, a staff attorney in the San Francisco region, “I can’t even imagine what it’s like for my clients... There’s no accountability on [SSA’s] end.”

“If that’s happening for me I can’t even imagine what it’s like for my clients... There’s no accountability on [SSA’s] end.”

Advocates demoralized as accountability breaks down

Across interviews, respondents used vivid language to describe how the breakdown of accountability mechanisms had stripped them of their capacity to advocate and escalate on behalf of their disabled clients. Aubrey, a benefit specialist in the Chicago region, contrasted her experiences with SSA in 2025 to previous experiences in prior administrations. In those cases, she felt like she could help her clients access critical benefits to help them remain housed and receive healthcare. But now, she said, “My hands are completely tied. I feel like I have a gag order. It’s really depressing... We, up until this year, had multiple ways to escalate a case.”

Taylor, an attorney from the Dallas region, described attempting to communicate with a local field office supervisor as “kind of like screaming into a void.” Angela, an attorney in the Philadelphia region, used similar imagery, saying, “I’m convinced there’s a great big trash can underneath the fax machine... Even when we’re doing electronic filings, electronic [appeals](#), they just kind of disappear.” In six interviews across different regions, respondents independently used the phrase “black hole” to describe their attempts to communicate with SSA. Respondents sought metaphors to describe their experiences of futility, as paperwork seemed to vanish inside an unresponsive and unaccountable bureaucracy.

“My hands are completely tied. I feel like I have a gag order. It’s really depressing... We, up until this year, had multiple ways to escalate a case.”

Perhaps unsurprisingly, the advocates we spoke to are demoralized by the repeated, unsuccessful, attempts to escalate concerns, the loss of previous channels through which advocates could keep SSA staff and processes accountable, and the increasing and compounding barriers to disability benefit access for themselves and their clients. “There’s definitely an air of defeat,” said Riley, a benefits specialist from the New York region, describing the mood among advocates in the new administration. “It kind of feels like... this is never going to end... we’re going to keep playing this cat and mouse game,” she explained, alluding to the seemingly endless efforts to reach SSA and hold them to account. Many of our respondents had spent years or even decades building relationships and honing formal and informal workarounds to make SSA’s bureaucratic and backlogged processes function for their clients. By mid-2025, many of them found these strategies exhausted, and were themselves disheartened and demoralized.

6. Unpredictability and Contradiction in SSA Operations

“They’re making up their own rules”

The previous sections recount barriers to accessing [SSA](#) benefits, and staff who seemed inadequately trained in program details. But [respondents](#) also told us of SSA actions that appeared detached from or contrary to formal policy, and at times even based in to staff members’ personal whims. Miranda, an attorney in the Philadelphia region, described this shift, saying, “It sometimes feels like you're dealing with someone that's like renting out jet skis. Like they're just making up their own rules... But there *are rules* because this is a government program...you don't get to actually just make up the rules.” In this section, we recount interactions with SSA staff in 2025 that respondents experienced as arbitrary and unaccountable, and the sense of chaos and unreliability this engendered for them.

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Some of these arbitrary policy changes have appeared in relation to phone use. As discussed in Theme 2, the phone system is an essential point of access for both [claimants](#) and advocates seeking to obtain benefits or address a problem. Miranda reported that in her city, respondents had been told that if they were on a call with a client, they were only permitted to speak for five minutes, one of several examples she listed of staff “making up rules.” Miranda added that colleagues had challenged the change, and local Social Security officials had backed down, suggesting that the effort to restrict call time was built on shaky authority.

Miranda was not alone in reporting such changes. Tina, an attorney in the New York region, spoke to the uncertainty around such policies, saying, “I don't know how much of it is accurate and how much of it is individual workers making up rules. So I'm not sure. I've been told I can only spend 15 minutes per call.” She added that she had also been told, on occasions, that an SSA representative was only permitted to speak with her about one case at a time. If she was calling about two or three clients she represented, this would mean that she would have to call back, which would not only

lead to delays for her and her clients, but add to the queues waiting on hold that SSA leaders say they want to reduce. Jane, a paralegal in the Kansas City region, spoke to a similar situation in her region, saying, “I was on the phone an hour the other day before I talked to somebody.” Speculating on the cause of such unmanageable waits, she added, “And then because they have such short staffing, that person's only willing to talk to me about like one or two cases at a time if I'm very, very nice.”

Respondents also reported that access to [field offices](#) seemed to be governed not by broadly-disseminated nationwide policy, but by the whims of particular managers or staff. Taylor, an attorney from the Dallas region, told us of a “field office supervisor who's actually told us not to call his extension or email him—only fax. We only have access to them via written communication via fax.” The result, predictably, is that advocates’ efforts at communication go unanswered. Anne, an attorney in the Philadelphia region, said, “Those rules change every day too. We were told there's going to be no walk-ins allowed. And now they're saying, ‘Well, some walk-ins are allowed, but there are certain things you can't do with walk-ins’...I really feel sometimes that there's just people at the field office who are making up rules as they go along.”

Patrick, an attorney in the Chicago region, told a separate story of formal policy being contradicted at the field office level. While SSA has limited walk-in visits to field offices, there are various circumstances under which a claimant is still allowed to walk in and seek assistance. But Patrick had received multiple reports of people being told by contracted security guards that they could not be at an office without an appointment. He stressed that the SSA regional office had told his agency that this was “absolutely not supposed to be happening.” Security officers guarding federal buildings are “not supposed to be communicating Social Security office policy and stuff to people who are walking in.” Yet, multiple clients had reported precisely that happening. As a result, many claimants who might previously have waited at a field office and been served faced new barriers, “because now they're having multiple people at the office tell them different things.”

“I really feel sometimes that there's just people at the field office who are making up rules as they go along.”

Megan, a paralegal in the Boston region, encountered an example of such individual rule-making that she found particularly alarming. Signs appeared in the windows of her local field office declaring that claimants would have to provide immigration and

citizenship paperwork upon request. Recounting the sight, she marveled, “They were very clearly homemade, like it was literally printer paper that someone had typed and printed them out. They weren't even laminated, and they were just taped on all of the windows.” These homemade signs suggest that staff at this field office had taken it upon themselves to interpret and enforce immigration policy in a way that was sure to deter some community members who were entitled to service there.

When SSA’s actions are unpredictable, as in the cases recounted above, clients encounter difficulty even in addressing what should be simple matters. Nadine, an attorney in the Philadelphia region, told us about a paralegal who had spent months attempting to assist a client. Money was being deducted from this client’s benefits each month to recoup an [overpayment](#), but the field office reported that there was no overpayment on record. “So,” she said, “it's just been like a merry-go-round for her, calling the field office and then us getting mail saying that they're taking money out of her check for this.” Madison, a paralegal in the Chicago region, painted a similarly circular picture, saying, “It's just kind of the same thing over and over, which has just been my experience in the past six months, just submitting things and then either not getting an answer, or just getting kind of the runaround.”

Some described the situation as profoundly confusing, or even chaotic. Marie Theresa, a benefits specialist in the Philadelphia region, said bluntly, “The chaos is unbelievable.” Calling the situation “a nightmare,” she said that she would call SSA only to be told “I don’t know.” Louie, a paralegal in the Chicago region, pointed to the impact on clients, who are confused and “anxious because they feel like they're not in control of how they're getting paid,” despite “doing everything you're supposed to do, and Social Security is telling you to do,” and even having a legal advocate on their side. Carmen, a benefits specialist in the Philadelphia region, reported that amidst shifting procedures, clients are left adrift. She receives calls from frustrated clients who “will tell me that they have had trouble, they've gotten appointments in the office, but then there's no one to actually meet with them while they're there. Or they'll go and they'll set them up on a phone call with somebody. So, it's like they didn't even really need to go in person because they're just going to be on the phone anyway!” Rather than operating from stated policy, respondents described an agency that seemed unpredictable, leaving claimants and advocates alike struggling even to make contact.

7. Impacts on the Advocates and Organization who Serve Disability Claimants

“The amount of resources spent just to get basic information is phenomenal”

Every [respondent](#) we interviewed framed the turmoil at the [SSA](#) primarily in terms of its impact on disability [claimants](#) themselves. Yet, throughout our conversations, many also spoke to the impact of the ongoing changes on their work serving disability claimants from outside the government. As they confronted new obstacles and heightened uncertainty while losing access to institutional supports, many of those we spoke with found even routine matters to demand more and more labor hours. For organizations already used to serving clients effectively with few resources, these new barriers risk stretching their capacity to a breaking point.

Respondents described being brought into cases earlier and more frequently in order to address administrative barriers. As Carmen, a benefits specialist from the Philadelphia region, explained, “I get a lot of calls from people who simply just want our help trying to get in contact with Social Security. A lot of the time people will tell me that...they've gotten appointments in the office, but then there's no one to actually meet with them while they're there.” When clients could not access SSA services, they reached out to social and legal service providers who remained accessible to them. However, providers faced similar barriers. Carmen explained, “It kind of gets to a point for us that I think we all also get a little bit frustrating...there's very little, you know, on our end of things that we are actually able to do.”

“A lot of the time people will tell me that...they've gotten appointments in the office, but then there's no one to actually meet with them while they're there.”

Perhaps the most common dilemma respondents faced was how to manage the increased level of time and labor demanded by cases and tasks that were once handled routinely. Silence, an attorney in the Chicago region, said, “These cases are taking longer because you can't just close it after you win a case anymore.” Lea, an attorney in the San Francisco region, said, “We have to make four phone calls when we send one piece of paper, to make sure it's received and processed and understood and interpreted in a way that helps the client.”

This shift has meant that significant staff time and expertise is now devoted to basic access problems, rather than the substantive legal advocacy that respondents are trained for and accustomed to doing. Miranda, an attorney in the Philadelphia region, reflected on how once-routine administrative processes now demanded an attorney's attention, saying, “It used to be that...if something went wrong, that's when you would need a lawyer or an advocate, right...but now we're just seeing like, now you're needing an attorney to make sure something gets off someone's desk and then faxed into the system.” Megan, a [paralegal](#) from the Boston region, echoed this experience of legal service provision in 2025, explaining that “I am spending a significantly more amount of my time just doing very basic investigative work...it is taking more of my time to do the same amount of work as previously, which then means we're not able to take as many cases because I only have so much capacity.”

“It used to be that... if something went wrong, that's when you would need a lawyer... now you're needing an attorney to make sure something gets off someone's desk.”

Uncertainty amidst rapid policy change

Earlier sections of this report describe the chaos and uncertainty that characterized SSA in 2025. This has made the work of respondents far more difficult as well. After Edith, an attorney in the Chicago region, shared her frustration with the pace of policy shifts coming from SSA, we asked if her organization had shifted their practices in order to better serve clients. In response, she articulated her agency's “gut-wrenching” dilemma, saying, “I think to have practices, you have to have consistent policy. And if you don't have consistent policy, how can you make practices?” Amara, an attorney in the Philadelphia region, described a similar quandary, saying, “There have been so

many changes, official and unofficial...announcing a policy and then two days later reversing and then another related policy, and it's just incredibly hard to keep track of everything and figure out what we should be advising our clients to do."

Some of this uncertainty surrounded how best to serve clients at heightened risk of mistreatment. Colin, an attorney in the Chicago region, spoke of preparing for an upcoming [hearing](#) for a client who is a transgender man. In the past, when advocating for trans clients, he had politely corrected judges if they misgendered his client. He considered this a "clear line" in his duties as an advocate, saying "I would err on the side of whatever the client wanted." But now he questioned that, saying that his agency might consult with other service providers to figure out how to advise clients in a more openly anti-trans environment (e.g. [Executive Order 14168](#), "Defending Women from Gender Ideology Extremism and Restoring Biological Truth to the Federal Government").

"To have practices, you have to have consistent policy."

Such uncertainty was heightened by the loss of supports elsewhere in the institutional landscape surrounding SSA programs. In August 2025, the Trump administration abruptly ceased operations of [SSI/SSDI Outreach, Access, and Recovery Technical Assistance \(SOAR TA\) Center](#). A longstanding program of the [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#), the SOAR TA Center was an important source of assistance to multiple respondents we interviewed. Avery, an attorney in the Philadelphia region, said, "When I initially got certified as a SOAR provider, they gave me personalized feedback on my materials...there were monthly Q&A calls where you could just jump on and ask a random question." While her office had saved SOAR resources, Avery was unsure how long those would be of use, pointing out, "Regulations are always changing and those materials will be out of date soon."

The elimination of the SOAR TA Center was not the only loss of institutional support that respondents faced. Freddie, a benefits specialist in the Denver region, spoke of uncertainty over whether federal funding for her agency would continue. "If our funding disappears, we will disappear," she said, "which means my consumers won't have assistance on their Social Security claims. Now, of course, we're not panicking until something happens, but I do believe that is a possibility."

The strain on organizational capacity

Some respondents questioned whether their organizations could keep up with the uncertainty and heightened time demands produced by the changes at SSA in 2025. Patrick, an attorney in the Chicago region, said, “I just helped a social worker who was preparing to go with a client to a Social Security office just to get a basic benefit verification letter.” This should have been a routine matter, but it was time-sensitive, and he feared that the client would be turned away without an advocate at their side to “stand up and say no, this person needs service today.” For Patrick to do so regularly would be unsustainable. He continued, “I feel a pit in my stomach when I think about having to have a social worker, at least one attorney, the client make multiple trips, just to get something as simple as a letter stating how much they get from the Social Security benefits... The amount of resources spent just to get basic information is phenomenal.”

Helena, an attorney in a different part of the Chicago region, questioned how her organization could continue to manage the same caseload. Pointing to new delays from SSA in previously routine steps that would preserve clients’ pay status during appeals, she said, “Social Security is pushing more off onto the clients, and therefore us... this isn’t really legal work and we have a lot of legal work. So now we have to do Social Security’s bookkeeping. And how do we take the case—a large number of cases—if we’re just busy spending eight hours collecting appeal documents and forms?” Organizations like Helena’s are able, in a limited capacity, to absorb some of the work that SSA staff no longer do. However, absorbing this work means they are unable to serve more clients, potentially leaving even more claimants unrepresented.

“Social Security is pushing more off onto the clients, and therefore us.”

Some organizations were already taking steps to preserve their organizational capacity. This might mean forgoing promising new initiatives. Miranda works for a specialized organization in the Philadelphia region. When we spoke in August, her organization had recently filled a long-standing fellowship position, in which the fellow typically pursues innovative projects based on their areas of legal expertise. Instead, Miranda said, the new fellow would devote their attention to the additional work that basic claims now demand, in a moment where “legal intervention now is needed way earlier in the process.” In the current SSA context, attorneys like Miranda must spend their time disputing whether SSA actually called a client when they said

they did and reopening cases that were closed based on inaccurate records of a client not picking up a call, leaving them with less time to dispute substantive matters where their expertise is most called for.

For other organizations, there were no new initiatives to which they could redirect to day-to-day work, leaving no alternative but to serve fewer clients. Aubrey, a benefits specialist in the Chicago region, explained how over the course of the year, she had progressively lost access to many of her contacts within SSA, and seen others transferred to new units. As a result, she said, “I think the state is seeing that we can no longer do what we used to do. And I think they're just accepting it. And that's really, really disappointing for me.” She suspected that soon, more difficult cases would simply be dropped from her organization’s portfolio, at great cost to some of the most vulnerable claimants in her area. Angela, an attorney in the Philadelphia region, framed the problem in terms of stark arithmetic. Speaking of the difficulty of reaching anyone at SSA, she said, “On the advocate side... it helps to create a backlog... You just kind of start calling in the morning and leave [a] message and praying somebody will call you back, then call them again, maybe at two and leave the same message. You just know you have to build that into your workload. Which ultimately, if you're doing that with a number of cases, it's really cutting into the number of cases you can really competently represent.” If SSA continues offload its core functions onto claimants and advocates, many other organizations may face the same brutal calculation in the coming months.

She suspected more difficult cases would simply be dropped from her organization’s portfolio, at great cost to some of the most vulnerable claimants.

Recommendations

The findings in this report point not only to profound harm, but to clear opportunities for change, both to redress the impacts of 2025 policy changes and to address longstanding problems facing the [SSI](#) and [SSDI](#) programs. The following recommendations are grounded in advocates’ explicit recommendations and in policy implications derived by the authors through systematic analysis of advocate interview data.

As this report was being written in fall 2025, [SSA](#) implemented some changes responsive to concerns raised by advocates. As described in the section, [“Improvement is possible: Recent action from SSA on payment center communication,”](#) SSA created a dedicated phone number routing callers directly to the appropriate [payment center](#), addressing a longstanding access barrier stretching back over multiple administrations. Thus, we have removed a related recommendation and note this action as an exemplar of the targeted changes that can meaningfully improve benefit access.

1. Staff SSA to meet service needs

[Respondents](#) identified staff reductions and the loss of trained and knowledgeable staff as key contributors to slowed processing times and deteriorating customer service across SSI and SSDI. Loss of staff was associated with longer-than-usual delays in processing initial claims, unanswered calls and emails, increased errors, missing payments, and persistent difficulties accessing [field office](#) staff to carry out basic tasks such as processing faxed paperwork. Advocates emphasized that automation and AI systems did not replace staff capacity and often required additional human intervention to function effectively. SSA should link staffing levels to service outcomes rather than fixed headcounts, using clear benchmarks for access and timeliness. A comparable model exists in the Veterans Administration, which is required to maintain staffing to meet certain access standards such as limiting waits for a primary or mental health care appointment to no longer than 20 days (Heckman, 2025). In the SSA context, staffing should be similarly benchmarked to ensure that [claimants](#) can schedule field office appointments within 30 days at most, or more quickly in urgent situations, and receive timely assistance with routine benefit issues.

2. Expand and clarify the right to walk-in services at SSA field offices

Many respondents described walk-in access as a critical safeguard for claimants who cannot reliably navigate phone or online systems to schedule appointments, particularly during periods of prolonged appointment delays. Interviews documented situations in which claimants were turned away despite needing assistance with simple, time-sensitive tasks. Walk-in services should include routine transactions such as obtaining benefit verification letters and submitting documents, which do not

require scheduled appointments and can reduce pressure on appointment systems. SSA should also provide clear, consistent guidance on walk-in eligibility, communicated through field office signage, staff directives, and public-facing materials, to ensure transparent and uniform access.

3. Increase caller control over field office phone routing

Respondents repeatedly described the rerouting of calls between field offices as a barrier to resolving case-specific issues, even after SSA expanded staff access to case information originating in other field offices in August 2025 (Lopez, 2025b). Interviews and subsequent discussions with respondents revealed ongoing difficulties reaching SSA staff who could access the full case record or provide accurate, actionable assistance, resulting in repeated calls and additional delays. SSA should provide callers with the option to remain on hold for their intended field office rather than being automatically rerouted. Preserving caller choice would allow claimants and advocates to prioritize resolution over speed and reduce inefficiencies created by repeated, unsuccessful contacts.

4. Return the automatic withholding rate for Social Security, including SSDI, recipient overpayments to 10 percent

Respondents described numerous situations in which slow processing rates and understaffing delayed the review or adjustment of [overpayment](#) determinations, resulting in benefit checks being withheld at rates that left recipients unable to meet basic needs. Interviews documented widespread confusion among SSA staff, advocates, and beneficiaries during the period of rapidly changing automatic withholding rates. Returning to a default withholding rate of 10 percent aligns with SSI policy and reduces hardship and the potential for errors while overpayment disputes are resolved. Any future changes to withholding policy should be announced in advance, with clear implementation dates and explicit guidance to ensure notices and payment actions align with the policy in effect at the time of mail receipt.

5. Improve timeliness and accuracy of disability claim processing

Respondents described significant delays in moving claims from field offices to [Disability Determination Services \(DDS\)](#), followed by uneven processing patterns in

which some claims stalled for extended periods while others were processed unusually quickly and denied without substantive or accurate review. Interviews documented concern that both prolonged delays and rushed [denials](#) reflected staffing shortages and pressures to move cases out of the system in order to reduce backlogs, rather than careful and consistent case evaluation. SSA should prioritize both timeliness and accuracy in disability claim processing at all stages, ensuring that efforts to reduce backlogs do not come at the expense of fair and complete review. SSA should also establish a limited, clearly defined mechanism for correcting obvious errors at the DDS level before cases proceed to appeal, reducing unnecessary appeals.

6. Avoid reliance on online-only systems for customer service and provide representatives with account access

Respondents consistently described online systems as inaccessible for many SSI and SSDI claimants, particularly those with limited internet access, cognitive or psychiatric disabilities, unstable housing, or limited technology literacy. Interviews showed that reliance on online systems for routine customer service tasks often shifted [administrative burden](#) onto advocates, who spent significant time assisting clients with account setup or troubleshooting failed access. SSA should ensure that no essential customer service process requires exclusive use of online systems and that meaningful non-digital options remain available. SSA should also create a secure mechanism through which authorized representatives can access beneficiary account information on behalf of their clients, as respondents indicated that advocate-facing online systems were more likely to improve efficiency.

7. Provide alternatives to AI-based phone systems, particularly for callers with communication disabilities

Respondents identified the introduction of AI-based phone systems as a barrier, especially for beneficiaries with speech, hearing, cognitive, or psychiatric disabilities. Some callers were unable to navigate the [AI chatbot](#) because their speech was not recognized or their communication needs were not accommodated by the system. SSA should anticipate callers with communication disabilities by providing an option to bypass AI-based systems and access traditional interactive voice response (IVR) menus or a clear pathway to live staff.

8. Ensure clear and effective pathways for issue escalation

Almost all respondents described difficulty resolving errors, delays, and urgent or unusual cases when routine problem-solving failed. They found that escalation pathways were inconsistently available at best and often inaccessible following staffing cuts, reassignments, and regional office consolidation, leaving advocates and beneficiaries without a mechanism to resolve problems. SSA has indicated that Regional Communications Directors (RCDs) should continue to serve as points of contact for escalating unresolved issues. SSA should follow through on this guidance by ensuring that regional offices are consistently and adequately staffed, clearly and publicly identified, and given explicit authority and response timeline expectations. Clear internal guidance reinforcing escalation as a necessary part of SSA operations would support field office staff, facilitate timely resolution of complex cases, and reduce prolonged harm to beneficiaries.

9. Protect data privacy and benefit access for immigrant families

Respondents described heightened concern among immigrant clients and those belonging to [mixed-status](#) families, as they perceived new risks in any type of interaction with SSA. Interviews reflected that these concerns were shaped by the broader political and administrative context and contributed to barriers in benefit access for eligible claimants. Indeed, since the interviews, reporting has revealed that SSA instructed frontline workers to share appointment data with Immigration and Customs Enforcement agents (Schiffer et al, 2026). In light of broader federal data-sharing developments that have raised public concern about privacy and deterrence, SSA should prioritize robust data privacy protections and refrain from participating in or enabling data-sharing practices with other federal agencies for purposes unrelated to Social Security benefits. SSA should also refrain from creating administrative burdens that uniquely affect immigrant beneficiaries, such as requiring in-person presentation or physical copies of immigration documents when eligibility can be verified through existing online or electronic systems. SSA should not permit discrimination based on immigration status in the selection or approval of representative payees when program rules are otherwise met. SSA should operate as a service provider, not an enforcement agency, and no beneficiary should fear that they or their loved ones will be put at risk by interacting with the agency.

10. Listen to advocates and beneficiaries

Respondents emphasized that many of the access barriers documented in this report were identifiable early through advocates' routine interactions with claimants and beneficiaries as well as with SSA systems. Advocates often recognized emerging problems related to customer service access, benefit processing, and payment systems before they generated public outcry and subsequent rapid policy changes that sometimes generated additional confusion. SSA should maintain ongoing communication with advocates and beneficiaries, including regular meetings, to surface emerging issues. SSA should also share proposed policy or procedural changes with these stakeholders in advance, allowing them to identify potential unintended consequences and offer recommendations for effective implementation.

As this research began in summer 2025, SSA removed live customer service metrics from its website while advocacy organizations, representatives, beneficiaries, and the media reported significant delays. This project was motivated by the need for transparent, rigorous, and systematic documentation during a time of rapid change. Ongoing public reporting of customer service metrics with clear explanations and contextual information (e.g., reporting [1-800-number](#) call abandonment rates and call back times alongside average wait times) is critical to accountable implementation of these recommendations.

Conclusion

The Social Security Administration, and its disability programs in particular, stands as an archetype of complex rule-based policy. Policies built through both legislation and formal rule-making (as articulated in the Program Operations Manual System, or POMS), establish the grounds on which [claimants](#) seek assistance. This is a difficult undertaking, but for advocates who have worked in this arena over many years, it is a system that can be navigated, where the grounds for agency determinations can typically be understood. The governing logics of [SSA](#) are a matter of public trust: the assurance that SSA is ultimately accountable to law and policy, not to the whims of particular workers or political administrations. Accountability to policy is what separates a trusted public service from private transactions or personal relationships.

Although navigating SSA's complex rules has always required determination, [respondents](#) told us that changes initiated by the second Trump administration in 2025 have undermined their sense that persistence and deep knowledge of program rules could eventually make the system work. They described how longstanding challenges, such as application processing delays, understaffing, and long wait times on the phone and in the [field office](#), have intensified. In addition to this worsening of long-term issues, respondents described rapidly changing policies, unprecedented errors, and pervasive chaos to a degree that longtime service providers had never seen before.

For claimants, especially those who are unhoused, live in rural areas, have limited internet access, or have psychiatric or cognitive disabilities, the effects are particularly pronounced. An increased reliance on digital systems, while convenient for some, has excluded many of the people SSA is intended to serve, particularly those who have limited internet access and technological literacy. The administration's "digital-first" approach, including the introduction of new automated phone features, have further complicated existing customer service challenges, at times preventing claimants with communication or cognitive disabilities from accessing SSA staff without the direct support of an advocate. These compounding barriers have material impacts on claimants and beneficiaries. Respondents reported on associated client experiences of homelessness, food insecurity, and even suicidal ideation and death.

For advocates, these changes to SSA policy, along with the agency's largest staffing cut in history, have presented significant barriers to their capacity to represent claimants. Respondents described how staff cuts, attrition, and reassignment fundamentally expanded their own workloads, as remaining SSA staff often lacked institutional knowledge, policy familiarity, or even basic savvy in navigating SSA computer systems. In 2025, respondents found that their time was increasingly spent on granular interventions such as calling field offices to ask them to process a fax, or educating reassigned SSA workers on navigating their own internal systems. These changes taxed the capacity of advocacy agencies that already strain to serve the greatest number of clients as well as possible. Further, respondents found themselves unable to escalate their issues to previously existing channels, such as field office managers or Regional Communications Directors, due to staff attrition and the elimination of several regional offices.

Across these accounts, a recurring theme was the abiding impact of trained, accessible and accountable staff. When advocates were able to surmount a challenge in a complex case, they often credited their success to constructive working relationships with particularly effective SSA staff colleagues. When processes stalled or erred, respondents often cited understaffing, staff cuts, attrition, and reassignment. While digital systems were often helpful to respondents, they still required a human infrastructure to support maintenance and navigation, particularly for clients unable to access them.

It is important to note that not all disability claimants have representation. Because we only interviewed representatives and did not interview disability claimants themselves, this report does not speak to the challenges that unrepresented clients face while applying for disability benefits. Given the difficulties working with SSA that representatives report experiencing, it is reasonable to believe that our report understates the challenges faced by claimants without representation.

Several respondents worried about what lies ahead for the Social Security Administration. As Jane, a paralegal in the Kansas City region, cautioned last summer, “We're only seven months in. And so right now what we're seeing is a lot of canaries in the coal mine. You know, the boot has not fully fallen, but it's coming.” This report documents a critical moment in history, when unprecedented cuts to the Social Security Administration changed the agency as Americans knew it and, according to all of our respondents, weakened Americans’ ability to claim disability benefits.

These cuts to staff and regional offices, new and often inaccessible communication systems, increases in application delays and [denials](#), were not inevitable. They are all tied to policy choices whose impact, without intervention, will continue to compound. Yet respondents also pointed to SSA’s capacity for change. The agency and its leadership, across multiple administrations, have demonstrated its ability to revise regulations and policy when evidence shows they are not working. The evidence in this report forms the basis of our recommendations, which include restoring the Social Security workforce, rebuilding systems of accountability, and designing technology that complements rather than replaces staff interaction.

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Appendix

Glossary

1-800 number: The Social Security Administration's toll-free national phone number (1-800-772-1213) available 8:00 a.m. to 7:00 p.m. local time, Monday through Friday. Also referred to as the National 800 Number.

Administrative burden: Layers of challenges experienced by individuals who interact with government agencies. Includes learning, compliance, and psychological costs.

AI chatbot: Artificial intelligence (AI)-enabled changes to the automated platform for the National 800 Number, announced by SSA in April 2025.

A-number: Alien Registration Number listed on a Permanent Resident Card (also known as a Green Card), provided by the U.S. Citizenship & Immigration Service (USCIS). Also known as a USCIS Number.

Appeals process: Denied applications for disability benefits may be appealed at four levels: 1) reconsideration; 2) hearing with Administrative Law Judge; 3) review of hearing decision by Appeals Council; and 4) civil lawsuit in U.S. District Court.

Benefits specialist: Someone who works with disability benefit claimants or recipients to explain and navigate benefits, typically distinct from a legal advocate such as an attorney or paralegal.

Claimant: Individual making a claim (applying for) SSI or SSDI benefits, or someone who has successfully claimed and is receiving benefits.

Commissioner of SSA: Senate-confirmed leader of SSA. Reports directly to the President of the United States.

Continuing Disability Reviews (CDRs): A periodic reassessment conducted by SSA to determine whether an SSI/SSDI beneficiary continues to meet medical criteria for eligibility.

Consultative examination: A physical or mental examination purchased for a claimant by the SSA to obtain additional medical evidence.

Denial: Unfavorable decision regarding a disability claim (i.e., rejected; not approved). May be initial denial of an application, or denial of an appeal.

Disability Determination Services (DDS): State agencies funded by SSA responsible for decision-making regarding initial Social Security disability claims.

Department of Government Efficiency (DOGE): Initiative of the Trump Administration, associated with the leadership of Elon Musk in his role as Senior Advisor to the President. DOGE was established and directed via Executive Orders issued January 2025 through May 2025 to enact broad changes to the operations of the federal government, with a particular focus on technology and personnel.

Electronic Records Express (ERE): An SSA initiative that provides an electronic option for benefits representatives to submit, manage and track claim information while a disability claim is in the review process.

“Fork in the Road” email: Memo sent January 28, 2025 to federal employees with the subject line “Fork in the Road.” The memo offered a deferred resignation package of full pay and benefits through September 30, 2025 to federal employees who replied by February 6, 2025 indicating their acceptance of the offer.

Green card: Colloquial term for Permanent Resident Card. Documentation issued to foreign nationals allowed to work and live permanently in the United States.

Hearing: Opportunity to appeal application decision to Administrative Law Judge. Second level of appeal, upon denial of reconsideration.

Hearing office: The Office of Hearings Operations administers disability adjudication via five Hearings Hubs, which oversee 160 hearing offices nationwide. Hearings may be conducted via phone (default), online video (by objecting to appear by audio), or in person at a hearing office (by objecting to appear by either audio or online video).

Initial application: The first formal step in applying for disability benefits (SSI/SSDI), which includes forms relating to the applicant’s personal information, work history, and medical information and evidence. Initial applications are approved at low rates, and the majority of applicants must go on to appeal initial denials.

Medical listing: SSA’s Listing of Impairments are lists of mental and/or physical conditions that are considered severe enough to prevent an individual from working.

If a claimant has a condition on the list, they are usually considered disabled without having to demonstrate how their conditions prevent them from working.

Mixed status: A family unit that consists of individuals with different immigration statuses, such as an undocumented immigrant and a U.S. citizen or legal permanent resident.

My Social Security (mySSA): Anyone over the age of 18 with a Social Security Number (SSN) can create a mySSA account to log in to the SSA website to submit online forms and obtain information regarding benefits. Requires a unique email address for each user account.

Office of Inspector General (OIG): Internal office within SSA that provides independent oversight of SSA's programs and operations.

Overpayment: Amount of money paid to a beneficiary in excess of what should have been paid, which creates a debt the beneficiary owes to SSA. Overpayments are common (71% among working SSDI beneficiaries according to a 2019 study³) among disability beneficiaries who work, due to complex reporting rules and understaffing. The debt is typically repaid when SSA withholds a certain amount from the beneficiary's monthly check, which can impose financial burdens.

Paralegal: Role describing a legal professional who performs tasks requiring legal knowledge but lacks the level of expertise and credentialing of a lawyer or attorney. Sometimes referred to as "legal assistant."

Payment center: Colloquial term for SSA Processing Center. Processing Centers handle the most complex benefit payment decisions, in addition to issuing benefit payments after appeals decisions, determining and collecting debt, correcting records, and performing program integrity work.

³ Hoffman, D., Fischer, B., Jones, J. T., McGuirk, A., & Loewenberg, M. (2019). Work-related overpayments to social security disability insurance beneficiaries: prevalence and descriptive statistics. Soc. Sec. Bull., 79, 65.

Polite disconnect: Automated phone system method for handling high call volume. Caller receives a recorded message to call again later, and then the call is ended.

Preeffortuation Review Contact (PERC): Appointments in which SSI claimants who have been medically approved for benefits have an interview with SSA to confirm financial eligibility and determine their exact benefit amount. PERCs must occur before a claimant begins receiving benefits.

Principal investigator (PI): Lead researcher on a research project, typically a member of the academic or research faculty at a university. Research projects may have one PI or multiple co-PIs.

Reconsideration: Formal Request for Reconsideration to SSA regarding disability or non-medical factors. This is the first step of appeal following disability claim denial, which must be requested within 60 days of receiving the denial. New SSA staff reviews the full claim and any new information; this step does not involve an Administrative Law Judge hearing. Colloquially referred to as “recon.”

Research assistant (RA): Support staff on a research project, typically researchers-in-training (i.e., students), who perform analytical, production, and administrative tasks as directed by Principal Investigator (PI).

Respondent: Participant in a research study. For this report, respondents include those who participated in an interview, and/or provided responses via email. Eligible respondents for this study were attorneys and non-attorney benefits who work for legal aid organizations, Protection and Advocacy organizations, Aging and Disability Resource Centers, and Independent Living Centers.

Social Security Administration (SSA): Federal agency often referred to as “Social Security” responsible for administering retirement benefits (also referred to as “Social Security”), Social Security Disability Insurance (SSDI), and Supplemental Security Income (SSI), among other benefits.

SSA field office: SSA operates approximately 1,200 field offices (i.e., local offices) that provide in-person customer service for tasks that cannot be completed online.

SSA headquarters: Main office for SSA located outside of Baltimore, MD. Location of the Office of the Commissioner. Also known as the Central Office. Responsibilities

include managing SSA programs (including SSI and SSDI) and policy from a national level and overseeing regional offices.

SSA regional office: Prior to 2025, SSA had long been organized into 10 regions, governed by Regional Commissioners. The current administration announced plans to reduce that number to 4. Regions are named for the cities in which they are headquartered. The regional office structure provides a pathway for advocates and SSA staff to escalate and problem-solve complex cases, particularly through Regional Communications Directors (RCDs).

Social Security Disability Insurance (SSDI): A social insurance-based benefit administered by SSA that provides monthly payments as partial wage replacement to people who have a disability that limits or prevents the claimant's ability to work. Eligibility and benefit amount is based on work history and salary.

Supplemental Security Income (SSI): A means-tested benefit administered by SSA that provides monthly payments to people with disabilities, as well as older adults with little or no income or resources. Eligibility does not require a work history.

SSI/SSDI Outreach, Access, and Recovery Technical Assistance Center (SOAR TA Center): The SOAR (SSI/SSDI Outreach, Access, and Recovery) program provided community-based support designed to improve access to SSI/SSDI among people with serious mental illness who are experiencing or at risk of homelessness. The SOAR Technical Assistance (TA) Center, established in 2009 and funded by SAMHSA, coordinated a robust nationwide network of support resources. The SOAR TA Center was discontinued in August 2025.

Substance Abuse and Mental Health Services Administration (SAMHSA): An agency within the Department of Health and Human Services (HHS) responsible for public health efforts related to behavioral health matters such as substance abuse and mental health.

Timeline

January 2025

January 28 - [Deferred resignation email](#) sent to federal employees, including SSA.

February 2025

February 24 - SSA [closes](#) its Office of Transformation

February 26 - SSA [closes](#) its Office of Civil Rights and Equal Opportunity

February 27 - [SSA announces options](#) to its workforce for voluntary reassignment, early retirement, resignation incentives.

February 28 - [SSA announces changes to its workforce](#) including reducing the size of its workforce by 12% and reducing its regional structure (from ten regions to four).

March 2025

March 7 - [SSA announces it is reinstating its overpayment recovery rate](#) to 100% withholding of a person's monthly check. This change only applies to overpayments after **03/27/2025**. "The withholding rate for Supplemental Security Income overpayments remains 10 percent."

- This was walked back in April. No press release was issued. See [emergency message](#).

March 18 - [SSA issues announcement](#) to eliminate the option for retirees and survivors to apply for [benefits over the phone](#) for all social security programs including disability (SSI and SSDI) retirement and survivors benefits, requiring in-person identity proofing or mySSA account usage; Requires individuals making direct deposit changes to visit a local field office to prove their identity in person if they cannot use their "mySSA" account; Expedites processing of direct deposit changes requests from 30 days to 1 business day. Enforcement of changes to take place by March 31.

March 19 - Associated Press publishes a list of [SSA field offices](#) expected to close in 2025.

March 19 - SSA [suspends](#) the Enumeration Beyond Entry (EBE) program effective immediately, meaning that applicants for work authorization or naturalization will

need to apply in-person for a social security number, increasing SSA field office foot traffic.

March 21 - [DOGE clarifies](#) previous news report, stating that it is not closing any field offices, only permanent remote hearing sites (single rooms within field offices)

March 25 - SSA [resumes](#) debt collection activities effective immediately through the Treasury Offset Program (TOP) for debts, such as overpayments, accrued prior to March 2020.

March 26 - SSA [revises](#) March 18 announcement in response to public backlash to exempt Medicare, SSI and SSDI applications from identity-proofing measures, allowing those claims to be completed via phone. This announcement also pushes back the effective date by two weeks to April 14.

April 2025

April 10 - SSA data shows that nearly [2,000 frontline works took buyouts](#) and are leaving field offices; 40% of SSA's field offices are losing at least 25% of their staff.

April 12 - SSA further [revises](#) March 18 announcement to "allow individuals to complete all claim types via telephone," not just Medicare, SSI and SSDI applications.

April 29 - Reports that SSA is retreating from its decision to reinstate a 100% withholding rate. At the end of April, SSA quietly reversed this decision and set a new withholding rate of 50% with the SSI withholding rate remaining at 10%. No press release was issued by SSA. An SSA [emergency message](#) indicates the change was effective 04/25/2025.

May 2025

May 7 - [Frank Bisignano](#) is sworn in as the 18th Commissioner of the SSA

May 28 - [SSA rescission notice date](#). Rescinding Social Security Rulings (SSRs) related to Sustainable Gainful Activity (updated "regulations remove the additional conditions that we used when we evaluate SGA and work attempts in employment or self-employment" to comply with Executive Order 14192).

June 2025

Early June - SSA [removes](#) customer service metrics from agency website

July 2025

July 9 - SSA [reassigns](#) 1000 field office staff customer service representatives to the 1-800 number indefinitely

July 18 - [SSA proposes rescinding](#) the rule that [expanded the definition of a public assistance household](#).

July 18 - [SSA plan to implement PIN verification](#) for callers asking for status updates, addresses changes, or to request tax and benefits verification documents is hidden in a regulatory filing dated **07/18/2025**

July 29 - [Center on Budget and Policy Priorities](#) published a report on expected disruptions of PIN verification process.

July 30 - Conclusion date [SSA withdraws filing](#) regarding PIN verification changes “to make modifications to the scope of the request”

July 30 - [SSA clarifies](#) that plan (in filing dated 07/18/2025) to require PIN to complete tasks over the phone. SSA altered plans and clarified use of PIN is optional, though it is still required to change banking information.

August 2025

August 11 - SSA adds 13 conditions to [Compassionate Allowances List](#).

September 2025

September 10 - SSA [announces](#) that effective 09/30/2025 federal benefits will be paid electronically, paper checks will be almost entirely phased out. Beneficiaries who wish to continue receiving paper checks are instructed to call the U.S. Treasury to file a waiver.

September 12 - [Urban Institute](#) published a report on SSA’s announcement that the backlog of SSI/SSDI applications had been reduced. Report notes this could be due to decrease in applications received and increase in initial denials.

October 2025

October 24 - SSA announces [2.8% COLA](#) benefit increase for 2026.

December 2025

December 1 - SSA [announces](#) goal to cut number of field office visits in half during FY 2026.

December 11 - SSA [publishes](#) updated Program Operations Manual System (POMS) that states staff must inspect claimants' original immigration documents in person in addition to verifying it electronically through the Department of Homeland Security's (DHS) Systematic Alien Verification for Entitlements (SAVE) program.

December 22 - The SSA's Office of the Inspector General publishes its [audit](#) of the 1800-number service metrics.

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