

STATE OF ALASKA

DEPT. OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC ASSISTANCE

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MEMORANDUM

DATE: January 11, 2008

TO: DPA Statewide Staff and
OCS Eligibility Staff

FROM: Char Ervin
Public Assistance Analyst II
Systems Operations

SUBJECT: EIS Procedure 2008-1
State **OnLine Query** Interface (SOLO) User Guide

**YOU MUST COMPLETE THE SOLO WEB BASED TRAINING
(WBT) AND BE CERTIFIED BEFORE ACCESSING THIS
DATABASE**

The State Online Query (SOLO) interface allows authorized Eligibility Information System (EIS) users to access Social Security Administration (SSA) records online.

Inquiries are to be made only when necessary to perform your job of determining eligibility for Temporary Assistance (TA), Food Stamps (FS) Medicaid (ME) and Adult Public Assistance (AP) issued through Division of Public Assistance computer systems. Any other use may be in violation of both state and federal law and may result in dismissal and/or felony prosecution.
Information received through the SOLO is confidential.

If you have any questions concerning the proper use of the SOLO, please check with your supervisor or the Division of Public Assistance security staff.

The SOLQ will only provide information on SSI (Title XVI), and SSA (Title II) benefits. In order to get information on the individual's quarters of work and the prisoner match, you must send an inquiry on the State Verification and Exchange System (SVES).

Begin with the Inquiry Menu - **INME**.

```
EIS INME                                INQUIRY MENU                                050807 10:
                                           JUDITRAIN

      1. PRIOR CONTACT CHECK
      2. CASE PROFILE
      3. ISSUANCE HISTORY MEDICAL
      4. ISSUANCE HISTORY
      5. BENEFIT HISTORY MEDICAL
      6. BENEFIT HISTORY
      7. NOTICE HISTORY SUMMARY
      8. ACTION HISTORY
      9. INTERFACE INQUIRY
     10. INTERFACE SECURITY INQUIRY
     11. NATIVE TANF INQUIRY
     12. SVES INFORMATION REQUEST
     13. SVES INQUIRY RESPONSE
     14. STATE ONLINE QUERY
     15. BENDEX INQUIRY

      ENTER          FUNCTION (BY NUMBER):  14
      CASE NUMBER    (FOR 2 - 8):
      PROGRAM TYPE   (FOR 3,4,5, AND 6):
      CLIENT SSN (FOR 9-11 AND 13-15):  XXXXXXXXXX
                                           NEXT-->
```

Enter function 14 and the client SSN for the inquiry. Press ****ENTER****.

If the Social Security Number (SSN) is not known to EIS, the **STOQ** screen will appear and the following warning:

```
EIS STOQ                                ELIGIBILITY INFORMATION SYSTEM            050807 11:07
                                           STATE ONLINE QUERY REQUEST              JUDITRAIN U
                                           SSN: 001 30 1101

*****
*   THIS SSN IS NOT KNOWN TO THE EIS CLIENT FILE.   *
*   SSA INQUIRIES MAY ONLY BE DONE ON CLIENTS KNOWN *
*   TO THE EIS SYSTEM. PLEASE CHECK YOUR ENTRY.     *
*****

      PRESS **F9** TO RETURN TO INME.
```

and you will not be able to inquire on that SSN; you will be returned to the **INME**.

If the SSN you entered belongs to an EIS client the **SOLO** screen will appear.

```
EIS SOLQ                ELIGIBILITY INFORMATION SYSTEM        050807 11:26
                        STATE ONLINE QUERY REQUEST        JUDITRAIN U

                        SSN: 001 42 7703    VERIFICATION: Y

NAME: MICHAELIDES      ADELE G  DOB: 06281962        SEX: F

*****
*           PLEASE CONFIRM THAT THE ABOVE           *
*   CLIENT IS THE ONE YOU NEED TO INQUIRE ON     *
*****
```

The **SOLO** will display the SSN you entered on **INME** and the SSN Verification Code (this verifies this client is an EIS client). Name (may be truncated); Date of Birth and Sex from the EIS record which is connected to the inquiry SSN will be displayed.

Press ****ENTER**** to continue with the inquiry. EIS will display **SLOW**, a screen showing the confidentiality requirements and responsibilities.

```
EIS SLOW                ELIGIBILITY INFORMATION SYSTEM        092407 15:24
                        STATE ONLINE QUERY WARNING        JUDITRAIN U

*****
*                               WARNING                               *
* INTENTIONAL INQUIRY INTO A FILE THAT IS NOT REQUIRED             *
* TO PERFORM YOUR JOB OR MISUSE OF DATA OBTAINED                *
* THROUGH USE OF THE SOLQ SYSTEM IS A VIOLATION OF               *
* BOTH STATE AND FEDERAL LAW AND MAY RESULT IN                   *
* DISMISSAL AND/OR FELONY PROSECUTION                            *
*****
*                               *                               *
* YOU MUST COMPLETE THE SOLQ WEB BASED TRAINING                   *
* AND                                                               *
* BE CERTIFIED BEFORE ACCESSING THIS DATABASE                     *
*                               *                               *
*****
* ALL TRANSACTIONS ARE MONITORED BY ACF2 USER ID                 *
* DO NOT LEAVE YOUR TERMINAL UNATTENDED WHEN LOGGED ON          *
*****

PRESS **ENTER** TO CONTINUE    PRESS **F9** TO RETURN TO INME
```

Press ****F9**** to return to **INME** without processing the inquiry.

A record will be created in the Interface file for an audit record of the **SOLO** transaction. The audit record will list the SSN of the inquiry, the user's security key, the date and the time of the inquiry and the PCN of the person requesting the information.

When the inquiry is received by SSA, the SSN will be verified. If it is verified, the SSA system will search for Title II benefits and Title XVI benefits. The results of the SSA process will be returned to EIS and displayed on the **SSNR** screen.

```
EIS SSNR                                ELIGIBILITY INFORMATION SYSTEM          050807 11:40
                                           STATE ONLINE QUERY RESPONSE           JUDITRAIN U

***** REQUEST INFORMATION *****
                      SSN: 001 42 7703
NAME: MICHAEL      ADELE  G  DOB: 06281962

***** SSN VERIFICATION INFORMATION *****
OTHER SSNS:
OTHER DOB:
SSN IS VERIFIED
*** BELOW INFORMATION PROVIDED BY SSA ON THIS SSN ***
SSA BENEFIT INFORMATION EXISTS. PRESS **ENTER** TO VIEW SSA
SSI BENEFIT INFORMATION EXISTS. PRESS **PF8** TO VIEW SSI1

PRESS **F9** TO RETURN TO INME
```

The ****REQUEST INFORMATION**** section displays the data which was sent to the SSA. Names may be truncated.

The ****SSN VERIFICATION INFORMATION**** section provides the results of the SSN verification process within the SSA's database.

If the SSN does not match the SSA's database, an edit message **SSN NOT KNOWN TO SSA** will appear at the top left. If the NAME or DOB does not match the SSA's database, an edit message **EIS/SSA NAME/DOB MISMATCH** will also appear at the top left. *****No information provided by SSA on this SSN***** will appear in the ****SSN VERIFICATION INFORMATION**** section of the **SSNR**. These edits require you to verify the information provided.

The last section of the screen will let the viewer know if information is available concerning either Title II or Title XVI benefits. If both exist, you

may either press ****ENTER**** to proceed to the next screen or ****F8**** to go directly to the Title XVI information. If only Title XVI or only Title II information is available, you may press ****ENTER**** to go to the next screen.

If no additional information is available, press ****ENTER**** or ****F9**** to return to **INME**.

While in the process of viewing the reply screens, you can only go forward from **SSNR** to the other screens. There is no capability to back-up. In order to view previous screens, you will need to begin again at **INME**. If Title II information exists, and you press ****ENTER****, the **SSAR** screen will appear.

```

EIS SSAR                ELIGIBILITY INFORMATION SYSTEM                092407 15:31
                        SSA ONLINE QUERY RESPONSE                    JUDITRAIN U
REQUEST SSN: 001 42 7703
***** SSA\TITLE II INFORMATION *****
SSA NAME: MICHAELIDES      , ADELE          G   DOB: 06281962
ADDRESS:  29 CASTLE ST      SSN: 001 42 7703  SEX: F
          KEENE NH          BENDEX STATE: 300
                                ZIP CODE: 03431
PAYMENT STATUS: C          TERM DATE:
SSA PAYMENT AMOUNT:  705.00      DATE PYMNT EFFECTIVE: 031998
SSA CLAIM NUMBER...: 001427703A00  INITIAL ENTITLE DATE: 031998
TYPE OF BENEFICIARY: A00      DISABILITY ONSET DATE: 09291997
DIRECT DEPOSIT.....: C          DATE OF DEATH:
----- SSA PAYMENTS (GROSS) -----
DATE      AMOUNT      DATE      AMOUNT      DATE      AMOUNT
122006    705.00     012005    656.00     122003    627.00
122005    683.00     122004    644.00     122002    614.00
                                DUAL ENTITLEMENT NUM:
BLACK LUNG:          AMOUNT:  0.00  RAILROAD RETIREMENT STATUS:
HI: E  PREMIUM AMT:  0.00  BYIN START:          BYIN END:
SMI: Y  PREMIUM AMT:  93.50  BYIN START: 112002  BYIN END:
          SSI BENEFIT INFORMATION EXISTS. PRESS **PF8** TO VIEW SSI1
  
```

The following information is displayed from the SSA records:

- REQUEST SSN:** The SSN sent from EIS as the basis for inquiry.
- SSA NAME:** Last name, First name and Middle Initial of the SSA client.
- DOB:** Date of birth
- ADDRESS:** The mailing address of the SSA client. The format may vary.
- SSN:** The SSA client's own Social Security Number.
- SEX:** The sex of the SSA client.
- BENDEX STATE:** The 3 letter numeric code of the state which has established a BENDEX match with SSA. (Appendix A)
- ZIP CODE:** The mailing address ZIP Code.
- PAYMENT STATUS:** Current status of the Title II benefit. (Appendix D)
- TERM DATE:** Month and year the event causing the Title II benefit

termination or suspension occurred.

SSA PAYMENT AMOUNT: Title II benefit amount after deductions of beneficiary obligations such as Medicare premium, overpayment, child support, etc.

DATE PAYMENT EFFECTIVE: Date of entitlement for benefits for the current period of entitlement.

SSA CLAIM NUMBER: The account number and Beneficiary Identification Code (BIC) under which a Title II claim exists.

The number portion is the SSN of the wage earner on whose record benefits are being paid. The BIC portion indicates the relationship of the beneficiary to the wage earner. (Appendix B)

INITIAL ENTITLE DATE: Month and year when beneficiary was originally entitled on this record.

TYPE OF BENEFICIARY: The reason the person has a claim for Title II Benefits, (matches last 3 after SSN in the SSA Claim Number field).

DISABILITY ONSET DATE: The first date of onset of disability.

DIRECT DEPOSIT: Indicates if the Title II benefit is deposited directly in a "C" checking or "S" savings account.

DATE OF DEATH: If beneficiary is deceased, the death date will be displayed in this field.

SSA PAYMENTS (GROSS): Up to six payment histories may be displayed, showing the month and year the corresponding gross Title II amount became effective. (Appendix C)

DUAL ENTITLEMENT NUM: Claim Number and BIC of the dual entitlement Title II account for the beneficiary.

BLACK LUNG: Black Lung entitlement status.

AMOUNT: Black Lung payment amount.

RAILROAD RETIREMENT STATUS: Status of benefits under Railroad Retirement program. Amount of payment is not available.

HOSPITAL INSURANCE (HI): Medicare Part A, Hospital Insurance, status.

Codes are:

C - No; cessation

D - No; denied

E - Yes; automatic

F - No; invalid enrollment

G - Yes; good cause

H - No; not eligible or did no enroll

P - Railroad

R - No; refused

S - No; no longer under renal disease provision

T - No; terminated for nonpayment of premiums

W - No; withdrawal

X - No; Title ii termination

Y - Supplemental insurance (Part B) premium is payable

PREMIUM AMT: Medicare Part A premium amount.

BYIN START: Month and year buy in began for Medicare Part A premium.

BYIN END: Month and year buy in stopped for Medicare Part A premium.

SUPPLEMENTAL MEDICAL INSURANCE (SMI): Medicare Part B, Supplemental Medical Insurance, status.

Codes are:

C - No; cessation

D - No; denied

F - No; terminated

G - Yes; good cause

N - No; no response

P - Railroad

R - No; refused

S - No; no longer under renal disease provision

T - No; terminated for nonpayment of premiums

W - No; withdrawal

Y - Yes

PREMIUM AMT: Medicare Part B premium amount.

BYIN START: Month and year buy in began for Medicare Part B premium.

BYIN END: Month and year buy in stopped for Medicare Part B premium.

If Title XVI benefit information was also received for this inquiry, a message appears at the bottom of the screen. Press ****ENTER**** or ****F8**** and the **SSI1** screen will appear.

```

EIS SSI1          ELIGIBILITY INFORMATION SYSTEM          092407 15:36
                STATE ONLINE QUERY RESPONSE - PAGE 1      JUDITRAIN U
REQUEST SSN: 001 42 7703
                ***** SSI\TITLE XVI INFORMATION *****
SSI NAME: MICHAELIDES          , ADELE G  SSN: 001 42 7703
ADDRESS:  29 CASTLE ST          DOB: 06281962 SEX: F
                KEENE NH          MARITAL STATUS: SINGLE
                                03431          RACE: WHITE
                                PHONE: 603 352 0220
PAYMENT STATUS: N01          PAYMT ST EFF DATE: 09/07
CURRENT PAYMENT AMT (FED):  0.00          PAYMENT DATE: 09012007
CURRENT PAYMENT AMT (STE):  0.00          RECIPIENT TYPE: DI
OVERPAYMENT\UNDERPAYMENT:          MEDICAID ELIGIBILITY: S
SSI APP DATE:          05112004          APPEAL DECISION CODE:
DENIAL REASON:          APPEAL STATUS:
DENIAL DATE:          APPEAL DATE:
DISABLE STATUS: F          DISABLE DATE: 09291997

-----SSI PAYMENT HISTORY -----
  DATE          AMOUNT          DATE          AMOUNT          DATE          AMOUNT
09012007          0.00          01012007          601.00          11012006          0.00
03012007          623.00          12012006          603.00          10012006          603.00
02062007          44.00          11022006          603.00
*** PRESS ENTER TO VIEW SSI2 ***

```

The following information is displayed from the SSA records:

- REQUEST SSN:** The SSN sent from EIS as the basis for inquiry.
- SSI NAME:** Last name, First name and Middle Initial of the Title XVI client.
- SSN:** The SSI client's Social Security Number.
- ADDRESS:** Mailing address of the client. The format may vary.
- DOB:** Date of birth
- SEX:** The sex of the Title XVI client.
- MARITAL STATUS:** Marital status of the Title XVI client.
- RACE:** Race of the Title XVI client.
- PHONE:** Telephone number for Title XVI client.
- PAYMENT STATUS:** Status of the Title XVI payment. (Appendix G)
- PAYMT STATUS EFFECTIVE DATE:** Month and year of the last change to the Title XVI status.
- CURRENT PAYMENT AMT (FED):** The federal Title XVI amount the client is entitled to receive in the current month after any adjustments.
- PAYMENT DATE:** The date of payment for the Current Payment Amt, both Fed and State.

CURRENT PAYMENT AMT (STATE): The State amount (if applicable) the client is entitled to receive after any adjustments. Alaska participation should reflect -0- amount in this field.

RECIPIENT TYPE: Type of recipient of Title XVI benefit.

The codes are:

- AI - AGED INDIVIDUAL
- AS- AGED SPOUSE
- BI - BLIND INDIVIDUAL
- BC - BLIND CHILD
- DC - DISABLED CHILD
- DI - DISABLED INDIVIDUAL
- DS - DISABLED SPOUSE
- EP - ESSENTIAL PERSON
- XS - INELIGIBLE SPOUSE

OVERPAYMENT/UNDERPAYMENT: Indicates that the Current Payment Amount reflects an Overpayment, Underpayment, or both.

MEDICAID ELIGIBILITY: Indicates the recipient's Medicaid eligibility status.

- C - 1619b status
- D - Disabled adult child
- S - State determined

SSI APP DATE: The date the claimant filed the application for Title XVI.

APPEAL DECISION CODE: Decision rendered on the appeal. (Appendix H)

DENIAL REASON: The reason Title XVI benefits were denied.

APPEAL STATUS: Level of appeal and latest action.

DENIAL DATE: The date the applicant was denied Title XVI benefits.

APPEAL DATE: Date of most recent appeal action.

DISABLE STATUS: Indicates the status of Title XVI disability and blind cases. (Appendix I)

DISABLE DATE: The date of disability onset alleged by an applicant, or the date of disability onset established for Title XVI recipient.

SSI PAYMENT HISTORY, DATE, AMOUNT: Up to nine occurrences of Title XVI payment histories. The amount includes federal and state supplemental payments. (Appendix E)

Press **ENTER** to view the **SSI 2** (page 2) of the Title XVI data

```
EIS SSI2                ELIGIBILITY INFORMATION SYSTEM                092407 15:46
                        STATE ONLINE QUERY RESPONSE - PAGE 2        JUDITRAIN U
REQUEST SSN: 001 42 7703
***** SSI\TITLE XVI INFORMATION *****
SSI NAME: MICHAELIDES      , ADELE          G    DOB: 06281962      SEX: F
WAGES:   125.00  SELF EMPLOYMENT:      0.00  DEEMED INCOME:      0.00

                                UNEARNED INCOME
TYPE          START      END          AMOUNT      CLAIM NUMBER
SOC SEC      01/07
                                705.00      001427703A 7

                                LIVING ARR: A
PAYEE NAME/ADDRESS:        DEATH DATE:
ADELE G MICHAELIDES        CITIZENSHIP: A
29 CASTLE ST                ALIEN ENTRY DATE:
KEENE NH                    COUNTRY OF ORIGIN:
                                03431          DIRECT DEPOSIT: C
***** END OF SOLQ INFORMATION *****
***** PRESS **ENTER** OR **F9** TO EXIT *****

***** SSI\TITLE XVI INFORMATION *****
```

The following information is displayed from the SSA record:

- REQUEST SSN:** The SSN sent from EIS as the basis for inquiry.
- SSI NAME:** Last name, First name and Middle Initial of the Title XVI client.
- DOB:** Date of birth
- SEX:** The sex of the Title XVI client.
- WAGES:** Current monthly gross wages used for the Title XVI benefit calculation.
- SELF-EMPLOYMENT:** Current monthly gross self employment income used for the Title XVI benefit calculation.
- DEEMED INCOME:** Current monthly amount of income deemed to the recipient used for the Title XVI calculation.
- UNEARNED INCOME TYPE, START, END, AMOUNT, CLAIM NUMBER:** This field will display 5 records of unearned income. Current monthly gross unearned income used for the Title XVI calculation. The type indicates the kind of income the recipient was receiving; start and end indicate the date when the unearned income started and stopped. The amount is the gross monthly amount used for the Title XVI calculation. Claim Number will be present when the unearned income is Title II, VA, Railroad Retirement, Military retirement pay, Federal Civil Service. For income-in-kind the claim number field may contain identifying information such as FREE-RENT.

PAYEE NAME/ADDRESS: Name and address of person receiving the benefit. If name is different than recipient, benefit is being sent to a representative payee.

LIVING ARRANGEMENT: The type of Federal living arrangement for the current month of the recipient for Title XVI purposes. (Appendix J)

DEATH DATE: Date of death of the recipient when known. If the date of death is posted from a returned check, the day will reflect "01" or the date the returned check was processed.

CITIZENSHIP: Indicates if an individual is in a special alien status. (Appendix F).

ALIEN ENTRY DATE: Month and year the alien's residency began.

COUNTRY OF ORIGIN: Indicates an alien's country of origin.

Codes corresponding to those listed in the most current Federal Information Processing Standards (FIPS) publication no Appendix.

DIRECT DEPOSIT: Indicates if the benefit is deposited directly to a "C" checking or "S" savings account.

Press **ENTER** or **F9** to exit. EIS will return to **INME**.

APPENDICES

APPENDIX A

BENDEX STATE CODES

State	Alphabetic Code	Numeric Code
Alabama	AL	001
Alaska	AK	002
Arizona	AZ	003
Arkansas	AR	004
California	CA	005
Colorado	CO	006
Connecticut	CT	007
Delaware	DE	008
Florida	FL	010
Georgia	GA	011
Hawaii	HI	012
Idaho	ID	013
Illinois	IL	014
Indiana	IN	015
Iowa	IA	016
Kansas	KS	017
Kentucky	KY	018
Louisiana	LA	019
Maine	ME	020
Maryland	MD	021
Massachusetts	MA	022
Michigan	MI	023
Mississippi	MS	025
Missouri	MO	026
Minnesota	MN	024
Montana	MT	027
Nebraska	NE	028
Nevada	NV	029
New Hampshire	NH	030
New Jersey	NJ	031

State	Alphabetic Code	Numeric Code
New Mexico	NM	032
New York	NY	033
North Carolina	NC	034
North Dakota	ND	035
Ohio	OH	036
Okalahoma	OK	037
Oregon	OR	038
Pennsylvania	PA	039
Puerto Rico	PR	040
Rhode Island	RI	041
South Carolina	SC	042
South Dakota	SD	043
Tennessee	TN	044
Texas	TX	045
Utah	UT	046
Vermont	VT	047
Virgin Islands	VI	048
Virginia	VA	049
Washington DC	DC	009
Washington State	WA	050
West Virginia	WV	051
Wisconsin	WI	052
Wyoming	WY	053

APPENDIX B

BIC CODE VALUES

- & Combined A and B beneficiary in the same payment
- A Primary claimant
- B Aged wife, age 62 or over (1st claimant)
- B1 Aged husband, age 62 or over (1st claimant)
- B2 Young wife, with a child in her care (1st claimant)
- B3 Aged wife (2nd claimant)
- B4 Aged husband (2nd claimant)
- B5 Young wife (2nd claimant)
- B6 Divorced wife, age 62 or over (1st claimant)

B7 Young wife (3rd claimant)
 B8 Aged wife (3rd claimant)
 B9 Divorced wife (2nd claimant)
 BA Aged wife (4th claimant)
 BD Aged wife (5th claimant)
 BG Aged husband (3rd claimant)
 BH Aged husband (4th claimant)
 BJ Aged husband (5th claimant)
 BK Young wife (4th claimant)
 BL Young wife (5th claimant)
 BN Divorced wife (3rd claimant)
 BP Divorced wife (4th claimant)
 BQ Divorced wife (5th claimant)
 BR Divorced husband, age 62 or older 1st claimant)
 BT Divorced husband (2nd claimant)
 BW Young husband (2nd claimant)
 BY Young husband, with a child in his care (1st claimant)
 C1-C9 Child (includes minor, student or disabled child)
 CA-CK Child (includes minor, student or disabled child)
 D Aged widow, age 60 or over (1st claimant)
 D1 Aged widower, age 60 or over (1st claimant)
 D2 Aged widow (2nd claimant)
 D3 Aged widower (2nd claimant)
 D4 Widow (remarried after attainment of age 60) (1st claimant)
 D5 Widower (remarried after attainment of age 60) (1st claimant)
 D6 Surviving divorced wife, age 60 or over (1st claimant)
 D7 Surviving divorced wife (2nd claimant)
 D8 Aged widow (3rd claimant)
 D9 Remarried widow (2nd claimant)
 DA Remarried widow (3rd claimant)
 DC Surviving divorced husband, age 60 or over (1st claimant)
 DD Aged widow (4th claimant)
 DG Aged widow (5th claimant)
 DH Aged widower (3rd claimant)
 DJ Aged widower (4th claimant)
 DK Aged widower (5th claimant)
 DL Remarried widow (4th claimant)
 DM Surviving divorced husband (2nd claimant)
 DN Remarried widow (5th claimant)
 DP Remarried widower (2nd claimant)
 DQ Remarried widower (3rd claimant)
 DR Remarried widower (4th claimant)
 DS Surviving divorced husband (3rd claimant)
 DT Remarried widower (5th claimant)

DV Surviving divorced wife (3rd claimant)
 DW Surviving divorced wife (4th claimant)
 DX Surviving divorced husband (4th claimant)
 DY Surviving divorced wife (5th claimant)
 DZ Surviving divorced husband (5th claimant)
 E Mother (widow) (1st claimant)
 E1 Surviving divorced mother (1st claimant)
 E2 Mother (widow) (2nd claimant)
 E3 Surviving divorced mother (2nd claimant)
 E4 Father (widower) (1st claimant)
 E5 Surviving divorced father (widower) (1st claimant)
 E6 Father (widower) (2nd claimant)
 E7 Mother (widow) (3rd claimant)
 E8 Mother (widow) (4th claimant)
 E9 Surviving divorced father (widower) (1st claimant)
 EA Mother (widow) (5th claimant)
 EB Surviving divorced mother (3rd claimant)
 EC Surviving divorced mother (4th claimant)
 ED Surviving divorced mother (5th claimant)
 EF Father (widower) (3rd claimant)
 EG Father (widower) (4th claimant)
 EH Father (widower) (5th claimant)
 EJ Surviving divorced father (3rd claimant)
 EK Surviving divorced father (4th claimant)
 EM Surviving divorced father (5th claimant)
 F1 Parent (father)
 F2 Parent (mother)
 F3 Parent (stepfather)
 F4 Parent (stepmother)
 F5 Parent (adopting father)
 F6 Parent (adopting mother)
 F7 Parent (2nd alleged father)
 F8 Parent (2nd alleged mother)
 J1 Primary Prouty entitled to HIB (less than 3 QQs)* (General Fund)
 J2 Primary Prouty entitled to HIB over 2 QQs) (Retirement and Survivors Insurance (RSI) Trust Fund)
 J3 Primary Prouty not entitled to HIB (less than 3 QQs) (General Fund)
 J4 Primary Prouty not entitled to HIB (over 2 QQs) (RSI Trust Fund)
 K1 Prouty wife entitled to HIB (less than 3 QQs) (General Fund) (1st claimant)
 K2 Prouty wife entitled to HIB (over 2 QQs) (RSI Trust Fund) (1st claimant)
 K3 Prouty wife not entitled to HIB (less than 3 QQs) (General Fund) (1st claimant)
 K4 Prouty wife not entitled to HIB (over 2 QQs) (RSI Trust Fund) (1st claimant)
 K5 Prouty wife entitled to HIB (less than 3 QQs) (General Fund) (2nd claimant)
 K6 Prouty wife entitled to HIB (over 2 QQs) (RSI Trust Fund) (2nd claimant)

K7 Prouty wife not entitled to HIB (less than 3 QQs) (General Fund) (2nd claimant)
 K8 Prouty wife not entitled to HIB (less than 3 QQs) (RSI Trust Fund) (2nd claimant)
 K9 Prouty wife entitled to HIB (less than 3 QQs) (General Fund) (3rd claimant)
 KA Prouty wife entitled to HIB (over 2 QQs) (RSI Trust Fund) (3rd claimant)
 KB Prouty wife not entitled to HIB (less than 3 QQs) (General Fund) (3rd claimant)
 KC Prouty wife not entitled to HIB (over 2 QQs) (RSI Trust Fund) (3rd claimant)
 KD Prouty wife entitled to HIB (less than 3 QQs) (General Fund) (4th claimant)
 KE Prouty wife entitled to HIB (over 2 QQs) (RSI Trust Fund) (4th claimant)
 KF Prouty wife not entitled to HIB (less than 3 QQs) (General Fund) (4th claimant)
 KG Prouty wife not entitled to HIB (over 2 QQs) (RSI Trust Fund) (4th claimant)
 KH Prouty wife entitled to HIB (less than 3 QQs) (General Fund) (5th claimant)
 KJ Prouty wife entitled to HIB (over 2 QQs) (RSI Trust Fund) (5th claimant)
 KL Prouty wife not entitled to HIB (less than 3 QQs) (General Fund) (5th claimant)
 KM Prouty wife not entitled to HIB (over 2 QQs) (RSI Trust Fund) (5th claimant)
 M Uninsured beneficiary (not qualified for automatic HIB)
 M1 Uninsured beneficiary (qualified for automatic HIB but requests only SMIB)
 O Combined A and B beneficiary in the same payment
 T *Fully insured beneficiaries who have elected entitlement only to HIB (usually but not
 always along with SMIB)
 *Uninsured beneficiary or renal disease beneficiary only
 *Deemed insured (hospital insurance only)
 TA Medicare Qualified Government Employment (MQGE) primary beneficiary
 TB MQGE aged spouse (1st claimant)
 TC MQGE childhood disability benefits (CDB) (1st claimant)
 TD MQGE aged widow(er) (1st claimant)
 TE MQGE young widow(er) (1st claimant)
 TF MQGE parent (male)
 TG MQGE aged spouse (2nd claimant)
 TH MQGE aged spouse (3rd claimant)
 TJ MQGE aged spouse (4th claimant)
 TK MQGE aged spouse (5th claimant)
 TL MQGE aged widow(er) (2nd claimant)
 TM MQGE aged widow(er) (3rd claimant)
 TN MQGE aged widow(er) (4th claimant)
 TP MQGE aged widow(er) (5th claimant)
 TQ MQGE parent (female)
 TR MQGE young widow(er) (2nd claimant)
 TS MQGE young widow(er) (3rd claimant)
 TT MQGE young widow(er) (4th claimant)
 TU MQGE young widow(er) (5th claimant)
 TV MQGE disabled widow(er) (1st claimant)
 TW MQGE disabled widow(er) (1st claimant)
 TX MQGE disabled widow(er) (2nd claimant)
 TY MQGE disabled widow(er) (3rd claimant)

TZ	MQGE disabled widow(er) (4th claimant)
T2	MQGE (CDB) (2 ND claimant)
T3	MQGE (CDB) (3 rd claimant)
T4	MQGE (CDB) (4 th claimant)
T5	MQGE (CDB) (5 th claimant)
T6	MQGE (CDB) (6 th claimant)
T7	MQGE (CDB) (7 th claimant)
T8	MQGE (CDB) (8 th claimant)
T9	MQGE (CDB) (9 th claimant)
W	Disabled widow, age 50 or over (1st claimant)
W1	Disabled widower, age 50 or over (1st claimant)
W2	Disabled widow (2nd claimant)
W3	Disabled widower (2nd claimant)
W4	Disabled widow (3rd claimant)
W5	Disabled widower (3rd claimant)
W6	Disabled surviving divorced wife (1st claimant)
W7	Disabled surviving divorced wife (2nd claimant)
W8	Disabled surviving divorced wife (3rd claimant)
W9	Disabled widow (4th claimant)
WB	Disabled widower (4th claimant)
WC	Disabled surviving divorced wife (4th claimant)
WF	Disabled widow (5th claimant)
WG	Disabled widower (5th claimant)
WJ	Disabled surviving divorced wife (5th claimant)
WR	Disabled surviving divorced husband (1st claimant)
WT	Disabled surviving divorced husband (2nd claimant)

* QQ's = qualifying quarters

NOTE: Some BICs may be displayed as a three-position code (e.g., B01, C03 etc.)

Appendix C

TITLE II (SSA) PAYMENT HISTORY TABLE

The last 6 *occurrences* of payment history data may be displayed to provide historical payment information. The pertinent data elements are Monthly Benefit Credited (MBC) Date, and (MBC) Amount.

It is important to use all of the pertinent data elements in the matrix and provide definitions so that the entries will be properly interpreted. For example, some of the codes indicate that amounts were not due or that all or part of a monthly benefit was credited toward an overpayment recovery rather than issued to the individual. Also, it is essential to understand the meaning of *occurrence*. Each occurrence of data indicates a change in entitlement amount or reflects that benefits were not due. *Therefore, the 8 historical entries show the last 8*

changes in benefit amount, not the last 8 months. For example, an individual whose payment just changes once a year because of the cost-of-living adjustment would have only one occurrence of entitlement history per year.

In situations where the individual has been in current payment status, or in full suspense, AND there has been no retroactive change in his/her benefit amount, the history is also a payment history. However, in many cases where there have been adjustments to the record, this history does not accurately reflect the actual payments made. It does reflect what the individual was entitled to receive for those months.

	MBC Date: 04/97	MBC Amount: \$435.00
	MBC Date: 03/97	MBC Amount: \$535.00
	MBC Date: 01/97	MBC Amount: \$321.00
	MBC Date: 12/96	MBC Amount: \$320.80
	MBC Date: 08/96	MBC Amount: \$519.50
	MBC Date: 12/95	MBC Amount: \$520.00
	MBC Date: 12/94	MBC Amount: \$507.00
	MBC Date: 12/93	MBC Amount: \$493.00

The table on the following page shows an example of how to interpret Title II entitlement history entries and how to determine the entitlement amounts in specific months.

* MBC = Monthly Benefit Credited

The preceding table indicates that the individual received the following payments:

Benefit Amount

Payment Month(s)

\$435.00

05/97 through date of query (8/1/97)

\$535.00	04/97
\$321.00	02/97 - 03/97
\$320.80	01/97
\$519.50	09/96 - 12/96
\$520.00	01/96 - 08/96
\$507.00	01/95 - 12/95
\$493.00	01/94 - 12/94

APPENDIX D

PAYMENT STATUS CODES

NOTE: Applies to TITLE II (SSA) only

- A Withdrawal for adjustment
- AA Adjusted to split PICs in Advance File Status
- AC PIA correction (no recomputation)
- AD Adjusted for dual entitlement
- AE Withdrawn for recomputation under Section 142 (Japanese Internment credits)
- AF Transferred to another program service center or OIO. This code is no longer valid since implementation of national MBR. Adjusted to cancel worker's compensation offset.
- AJ Worker's compensation offset/ public disability benefits cancellation
- AM Withdrawn from HIB-only status
- AP Withdrawn for change of PIC or post-entitlement action adjusted simultaneous entitlement
- AR Withdrawal of a beneficiary from LAF S or T to place in current payment status
- AS Adjusted for simultaneous entitlement
- AW Withdrawn to impose worker's compensation offset/public disability benefits
- A (&) Withdrawn from suspense or deferred status to be placed in current payment status
- A (-) Withdrawn from current payment status to be placed in suspense or deferred status
- A0 Withdrawn to adjust reduction factor
- A1 Withdrawn for recomputation under Section 229 (non-contributory military credits after 1956)
- A2 Withdrawn for 1965 or 1968 recomputation
- A3 Withdrawn for recomputation under Sections 217 and 229 (non-contributory military credits before and after 1956)
- A4 Withdrawn for disability offset recomputation

- A5 Withdrawn for recomputation not separately defined
- A6 Withdrawn to recalculate PIA to include disability freeze
- A7 Withdrawn for recomputation under Section 217 (non-contributory military credits before 1957)
- A8 Record transferred from OIO to another program service center. This code is no longer valid since implementation of national MBR.
- A9 Withdrawn for adjustment action not separately defined
- B Abatement status
- C Current payment status (except railroad payment)
- D Deferred payment status
- DP Deferred because of receipt of public assistance
- DW Deferred because of worker's compensation/public disability benefit offset
- D1 Deferred because of foreign work test
- D2 Deferred because of annual retirement test
- D3 Deferred as an auxiliary because the primary beneficiary is LAF-D2
- D4 Deferred because no child-in-care
- D5 Deferred as an auxiliary because the primary beneficiary is in LAF-D1
- D6 Deferred to recover overpayments not separately defined
- D9 Deferred for reasons not separately defined
- E Current payment certified to the RRB
- F Advanced Filing for Current Payment through RRB
- J Advance File Current Pay Case
- K Advanced Filing for Deferred Payment
- L Advanced Filing for Conditional Payment
- N Disallowed claim
- ND Denied claim
- P Delayed claim (adjudication pending)
- PB Delayed claim - beneficiary's claim not finally adjudicated
- PF Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
- PH Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
- PJ Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
- PK Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
- PL Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.

PM	Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
PP	Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
PT	Claim has been terminated from delayed claims status
PW	Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
P0-P9	Used with delayed claims to indicate the beneficiary is to be placed in conditional payment status (LAF S) upon final adjudication. The second position character (subscript) has the same meaning as the subscript for the S LAFs.
R	Kill Credit
Sx	Conditional/Suspended statuses
SB	Benefits due but not paid (less than \$1.00)
SD	Technical Dual Entitlement – beneficiary is entitled on another claim or disability family maximum provision has reduced the MBA to zero
SF	Prouty beneficiary fails to meet residency requirement
SH	Prouty beneficiary receiving government pension
SJ	Alien suspension
SK	Deportation
SL	Beneficiary is in a barred payment country
SM	Refused old age insurance benefits to get Medicare-only coverage (prior to 1/81)
SP	Prouty beneficiary receiving public assistance
SS	Post-secondary student summer suspension
SW	Worker's compensation/public disability benefit offset
S0	Pending determination of continuing disability
S1	Beneficiary worked outside the United States (U.S.)
S2	Beneficiary worked inside the U.S.
S3	Primary beneficiary worked in the U.S.
S4	Failure to have child-in-care
S5	Primary beneficiary worked outside the U.S.
S6	Development of a better (correct) address for mail or direct deposit, as appropriate
S7	Prisoner suspension, suspension due to extended trial work period (EPE SGA); or suspension for refusing vocational rehabilitation (VR) services.
S8	Payee is being determined
S9	Miscellaneous suspension
Tx	Terminated statuses
TA	Advance filing claim terminated before maturity
TB	Mother's/Father's benefits terminated because beneficiary is entitled to disabled widow(er) s benefits
TC	Disabled widow attained age 62 and is not entitled as an aged widow
TJ	Advance filed claim terminated after maturity

- TL Termination of post-secondary student
- TP Terminated for change of PIC on post-entitlement actions
- TX DIB attained age 65 (also used for auxiliary beneficiaries)
- T (&) Claim was withdrawn
- T (-) Disability benefits terminated because of conversion to retirement benefits upon attainment of age 65
- T0 Benefits payable by some other agency
- T1 Death of beneficiary
- T2 Auxiliary terminated due to death of primary beneficiary (converted to survivor's benefits)
- T3 Beneficiary divorced, married, or remarried
- T4 Child beneficiary terminated because of attainment of age 18 or 19 and is not disabled; mother/father terminated based on last child's attainment of age 16
- T5 Entitled to other benefits
- T6 Child beneficiary is no longer attending school on full-time basis and is between ages 18 and 19, or a disabled child is no longer under a disability. Termination of a mother/father because of death or marriage of the last remaining child entitled to receive benefits
- T7 Child terminated because of adoption, mother/father terminated because last entitled child adopted
- T8 Primary DIB no longer disabled; mother/ father terminated because child no longer disabled
- T9 Terminated for reasons not separately defined
- U Active Uninsured Status
- W Withdrawal before entitlement
- Xx Adjusted/Suspended/Terminated/Un-insured statuses
- XD Withdrawal for adjustment
- XF Entitlement transferred to another program service center or OIO
- XK Beneficiary deported
- XR Withdrawn from SMIB
- X (+) SMI withdrawn; beneficiary entitled only to SMI
- X0 Claim transferred to RRB
- X1 Death of beneficiary
- X5 Beneficiary entitled to other benefits
- X7 Health insurance benefits (HIB)/ Supplemental Medical Insurance Benefits (SMIB) terminated
- X8 Payee being developed
- X9 Entitlement has been interrupted for reasons not separately defined

APPENDIX E

TITLE XVI (SSI)
TABLE

The last 8 occurrences of displayed to provide information. The pertinent Payment Date, SSI Monthly Supplement Amount, PHIST Payment Flag 2.

It is important to use all matrix and provide definitions interpreted. For example, amounts were not paid or that credited toward an than issued to the individual. understand the meaning of of data indicates a change in *the 8 historical entries show amount, not the last 8 months.* whose payment just changes cost-of-living adjustment would have only one *occurrence* of payment history per year.

Payment Date	Monthly Amount
08/01/1996	\$0.00
01/01/1996	\$470.00
08/01/1995	\$458.00
07/01/1995	\$38.31
07/01/1995	\$419.69
04/01/1995	\$45.80
04/01/1995	\$412.20
01/01/1995	\$434.70

PAYMENT HISTORY

payment history data may be historical payment data elements are PHIST Assistance Amount, State Payment Flag 1, and PHIST

pertinent data elements in the so that entries will be properly some codes indicate that all or part of a check was overpayment recovery rather Also, it is essential to *occurrence*. Each occurrence payment amount. *Therefore, the last 8 changes in payment* For example, an individual once a year because of the

The table on the following page shows an example of how to interpret Title XVI payment history entries and how to determine the payment amounts in specific months.

The Title XVI Payment History Table indicates that the individual received the following payments:

Payment Amount

Payment Amount

\$0.00	8/96 No SSI payments that have been made from 8/96 through date of query (8/1/97).
\$470.00	1/96 - 7/96
\$458.00	8/95 - 12/95
\$419.69	7/95 (\$38.31 was withheld for an overpayment recovery in 7/95 as indicated by code 5 in payment flag 1.)
\$412.20	4/95 - 6/95 (\$45.80 was withheld for an overpayment recovery from 4/95 - 6/95 as indicated by code 5 in payment flag 1.)
\$434.70	1/95 - 3/95

APPENDIX F

Citizenship Codes

Indicates if eligible/ineligible individual is in special alien status.

1	No status alleged
2	Valid status alleged, but not proven--N13 being processed
A	Proven U.S. born, U.S. citizen
B	Alleged U.S. born, U.S. citizen
C	U.S. Citizen born outside the U.S. (includes naturalized citizens)
D	Alleged U.S. citizen, continuous residence since 1/1/72
E	Citizenship/alien status not proven; case denied for reason(s) other than citizenship/alien status
F	Refugee Status - Sections 207 or 203 (A) (7) of the INA
G	Parole Status - Section 212(d) of the INA
H	Silva vs Levi Alien
I	Indochinese refugee (obsolete)
J	Deferred action
K	Alien lawfully admitted to the U.S. for permanent residence
L	Asylum status, Section 208 of the INA
M	Resident of the Northern Mariana Islands (obsolete)
N	Identity and citizenship verified by Numident interface (Code was previously B)

P	Pre-January 1, 1972 alien (presumed lawfully admitted for permanent residence)
Q place	Alleged U.S. born, U.S. citizen (allegation corroborated by a U.S. of birth shown on the Numident)
R	Legal temporary resident – status granted as a result of the Immigration Reform and Control Act of 1986
S	Legal permanent resident – status granted as a result of the Immigration Reform and Control Act of 1986
T	Alien granted voluntary departure
U	Unknown
V	Systems override applied following interface edit (obsolete)
W	Alien granted stay of deportation
X	Cuban/Haitian entrant
Y	Legalized agricultural worker pursuant to the Immigration Reform and Control Act of 1986
Z	Alien on whose behalf an immediate relative petition has been approved
*	Unreadable transmission

APPENDIX G

PAYMENT STATUS CODES and DENIAL REASON CODES

NOTE: Applies to TITLE XVI (SSI) only

This is a three position alpha numeric display made up of two elements; the first (the first position) of which reflects the status of the SSI/State Supplement payment, the second (the second and third positions) of which reflects the reason for the status.

The following descriptions, "C" through "T", apply to the first position of the code:

C	Indicates the recipient is eligible for SSI/State Supplement payments
E	Indicates eligibility for Federal and/or State benefits based on the eligibility computation, but no payment is due based on the payment computation
H	Indicates a case in "hold" status, final disposition is pending
M	Indicates a case is under manual control. Case is known as "forced payment" although payment may not be involved
N	Indicates the applicant is not eligible for SSI/State Supplement payments or that a previously eligible recipient is no longer eligible
P	Provisional, possible reinstatement (obsolete)

- S Indicates recipient may still be eligible for SSI/State Supplement payments, but payment is being withheld
- T Indicates SSI/State Supplement eligibility is terminated

Specific Codes

- C01 Current Pay
- E01 Eligible for Federal and/or State benefits based on the eligibility computation, but no payment is due based on the payment computation
- E02 First month of eligibility for claims filed on or after 8/22/96. Claimant is eligible for a payment in that month but is NOT due a payment.
- H10 Living Arrangement change is in progress
- H20 Marital status change is in progress
- H30 Resource change is in progress
- H40 Student status change is in progress
- H50 Head of household change is in progress
- H60 Hold pending receipt of date of death
- H70 Hold pending transmission of one-time payment data
- H80 Early input
- H90 Systems limitation involved. DO must manually compute and input payment amounts
- M01 Force Payment - Recipient may be in payment or non- payment status
- M02 Force Payment - Recipient may be in payment or non-payment status
- N01 Non-pay - Countable Income exceeds Title XVI federal benefit rate
- N02 Non-pay - Recipient is inmate of public institution
- N03 Non-pay - Recipient is outside of the U.S.
- N04 Non-pay - Recipient's non-excludable resources exceed Title XVI limitations
- N05 Non-pay - Unable to determine if eligibility exists
- N06 Non-pay - Recipient failed to file for other benefits
- N07 Non-pay - Cessation of the recipient's disability
- N08 Non-pay - Cessation of the recipient's blindness
- N09 Non-pay - Recipient refused vocational rehabilitation without good cause
- N10 Non-pay - Recipient refused treatment for drug addiction
- N11 Non-pay - Recipient refused treatment for alcoholism
- N12 Non-pay - Recipient voluntarily withdrew from program
- N13 Non-pay - Not a citizen or an eligible alien
- N14 Non-pay - Aged claim denied for age
- N15 Non-pay - Blind claim denied. Applicant not blind
- N16 Non-pay - Disability claim denied. Applicant not disabled.
- N17 Non-pay - Failure to pursue claim by the applicant
- N18 Non-pay - Failure to cooperate
- N19 Non-pay - Recipient has voluntarily terminated participation in the SSI program
- N20 Non-pay - Recipient fails to furnish a required report
- N22 Non-pay - Inmate of a penal institution
- N23 Non-pay - Not a U.S. resident

- N24 Non-pay - Convicted of felony of fraudulently misrepresenting residence in two or more States (Effective Through 11/99) Non-pay - Administrative Sanctions penalty imposed because claimant has provided false or misleading statements to obtain benefits. (Effective 12/99 until present)
- N25 Non-pay - Claimant is fleeing to avoid prosecution for, or custody or confinement after conviction for, a crime which is a felony (or in New Jersey a high misdemeanor) under the laws of the place from which he/she flees, or is violating a condition of probation or parole imposed under Federal or State law.
- N27 Non-pay - Disability terminated due to a substantial gainful activity
- N30 Non-pay - Slight impairment - medical consideration alone, no visual impairment
- N31 Non-pay - Capacity for substantial gainful activity - customary past work, no visual impairment
- N32 Non-pay - Capacity for substantial gainful activity - other work, no visual impairment
- N33 Non-pay - Engaging in substantial gainful activity despite impairment, no visual impairment
- N34 Non-pay - Before 3/9/91: Impairment no longer severe at time of adjudication and did not last 12 months, no visual impairment Effective 3/9/91: Child under age 18, impairment(s) disabling for a period of less than 12 months
- N35 Non-pay - Impairment is severe at time of adjudication but not expected to last twelve months, no visual impairment
- N36 Non-pay - Insufficient or no medical data furnished
- N37 Non-pay - Failure or refusal to submit to consultative examination
- N38 Non-pay - Applicant does not want to continue development of the claim
- N39 Non-pay - Applicant willfully fails to follow prescribed treatment
- N40 Non-pay - Impairments(s) does not meet or equal listing (disabled child under age 18 only), no visual impairment
- N41 Non-pay - Slight impairment - medical condition alone, visual impairment
- N42 Non-pay - Capacity for substantial gainful activity - customary work, visual impairment
- N43 Non-pay - Capacity for substantial gainful activity other work, visual impairment
- N44 Non-pay - Before 3/9/91: Engaging in SGA despite impairment, visual impairment Effective 3/9/91: Child under 18. Impairment not severe
- N45 Non-pay - Impairment no longer severe at time of adjudication and did not last twelve months, visual impairment, or denial of child's claim
- N46 Non-pay - Impairment is severe at time of adjudication but no expected to last twelve months, visual impairment
- N47 Non-pay - Insufficient, or no, medical evidence furnished, visual impairment
- N48 Non-pay - Failure, or refusal, to submit to consultative examination, visual impairment
- N49 Non-pay - Applicant does not want to continue development of the claim, visual impairment
- N50 Non-pay - Applicant willfully fails to follow prescribed treatment, visual impairment
- N51 Non-pay - Before 3/9/91: Impairment does not meet or equal listing (disabled child under age 18 only), visual impairment Effective 3/9/91: Child under 18. Individual Functional Assessment (IFA) shows impairment(s) not of comparable severity, visual impairment

- N52 Non-pay - Deleted from the State rolls before 1/73 payment
- N53 Non-pay - Deleted from the State rolls after 1/73 payment
- N54 Non-pay - DO unable to locate applicant
- P01 Possible reinstatement pending development by SGA (obsolete)
- S01 Suspended - Suspension of payments due to report of death by Treasury, potential automated death case
- S04 Suspended - System is awaiting disability determination (system generated)
- S05 Suspended - Substantial gainful activity decision pending
- S06 Suspended - Recipient's address unknown
- S07 Suspended - Returned check for other than death, address, payee change, or death of representative payee
- S08 Suspended - Representative payee development pending
- S09 Suspended - Temporary Institutionalization Suspense (systems-generated)
- S10 Suspended - Recipient has a bank account and refuses to receive payments via direct deposit
- S20 Suspended - Potential Rollback case or disability decision made prior to July 1973
- S21 Suspended - The recipient is presumptively disabled or blind and has received six months payments (systems-generated)
- S90 Suspended - PR1 change in process because SSR was established under the incorrect SSN (this condition is extremely rare)
- S91 Suspended - PR1 change in process because SSR was established under the incorrect SSN (this condition is extremely rare)
- T01 Terminated - Death of the recipient
- T20 Terminated - received payment under two different account numbers
- T22 Terminated - received payment under two different accounts, termination resulted from electronic screening
- T30 Terminated - Manual termination (payment previously made). Change in record composition requires termination of existing record
- T31 Terminated - System generated termination (payment previously made or refund on record)
- T32 Terminated - Automated systems termination of a paid record that has exceeded certain size limitation
- T33 Terminated - Manual termination (through MSSICS)
- T50 Terminated - Manual termination (no previous payment made)
- T51 Terminated - System generated termination (no previous payment made)
- * Data transmitted in error

APPENDIX H

Indicates the status of Title XVI disability and blind cases.

F	Final determination
P	Presumptive finding
R	Referred to State agency. Code indicates a) Final determination denial, or b) Pending determination
S	State determination (conversion case only) allowance
T	Presumptive finding. State conversion record
X	No disability determination made (claim denied on basis of non-disability issues)
Blank	Not applicable.
*	Data transmitted in error

NOTE: F or S only exist for disability allowance cases.
The field is left as R, P or T for initial disability denials

APPENDIX I

Decision rendered on the appeal.

AD	Dismissed/Abandoned	
FA	Favorable/SSA Appealed	(Court Case only)
FC	Fully/Partially Favorable	(Converted records only)
FF	Fully Favorable	
FN	Favorable/SSA Not Appealed	(Court Case only)
OT	Closed: Other	
PF	Partially Favorable	
T1	Dismissed: Claimant Deceased	
UA	Unfavorable/Appealed by Recipient	(Court Case only)
UF	Unfavorable	
UN	Unfavorable/Not Appealed	
WC	Dismissed/Withdrawn	(Converted Records only)
WD	Dismissed: Withdrawn	
1D	Dismissed: Cannot be Appealed	
2D	Dismissed: Filed by Improper Requestor	
3D	Dismissed: Filed Prematurely	
4D	Dismissed: Filed Late Without Good Cause	

APPENDIX J

Federal Living Arrangement Code

- A Own household
- B Another's household
- C Parent's household (child)
- D Title XIX institution
- Blank Individual is in a non-Title XIX institution, living arrangement change in progress. or outside the U.S.
- * Initial claims surface edit