

**Addendum to the Supporting Statement
For Form SSA-7-F6
Application for Parent's Insurance Benefits
20 CFR 404.370, .371, .373, .374, .404.601-404.603**

Explanation of Changes:

We are adding the following statement at the top of Form SSA-7-F6 as indicated on mock-up: "For additional information about this application a factsheet to Form SSA-7 is available at www.socialsecurity.gov."

Question # 13 revised to collect marital history for the Beneficiary Marriage (BMAR) screen in the Modernized Claim System (MCS).

13(a) Have you married since the death of the Deceased? Yes No

13(b) Enter below the information requested about the marriage.

To whom married When (Month, day, year) Where (Name of City and State)

How marriage ended (If still in effect, write "Not Ended") When (Month, day, year)

Where (Name of City and State)

Marriage performed by: Spouse's date of birth (or age) If spouse deceased, give date of death

Clergyman or public official

Other (Explain in "Remarks")

Spouse's Social Security number (if none or unknown, so indicate)

Medicare Language (page 4)

Medicare Part B (Medical Insurance) helps cover doctor's services and outpatient care. It also covers some other services that Medicare Part A doesn't cover, such as some of the services provided by physical and occupational therapists and some home health care. If you enroll in Medicare Part B, you will have to pay a monthly premium. The amount of your premium will be determined when your coverage begins. In some cases, your premium may be higher based on information about your income we receive from the Internal Revenue Service. Your premiums will be deducted from any monthly Social Security, Railroad Retirement, or Office of Personnel Management benefits you receive. If you do not receive any of these benefits, you will get a letter explaining how to pay your premiums. You will also get a letter if there is any change in the amount of your premium.

You can also enroll in a Medicare prescription drug plan (Part D). To learn more about the Medicare prescription drug plans and when you can enroll visit www.medicare.gov or call 1-800-MEDICARE (1-800-633-4227; TTY 1-877-486-2048). A Medicare

Representative can also tell you about agencies in your area that can help you choose your prescription drug coverage.

If you have limited income and resources, we encourage you to apply for the extra help that is available to assist you with Medicare prescription drug costs. The extra help can pay the monthly premiums, annual deductibles, and prescription co-payments. To learn more or apply, please visit www.socialsecurity.gov, call 1-800-772-1213 (TTY 1-900-325-0778) or visit the nearest Social Security office.

Question # 22

We further explain: Select “No” if you are already enrolled under your own Social Security number.

Questions #23 and 24

19. Do you have any unsatisfied felony warrants for your arrest?

20.. Do you have any unsatisfied Federal or State warrants for your arrest for violating the conditions of your probation or parole?

We removed these questions based on a directive from the Commissioner as part of the Ready Retirement initiative to streamline the application. The Agency will no longer ask the Title II applicant questions regarding unsatisfied felony or probation or parole warrants on any Title II application.

Receipt Page and INST Change:

See attached mock-up SSA-7 and 7INST. The heading “WORK AND EARNINGS” was added before the caption “HOW TO REPORT”. The work and earnings paragraph was moved up under “WORK AND EARNINGS”.

Privacy Act and Paperwork Reduction Act Statements revised.

We are adding the following statement to the SSA webpage fact sheet following the line that reads, “Whether you have married since the worker’s death.” (see mock-up under supplementary documentation) add: “Social Security uses this information to determine your eligibility for parent’s benefits.”

We will obsolete and destroy existing stock of the SSA-7-F6.

