Addendum to the Supporting Statement for Form SSA-454-BK & SSA-454-ICR Continuing Disability Review Report 20 CFR 404.1589 & 416.989 OMB No. 0960-0072

Revisions to the Collection Instrument

We have revised the SSA-454-BK to reflect the format and language, when appropriate, currently found in Form SSA-3368-BK (Disability Report – Adult) (OMB No. 0960-0579). The SSA-454-ICR and accompanying EDCS screens will ask the same questions.

As part of our revisions, we have revised the SSA-454-BK based off of the comments we received from an agency-wide, inter-component review in August 2008. The Office of Disability Programs (ODP) and a cross-component workgroup in Central Office (CO) have reviewed the SSA-454-BK for clarity and appropriateness of questions. After much internal (CO) discussion, usability testing with nine or fewer members of the public, including: claims representatives (CRs) and observation of disability examiners (DEs) using the revised form, we are proposing the revisions described below.

<u>Instruction cover sheet</u> – Reworded for clarity.

<u>Privacy Act Statement</u> –

• We adopted revised language provided by the Office of General Council's Office of Privacy Disclosure.

Paperwork Reduction Act Statement -

- We reformatted the paragraphs for readability.
- Below the PRA, we added a sentence referring users to www.socialsecurity.gov for more information

<u>For SSA Use Only on page 1</u> – Reformatted to highlight the "date of the last medical disability decision."

<u>Instructions below "For SSA Use Only"</u> – Removed text about "Ticket to Work" because Section 8 addresses that topic. Added text to explain whose information CRs should enter on the report.

<u>Section 1 – Information about the Disabled Person</u>

- Question 1.D. Removed designation of message number because less than 1% of people who completed the EDCS 3368 in FY08 indicated the phone was a message number.
- Question 1.E. Added a question to collect alternate phone number since so many people now have more than one.

• Question 1.G Added "and educational" to question about other names since this is valuable information in obtaining records.

Section 2 - Contacts - Renamed old question 1.E as new section "Contacts"

- Removed questions about English speaking contact. A workgroup for Service Delivery to Limited English Proficiency Customers determined this is no longer appropriate because of the availability of interpreter services.
- Added question about "Who is completing this report?" to this section to make it easy to refer to a contact that has been entered in this section.

<u>Section 3 – Medical Conditions</u> – Renamed section title for brevity

- New question 3.A (old question 2.A) reworded for clarity
- Old question 2.B (Has there been any change . . .) deleted because the allegation is not material to the continuing disability review determination**
- Questions 3.A and 3.B Moved height and weight questions from Section 1 to this section because the responses may be material to medical conditions.

<u>Section 4 – Work</u> - Eliminated old Section 7 – Updated Work Information, and created a new Section 4 – Work, with a single question because some of the previous questions are not material to the determination and SSA captures others on a work activity questionnaire (SSA-820—OMB Control Number 0960-0598, or SSA-821—OMB Control Number 0960-0059).

<u>Section 5 – Medical Treatment</u> – Renamed old section 5 for brevity

- 5. A and 5.B Shortened the questions by combining past treatment with future appointment.
- 4.C Details about treating sources
 - O Combined the collection of information about doctors and hospitals.
 - O Revised the questions to support this format.
 - O This redesigned page (and the following identical 4 pages) collects information about the treating source, regardless of the type. Usability testing with beneficiaries/recipients revealed they do not separate treating sources into categories like doctor and hospital.
 - o Moved test information from old Section 5 − Tests, to this page so users do not have to repeat the names of sources
 - O There are no new questions in this section.

Section 6 (old question 3.F) – reworded for clarity and to emphasize insurance companies

Section 7 – Medicines

• Removed side effects as we do not need them in every case.

<u>Section 8 – Education and Training</u>

• 8.A – Revised to ask only about education since the last medical decision

Section 9 – Vocational Rehabilitation, Employment, or Other Support Services

 Reworded to better identify programs which might be relevant to disability determination.

Implementation Plan

Upon approval of the revisions, SSA's Forms Management Team will make the changes shown in the attached mock-up and reformat the paper version as they do with all other agency public use paper forms.

We scheduled implementation of the revised paper SSA-454-BK and new EDCS screens for spring 2010, and new SSA-454-ICR for 2011. We cannot use the EDCS screens until at least one Disability Determination Service (DDS) office is able to accept the electronic data. We anticipate this happening no earlier than spring 2010. We prefer making the new paper SSA-454-BK available when the EDCS screens are first available. As each DDS upgrades its computer systems to accept the new SSA-454 EDCS data, the Field Offices (FOs) that are affiliated with that DDS will begin to use the EDCS screens. This roll-out period could take up to eighteen months.

With the advent of an EDCS screens, there will be a new business process for electronic Continuing Disability Reviews (eCDR). Currently, an FO sends an SSA-454-BK to each individual selected for a CDR, and will continue to do so. The individual completes and returns the SSA-454-BK to the FO or requests assistance from the FO. The FOs will only use the EDCS screens when the individual requests assistance.

SSA will pilot usage of the SSA-454-ICR in FY10 with about 300 people. The proposed business process for the pilot calls for FOs to mail an SSA-454-ICR to selected individuals who will complete and return it to a data processing center. The data processing center will scan the SSA-454-ICR data into EDCS. The data processing center will notify FOs when they have scanned an ICR. CRs will contact the individuals who completed the SSA-454-ICRs to ask additional questions and enter the information into the EDCS screens. The Agency has determined the most efficient way to collect information is to ask CDR subjects to provide basic information on the SSA-454-ICR and then allow trained CRs to interview the subjects to obtain more complex information. Following successful completion of the pilot, the Agency will hire a contractor to mail the SSA-454-ICRs to all individuals selected for periodic CDRs. The rest of the business process will be as described earlier in this paragraph.

We will destroy prior editions of the SSA-454-BK.

Plans beyond 2011 call for creation of an Internet version of the Continuing Disability Review Report.

Creating a Different Modality

In this Information Collection Request, we are adding the ICR version to the package. We are requesting clearance of an Intelligent Character Recognition version of form SSA-454-BK. This new version uses new form processing software, Intelligent Character Recognition. The addition of this new form will save time for both respondents and SSA field office employees.

The SSA-454-ICR is an abbreviated version of the SSA-454-BK. An FO employee will supplement it with an interview using EDCS so that we ask all questions regardless of the modality of the collection instrument.

Below are detailed explanations of how the SSA-454-ICR differs from the long paper SSA-454-BK. We have included the EDCS interview questions that support the ICR process.

<u>Instruction cover sheet</u> – Reworded to be specific to SSA-454-ICR.

<u>For SSA Use Only on page 1</u> – Reformatted to highlight the "date of the last medical disability decision."

- Fields in this section are automatically propagated from the Disability Control File (DCF)
 We added space that the printing contractor, WBDOC, will use
 <u>Instructions below "For SSA Use Only"</u> –
- Added text about "Ticket to Work" because individuals who are participating in a Ticket to Work program should not complete the 454.

Section 1- Information About the Disabled Person-

- Name and Address are propagated from the DCF
- We added space for the respondent to make corrections to name or address
- We ask only if the respondent used other names on medical or educational records. If the
 answer is yes, we collect the other names used in EDCS during the interview. (See
 interview questions below.)

Section 2- Medical Conditions-

• If the respondent answered "yes" to question 2.B, we collect other conditions in EDCS during the interview. (See interview questions below.)

Section 3- Medical Records-

- We collect only the name of the hospital, clinic, or doctor, the telephone number, city and state- We collect additional treatment information in EDCS during the interview. (See interview questions below.)
- We included the question 3.E. in this section because it is about medical records. If the respondent answered yes, we collect additional information in EDCS during the interview. (See interview questions below.)

<u>Section 4 – Work, Education, and Training</u>—We combined sections 4 and 8 from the SSA-454-BK.

• SSA collects the details about work, education and training in EDCS during the interview, (See interview questions below.)

Section 5- Vocational Rehabilitation, Employment, or other Support Services-

- We collect only a yes or no.
- If the answer is yes, we collect details in EDCS during the interview. (See interview questions below.)

Section 6- Medicines-

• We collect details about medicines in EDCS during the interview. (See interview questions below.)

Questions for the eCDR Interview - These are the conditional questions that the CR will ask in a pathed EDCS interview based on the SSA-454-ICR responses. CR will also cover all unanswered question on the SSA-454-ICR in the EDCS interview. CR will be able to access and amend any ICR responses.

Cross	Item	When to present in	What must be collected in EDCS		
Reference to SSA-454-ICR		EDCS			
Page 1	Other names	If "other names" question (1.E) is answered yes	"What other names have you used on your medical or educational records within the last 12 months?"		
Page 2	Medical Conditions	If "more than 5 conditions" (2.B) is answered yes	List the conditions that limit your ability to work		
Page 2	Treatment	If either "treatment" question (3.A or 3.B) is answered yes	For each source, enter address. Ask about treatment details, including dates, medicines and tests.		
Page 2	Medical Records	If "medical information" question (3.E) is answered yes	Source details—name, address, phone, dates and reason.		
Page 3	Work	If "have you worked" question (4.A) is answered yes	EDCS prompts CR to develop work activity questionnaire (SSA-820 – OMB Control No. 0960-0598, or SSA-821 – OMB Control No. 0960-0059).		
Page 3	Education	If "have you received any type of specialized job training " question (4.D) is answered yes	Training facility details - name, address, phone, date or completion and type of program		
Page 4	Vocational Rehabilitation	If Vocational Rehabilitation question	Program details – name and address of organization, name of contact, dates and types of		

		(5.A) is answered yes	services.
Page 4	Medicines	If "are you taking medicines" question (6.A)	Who prescribed and reason
		is answered yes	
Page 2	Tests	Always	Names and dates of tests and who ordered