**Addendum to Supporting Statement for**

**RSI/DI Quality Review Case Analysis - Auxiliaries/Survivors, Parent,**

**SSA-L8550-U3 (Appointment Letter – Sample Individual),**

**SSA-L8551-U3 (Appointment Letter – Sample Auxiliaries),**

**SSA-L8552-U3 (Appointment Letter \_ Representative Payee),**

**SSA-L8553-U3 (Beneficiary Telephone Contact),**

**SSA-L8554-U3 (Representative Payee Telephone Contact)**

**OMB: 0960-0189**

**Background**

The Social Security Administration (SSA) uses Form SSA-2930, SSA-2931 and

SSA-2932 to establish a national payment accuracy rate for all cases in payment status, and to serve as a source of information regarding problem areas in the Retirement and Survivors Insurance (RSI) and Disability Insurance (DI) programs. We also use the information to measure the accuracy rate for newly adjudicated RSI/DI cases.

All of the information on these forms is collected through interviews with the beneficiaries. We conduct approximately 75 percent of these interviews over the telephone, and 25 percent in a face-to-face contact review. An SSA employee is conducting all interviews, writing respondents’ answers to the questions directly on the paper form.

We send each respondent an appointment letter for the interviews. Respondents receive one of the following letters for an appointment: SSA-L8550-U3 (Appointment Letter – Sample Individual), SSA-L8551-U3 (Appointment Letter – Sample Auxiliary/Survivor), or the SSA – L8552-U3 (Appointment Letter (Representative Payee); we send respondents a notice for a telephone contact review using either the SSA-L8553-U3 (Beneficiary Telephone Contact) or the SSA-L8554-U3 (Representative Payee Telephone Contact).

**Revisions to the Collection Instruments**

SSA is making the following revisions:

**SSA-2931-BK**

***Change 1*:** We are making changes to the SSA-2931-BK – RSI/DI Quality Review Case Analysis – Auxiliaries/Survivors (interview workbook)

***Justification 1***

We are requesting to reformat the SSA-2931 (Review Case Analysis – Auxiliaries/Survivors) interview workbook to include the parent factors of entitlement information from the SSA-2932 (Review Case Analysis – Parent). Parents are considered Auxiliaries/Survivors when reviewing claims. The SSA-2932 will be destroyed and deleted.

**Change 2:** We are making changes to the SSA-L8550-U3 (Appointment Letter – Sample Individual), SSA-L8551-U3 (Appointment Letter- Sample Auxiliary/Survivor), SSA-L8552U3 - (Appointment Letter (Representative Payee); SSA-L8553-U3 (Appointment Letter - Beneficiary Telephone Contact); and SSA-8554-U3 (Representative Payee Telephone Contact) letters.

**Justification 2:** We are changing **the** Office title in the letterhead from Office of Quality Performance to Office of Quality Review. (ex: Office of Quality Performance – Boston should now be Office of Quality Review - Boston) in the letterhead.

**SSA-2931 – RSI/DI Quality Review Case Analysis – Auxiliaries/Survivors**

We are reformatting Form SSA-2930 to simplify and clarify the form.

***Change 3:***We are reformatting Page 1. We are deleting Spouse and Children from the title of the workbook. We are replacing the word Surviving with Survivor in the title. It should now read RSI/DI Quality Review Case Analysis – Auxiliary/Survivor.

***Justification 3:*** We are reformatting the form to simplify and clarify.

***Change 4:*** We are reformatting pages 8 – 13. We are adding word PARENT to the title. It should now read as SPOUSE/SURVIVING SPOUSE/PARENT.

***Justification 4:*** We are reformatting the form to simplify and clarify.

***Change 5:*** We are reformatting page 13. We are adding a note Skip to part V to continue Parent Review.

***Justification 5:***  We are reformatting the form to simplify and clarify.

***Change 6:*** We are reformatting page 30,Section V, Parent, (new page) Desk Review. We are adding 3 questions that specifically address parent factors of entitlement for benefits that are not address in pages 8 -13. Page 30 will be the Desk Review portion and page 31 is the face-to-face/telephone portion.

V. PARENT

**I**. Relationship

1. Type of Parent Relationship: \_\_ Natural Parent \_\_Stepparent \_\_Adoptive Parent

2. Evidence/Documentation of Relationship in Claims Folder/MCS Screens:\_\_\_\_\_\_\_\_\_

3. Evidence Needing Verification \_\_\_\_\_\_\_\_\_

**J.** One-Half Support

1. Support Period:\_\_\_\_\_\_\_\_

2. Proof of Support Filed Timely: \_\_Yes \_\_No

(Explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_

3. One-Half Support Met: \_\_Yes \_\_No

(Explain)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

4. Evidence/Documentation of Support in Claims Folder/MCS Screens:\_\_\_\_\_\_\_\_\_\_\_\_

5. Evidence Needing Verification:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**K**. Other

1. Beneficiary Married after Number Holder’s Death: \_\_Yes (Complete Below) \_\_No

a. Parent’s Spouse is a Title II Beneficiary: \_\_Yes \_\_No

b. If Yes, Spouse’s Claim Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2. Beneficiary Entitled to RIB Equal to/Exceeds Parent Original Benefit Amount: \_\_Yes \_\_No

**Page 30 and 31 Section V, Parent, (added page) FACE-TO-FACE/TELEPHONE REVIEW**

V. PARENT

**I**. Relationship

\_\_ Beneficiary Agrees With DR Summary

\_\_ Beneficiary Disagrees With DR Summary:

(Explain) \_\_\_\_\_\_\_\_\_

\_\_Evidence Obtained in Field Review.

**J.** One-Half Support

\_\_ Beneficiary Agrees With DR Summary

\_\_ Beneficiary Disagrees With DR Summary:

(Explain) \_\_\_\_\_\_\_\_\_

\_\_Evidence Obtained in Field Review.

**K**. Other

\_\_ Beneficiary Agrees With DR Summary

\_\_ Beneficiary Disagrees With DR Summary:

(Explain) \_\_\_\_\_\_\_\_\_

***Justification 6:*** We are reformatting the form to simplify and clarify.

***Change 7*:** We are renumbering pages 32-36, as well as the title pages. Part V will now be Part VI and Part VI will now be Part VII.

***Justification 7:*** We are reformatting the form to simplify and clarify.

***Change 8:*** We are making changings to page 36. We are making a separate section for Spouse/Parent. We are adding Parent: for section V with V.A, V.B and V.C to corresponded to addition pages for Parent. We are renumbering Payment for SM and Additional Issues to correspond with pages in workbook.

***Justification 8:*** We are reformatting the form to simplify and clarify.

We are revising the PRA statement to reflect our current boilerplate language.  The current language, which dates back to the last reprint of the form, is now outdated.

We are removing the Privacy Act Statements for forms: SSA-L8550, SSA-L8551,

SSA-L8552, SSA-L8553, and SSA-L8554 as they are not collecting any personal information from the individual.

SSA’s Office of the General Counsel is conducting a systematic review of SSA’s Privacy Act Statements on agency forms. As a result, SSA is updating the Privacy Act Statement on the first page of the form.

We will implement these changes one we receive OMB approval. We will make any existing stock obsolete and destroy upon approval of these new letters and form.