**Justification for Non-Substantive Changes for the HA-539**

**Notice Regarding Substitution of Party Upon Death of Claimant**

**20 CFR 404.957(c)(4) and 416.1457(c)(4)**

**OMB No. 0960-0288**

**Revisions to the Collection Instrument**

* **Change #1:** Add cover letter to be included with the HA-539 when sending to the family of a claimant who passed away.

**Justification #1:** This letter will explain to the family of the claimant that there was a pending disability claim at the time of death. If there is an eligible person to assume the role of a substitute party to the claim, then they will need to fill out the provided HA-539 and return it to the hearing office within 10 days, or SSA will dismiss the deceased claimant's hearing request.