Modernized Claim System (MCS)

Screen Package

MCS is the Social Security Administration's (SSA) claim system for taking and processing title II and XVIII applications. It mirrors the paper application formats using an electronic collection method.

MCS screens include data fields for technicians to complete with application responses and documentation of evidence. Its functionality includes propagation of data from SSA records and the ability to print and store an application summary, receipt and reporting responsibilities for Title II and XVIII applications.

This screen package include the multiple MCS screens technicians may complete when taking an application for Mother's or Father's Insurance Benefits.
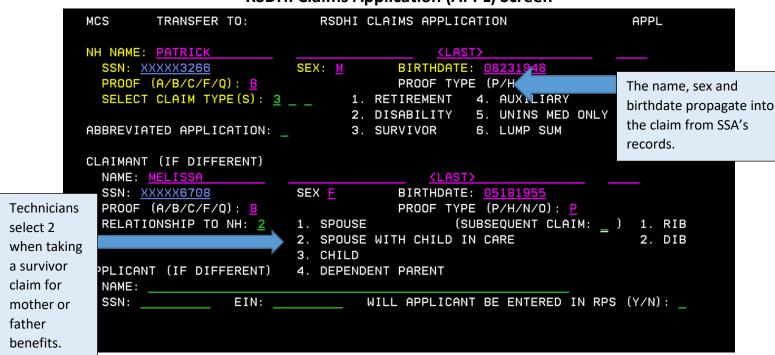
MCS System Menu (MENU)

```
MCS                          MCS SYSTEM MENU                          MENU

        NH SSN: _____        CL SSN: _____        FIELD OFFICE: L5M

        *SELECT: _        1=ESTABLISH     2=UPDATE     3=QUERY.

        *SELECT THE DESIRED FUNCTION: __
         1=PRE-INTERVIEW                 15=SSN CORRECTION
         2=FUTURE USE                    16=ONLINE TICKLE REQUEST
         3=NEW CLAIM                     17=ARCHIVAL RETRIEVAL
         4=CLAIM UPDATE/INQUIRY          18=INTERNET
         5=CLAIMS DEVELOPMENT            19=TOTALIZATION
         6=CLAIMS CLEARANCE              20=CLAIMANT DELETION
         7=CASE MOVEMENT                 21=EARNINGS COMP REQUEST
         8=SUSPENSION EVENTS             22=EARNINGS COMP DETERMINATION
         9=APPEALS                       23=DECISION INPUT
        10=FUTURE USE                    24=CASE QUERY
        11=FILING FOR SELF               25=NOTICE DISPLAY
        12=TICKLE REQUEST                26=PROCESS STATUS LIST
        13=GENERAL MESSAGE REQUEST       27=MANAGEMENT OVERRIDE
        14=INTERFACE                     28=AUTOMATED SSA-101.
      PF1 HELP AVAILABLE FOR SIGNATURE PROXY SCRIPT
```

To start a claim in MCS, technicians input the Number Holder's (NH) Social Security Number (SSN) and select "1=Establish" and function "3=New Claim" and the enter key. When technicians take a survivor claim, they must input the worker's SSN as the NH SSN and the SSN of the individual who is filing for the surivor benefits as the CL (claimant) SSN.

RSDHI Claims Application (APPL) Screen

```
MCS        TRANSFER TO:         RSDHI CLAIMS APPLICATION              APPL

NH NAME: PATRICK_____       _____  <LAST>_____  ____
   SSN: XXXXX3266          SEX: M       BIRTHDATE: 08231948
   PROOF (A/B/C/F/Q): B                 PROOF TYPE (P/H
   SELECT CLAIM TYPE(S): 3 _ _      1. RETIREMENT    4. AUXILIARY
                                    2. DISABILITY    5. UNINS MED ONLY
ABBREVIATED APPLICATION: _          3. SURVIVOR      6. LUMP SUM

CLAIMANT (IF DIFFERENT)
   NAME: MELISSA_____       _____  <LAST>_____  ____
   SSN: XXXXX6708          SEX F        BIRTHDATE: 05181955
   PROOF (A/B/C/F/Q): B                 PROOF TYPE (P/H/N/O): P
   RELATIONSHIP TO NH: 2    1. SPOUSE              (SUBSEQUENT CLAIM: _ )  1. RIB
                            2. SPOUSE WITH CHILD IN CARE             2. DIB
                            3. CHILD
PPLICANT (IF DIFFERENT)    4. DEPENDENT PARENT
   NAME: _____
   SSN: _____   EIN: _____   WILL APPLICANT BE ENTERED IN RPS (Y/N): _
```

The name, sex and birthdate propagate into the claim from SSA's records.

Technicians select 2 when taking a survivor claim for mother or father benefits.

The APPL Screen establishes the claim type and collects the application questions that identify the number holder (NH), claimant (CL) and applicant when different from the claimant. Technicians can select up to two claim types (retirement and disability) when filing for benefits that are based on their own earnings record. When filing for spouse's benefits, the technicians select #4 – AUXSPO.

Claims Contact Method Data (CCMD)

```
MCS                        CLAIM CONTACT METHOD DATA                    CCMD
NH: XXXXX3266 PATRI <LAST>              CL: XXXXX6708 MELIS <LAST>
SELECT CONTACT METHOD FOR ESTABLISHING APPLICATION
      *CLAIM TYPE: SURCIC  *CONTACT METHOD 1: __
       CLAIM TYPE:          CONTACT METHOD 2: __
       CLAIM TYPE:          CONTACT METHOD 3: __
 1=TELEPHONE -CLAIM INITIATED OVER THE PHONE, USUALLY BY APPOINTMENT
 2=VISIT -CLAIM INITIATED IN PERSON WITH THE CLAIMANT
 3=MAIL -RECEIVED PAPER APPLICATION IN THE MAIL AND LOADED IN MCS
 4=INTERNET -CLAIM STARTED AND COMPLETED ON THE INTERNET
 5=ICT -CLAIM ORIGINATED THROUGH 800 NUMBER AND REFERRED TO ICT UNIT
 6=OTHER -NO OTHER CM VALUE IS CURRENTLY APPROPRIATE.




 *DO YOU WANT TO CHECK YOUR CLAIM STATUS USING THE INTERNET/PHONE  (Y/N): _


 NOTICE OPTION: FIRST CLASS MAIL
 *ADD OR UPDATE NOTICE OPTION DUE TO VISUAL IMPAIRMENT (Y/N): _
 PF1 FOR HELP                                      TRANSFER TO: ____
```

The CCMD screen is mandatory in every Title II claims path. The claim types propagate onto the screen based on the claim type selected on the APPL screen (page 2). These are not application questions.

- Contact method for taking the application - this information is for Management Information purposes.
- Notice option - When claimants have a visual impairment, SSA can update their notice system to accommodate for special needs.   (Options include first class mail or first class mail with call, certified mail, braille, and data CD.)

Identification (IDEN) Screen

```
MCS                         IDENTIFICATION                           IDEN
    NH XXXXX3266   PATRI <LAST>S              CL XXXXX6708   MELIS <LAST>SS
LANGUAGE SPOKEN AND WRITTEN IS ENGLISH (Y/N): _
BIRTH CITY: ORLANDO_____        BIRTH STATE: FL        BIRTH COUNTRY: __
RECORD OF BIRTH BEFORE AGE 5         PUBLIC (Y/N): _      RELIGIOUS (Y/N): _
OTHER NAMES USED: _____ _____ _____ ____
                  _____ _____ _____ ____
                  _____ _____ _____ ____
                  _____ _____ _____ ____
                  _____                _____ ____
EVER MARRIED (Y/N): Y     CURRENTLY MARRIED (Y/N): _
CHILD UNDER 18, STUDENT 18 TO 19, 18 OR OLDER AND DISABLED BEFORE 22 (Y/N): _
WORK OR EARNINGS IN 2018   2019   2020   2021   (Y/N): _

DISABLED IN LAST 14 MONTHS (Y/N): _      ONSET DATE: _____
   IF YES, APPLYING FOR DISABILITY ON THIS ACCOUNT (Y/N): _
*SELECT FILED OR INTEND TO FILE FOR SSI: _
1=YES
2=NOT DISABLED, BLIND OR WITHIN 2 MONTHS OF AGE 65 OR OLDER
3=DOES NOT WISH TO FILE.
```

The IDEN screen records identifying information about a claimant. When the answer is "Yes" to:

- Ever Married, the Number Holder Marriage (NMAR) screen will come into the claim's path.
- Child under 18, Student 18-19, 18 or older and disabled before 22, the Children(s) (CHLD) screen comes into the claim's path.
- Work or Earnings in 2018 – 2021, the Work (WORK) screen comes into the claim's path.
- Disabled in last 14 months, the DISB screen comes into the claim's path.

Identification 2 (IDN2)

```
MCS                         IDENTIFICATION 2                          IDN2
    NH XXXXX3266   PATRI <LAST>              CL XXXXX6708   MELIS <LAST>

    *PRIOR APPLICATION FOR RSDI (Y/N): _ *FOR SSI (Y/N): _ *FOR MEDICARE (Y/N): _
    CROSS REFERENCE SSN: _____     STAT: __   SSN: _____     STAT: __
    [~NH NAME IN PRIOR APPLICATION
    [    FIRST NAME  MI  LAST NAME            SSN
    |
    |    _____  _  _____   _____
    |    _____  _  _____   _____
    MULTIPLE SSN: _____ _____ _____ _____ _____
```

The Identification 2 screen (IDN2) is a continuation of the IDEN screen. We are removing these questions from the application. Technicians will continue to complete these questions since MCS uses the responses during adjudication of the claim. Technicians will use system queries to obtain responses to these questions.

Additional Benefits (ADDB) Screen

```
MCS      TRANSFER TO:           ADDITIONAL BENEFITS                    ADDB
    NH XXXXX3266    PATRI    <LAST>      CL XXXXX6708    MELIS   <LAST>
 ACTIVE U.S. MILITARY/RESERVE/NATL GUARD SERVICE AFTER SEPT 7 1939 (Y/N): _
 WORKED IN RR FOR 5 YEARS OR MORE (Y/N): _
 RECEIVING RR RETIREMENT PENSION/ANNUITY (Y/N): _
 COVERED UNDER FOREIGN SSA (Y/N): _   COUNTRY: _____     IF COVERED,
 FILING FOR FOREIGN SSA (Y/N): _   REQ FOREIGN QC'S FOR U.S. FILING (Y/N): _


 CIVILIAN EMPLOYEE OF FEDERAL GOVT IN JAN 1983 (Y/N): _
 JAPANESE INTERNEE (Y/N): _    VOW OF POVERTY (Y/N): _


 QUALIFY FOR US FED/STATE/LOCAL GOVT PENSION BASED ON ANY WORK YOU PERFORMED
          WHICH WAS NOT COVERED UNDER SS (Y/N): _




 FILING FOR MEDICARE ONLY, RESTRICTING MONTHLY BENEFITS (Y/N): _
 WILL MEDICARE APPLY: _    1. YES  2. NO  3. ALREADY ENROLLED ON ANOTHER SSN

 IF CLAIMANT IS FILING AS A SURVIVING SPOUSE, IS CLAIMANT
    FILING FOR BENEFITS ON OWN RECORD (Y/N): _
```

This ADDB screen collects information that may affect the claimant's benefit payment.

NH Identification (NHID) Screen

```
MCS                          NH IDENTIFICATION                    NHID
    NH XXXXX3266   PATRI <LAST>            CL XXXXX6708   MELIS <LAST>

 EVER MARRIED (Y/N): Y
 CHILD UNDER 18, STUDENT 18 TO 19, 18 OR OLDER AND DISABLED BEFORE 22 (Y/N): _
 NH DEP PARENTS (Y/N): _

 WORK LAST YEAR OR THIS YEAR (Y/N): _
 PRIOR APPLICATION FOR RSDI (Y/N): _  FOR SSI (Y/N): _ FOR MEDICARE (Y/N): _
 CROSS REFERENCE    SSN: _____    STAT: __    SSN: _____   STAT: __
 NH NAME IN PRIOR APPLICATION: _____ _ _____ SSN: _____
 NH NAME IN PRIOR APPLICATION: _____ _ _____ SSN: _____

 MULTIPLE SSN: _____ _____ _____ _____ _____
 OTHER NAMES: _____ _____ _____ _____
              _____ _____ _____ _____
              _____ _____ _____ _____
              _____ _____ _____ _____
              _____ _____ _____ _____
              _____ _____ _____ _____
```

The NHID screen collects identification and claims lead information about a deceased NH. Data is either input to this screen or propagated from the Integrated Client Data Base. If propagated, the data may be over keyed

Information About the Deceased (DECD) Screen

```
MCS      TRANSFER TO:          INFORMATION ABOUT THE DECEASED            DECD
     NH XXXXX3266    PATRI  <LAST>        CL XXXXX6708    MELIS   <LAST>


DATE OF DEATH: _____       PROOF (P/N): _      TYPE OF PROOF (P/O): _
DOMICILE AT DEATH: _____
PLACE OF DEATH (CITY/STATE): _____

DISABLED AT TIME OF DEATH (Y/N): _        DISABILITY BEGAN: _____
WAS CLAIMANT ELIGIBLE AS WIDOW(ER) PRIOR TO 1985 ON ANY SSN (Y/N): _
```

The DECD screen collects information about the deceased number holder. The information will be used for claims leads and claims adjudication purposes.

NH Additional Benefits (NHAB) Screen

```
MCS      TRANSFER TO:           NH ADDITIONAL BENEFITS                  NHAB
    NH XXXXX3266    PATRI <LAST>           CL XXXXX6708    MELIS <LAST>

 ACTIVE U.S. MILITARY/RESERVE/NATL GUARD SERVICE AFTER SEPT 7 1939 (Y/N): _
 WORKED IN RR FOR 5 YEARS OR MORE (Y/N): _
 RECEIVING RR RETIREMENT PENSION/ANNUITY (Y/N): _
 COVERED UNDER FOREIGN SSA (Y/N): _    COUNTRY: _____  IF COVERED,
 FILING FOR FOREIGN SSA (Y/N): _   REQUIRES FOREIGN QC'S FOR US FILING (Y/N): _
 CIVILIAN EMPLOYEE OF FEDERAL GOVT IN JAN 1983 (Y/N): _
 JAPANESE INTERNEE (Y/N): _                    VOW OF POVERTY (Y/N): _
```

The NHAB screen collects information about a deceased NH's potential or actual entitlement to benefits from other sources.

NH Marriage (NMAR) Screen

```
MCS                           NH MARRIAGE                           NMAR
NH  XXXX56708   MELIS   <LAST>       CL  XXXX56708   MELIS <LAST>
*SPOUSE'S FIRST NAME: _____  MI: _  *LAST NAME: _____
SPOUSE'S SSN: _____
SPOUSE'S BIRTHDATE (MMDDYYYY): _____      IF BIRTHDATE UNKNOWN, AGE: ___
*MARRIAGE DATE (MMDDCCYY): _____     *PROOF (Y/N): _
 MARRIAGE CITY: _____        MARRIAGE STATE/FOREIGN COUNTRY: __
SELECT MARRIAGE TYPE: _    1=CLERGY/PUBLIC OFFICIAL
                          2=COMMON LAW
                          3=OTHER CEREMONIAL
                          4=DEEMED.
*MARRIAGE ENDED(Y/N): _   MARRIAGE END DATE (MMDDCCYY): _____   PROOF(Y/N): _
MARRIAGE ENDED CITY: _____    MARRIAGE ENDED STATE/FOREIGN COUNTRY: __
SELECT REASON: _    1=DEATH
                   2=DIVORCE
                   3=ANNULMENT OR VOIDABLE
                   4=PUTATIVE
                   5=VOID/VOIDED.

IF SPOUSE DECEASED, DATE OF DEATH (MMDDCCYY): _____
*OTHER MARRIAGES (Y/N): _                        DELETE SCREEN (Y/N): _
PAGE: 01                                         TRANSFER TO: ____
```

The NH Marriage (NMAR) screen is used to record information about a NH's marriages.

Dependent Children of NH (DEPC) Screen

```
MCS      TRANSFER TO:        DEPENDENT CHILDREN OF NH              DEPC
    NH XXXXX3266    PATRI <LAST>       CL XXXXX6708    MELIS <LAST>

    AP XXXXX6708    <FN MI LAST>

LIST ALL CHILDREN OF NH:      UNDER 18
                              18-19 AND ATTENDING SECONDARY SCHOOL
                              DISABLED/HANDICAPPED PRIOR TO 22

              NAME:
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
                   _____ - _____
```

The DEPC screen collects the names of the children that may be eligible for benefits on the NH's earnings record. This screen comes into the claims path when the technician enters "Y" for Dependent Children on the IDEN screen (pg. 4).

Earnings (EARN) Screen

```
MCS                                    EARNINGS                             EARN
    NH  XXXXX3266     PATRI <LAST>       CL   XXXXX6708    MELIS <LAST>


LIST ALL EARNINGS AND TYPES FOR  2019 2020 2021
EARNINGS TYPES ARE: 1=FICA WAGES    2=SEI  3=EMPLOYEE REPORTED TIPS  4=RR LAG.
PROOF CODES ARE: P=PROVEN  R=READILY AVAILABLE   N=NOT AVAILABLE   D=DELETED LAG.
[EARNINGS                  YEAR   TYPE   AMOUNT          PROOF
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
│                           _      _    _____       _
 COMPUTE BENEFITS AND COMPLETE CLAIM WITHOUT LAG EARNINGS (Y/N): _
```

Technicians complete the EARN screen with the NH's current and prior year's wages when they are not on the NH's earnings record and the wages or self-employment are needed for insured status coverage.

NH Military Service (NHMS) Screen

```
MCS                          NH MILITARY SERVICE                           NHMS
NH: XXXX23266 PATRI <LAST>                  CL: XXXXX6708 MELIS <LAST>
FIRST NAME USED IN SERVICE: _____  MI: _ LAST NAME: _____
SERVICE NO: _____
*RECEIVE OR ELIGIBLE FOR MIL OR CIV FEDERAL AGENCY BENEFIT (SELECT ONE): _
                 1=CIVILIAN  2=MILITARY  3=BOTH   4=NONE.
[ A/R   BRANCH OF SERVICE   START    END    N/E   RANK            PROOF
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
│   _   _____   _____  _____   _   _____   ____
```

The NHMS screen comes into the claim's path when the technician records "Y" to being in the military service on the ADDB screen (pg. 5). The data collected on this screen is used to record periods of active duty military service for 1957 through 1967 for deemed military wages (DMW), which may affect the NH's insured status (i.e., eligibility for benefits).

NH Military Retirement/Federal Benefit (NHMR)

```
MCS       TRANSFER TO:        NH MILITARY RETIREMENT/FEDERAL BENEFIT   NHMR
    NH XXXXX3266    PATRI   <LAST>       CL XXXXX6708   MELIS   <LAST> S


  IF RETIRED FROM MILITARY, BASIS OF RETIREMENT: _
    1. LENGTH OF SERVICE            3. RESERVE SERVICE PAYABLE AT AGE 60
    2. DISABILITY                   4. OTHER
       IF OPTION 4 CHOSEN, EXPLAIN: _____
  IF RETIRED AND SERVICE AFTER DEC 31, 1956, INDICATE BRANCH OF SERVICE PAYING
  BENEFIT: _    1. ARMY                5. COAST GUARD
              2. NAVY                  6. PUBLIC HEALTH SERVICE
              3. AIR FORCE             7. COASTAL/GEODETIC SURVEY
              4. MARINE CORPS          8. OTHER
       IF OPTION 8 CHOSEN, EXPLAIN: _____
    WAIVED ALL/PART OF RETIREMENT TO GET VA OR OTHER FED CREDIT (Y/N): _

  IF ELIGIBLE FOR CIVILIAN FEDERAL AGENCY BENEFITS, INDICATE BENEFIT TYPE: _
       1. SERVICE  2. SURVIVOR  3. DISABILITY  4. OTHER
       IF OPTION 4 CHOSEN, EXPLAIN: _____
    NAME OF FED AGENCY: _____
    YEARS EMPLOYED: __    DATE CLAIM FILED: _____   CLAIM NO.: _____
    MOST RECENT AGENCY: _____
     CITY: _____    STATE: __    LAST WORKED: _____
```

The NHMR screen comes into the claim's path when the technician records the claimant receives a military or civilian federal agency benefit on the NHMS screen (pg. 8)

NH Railroad Employment (NHRR) Screen

```
MCS       TRANSFER TO:        NH RAILROAD EMPLOYMENT                   NHRR
    NH XXXXX3266    PATRI <LAST>         CL XXXXX6708    MELIS <LAST>

RR EMPLOYEE: PATRICK___ _ <LAST>_____   SSN: XXXXX3266
  MONTHS WORKED IN RR AFTER 1936: ___ BEFORE 1937: ___   LAST 18 MOS (Y/N): _
  EVER FILE FOR RRB RET/DISAB (Y/N): _   IF YES, CLAIM NO: _____
  IF EMPLOYEE LIVING, REC'D RRB SICKNESS/UNEMPLOYMENT IN LAST 18 MOS (Y/N): _
  IF RRB EMPLOYEE DECEASED, SURVIVOR EVER RECEIVE RRB BENEFITS (Y/N): _
  EMPLOYEE WORK IN RR AFTER APPLYING FOR SOC SEC BENEFITS (Y/N): _

IF RR EMPLOYMENT IN LAST 18 MONTHS OR WORK AFTER FILING FOR SS BENEFITS:
  RR EMPLOYER: _____
  WORK LOCATION: _____
  DEPT OCCUPATION: _____
```

The NHRR screen comes into the claim's path when the technician records a "Y" for "Worked in the RR for 5 years or more on the NHAB screen, or "Receiving RR retirement pension/annuity on the ADDB screen (pg. 5).

Work Deductions/Election Option (DEME) Screen

```
MCS        TRANSFER TO: _____   WORK DEDUCTIONS/ELECTION OPTION          DEME
    NH   XXXXX3266    PATRI <LAST>       CL   XXXXX6708    MELIS <LAST>


  LIST TYPES, AMOUNTS, PRFS, AND NON-SERVICE MONTHS FOR 2019 2020 2021
      TYPES ARE: 1=WAGES  2=SEI  3=WAGES AND SEI    PRF: P=PERM
  NON-SERVICE MONTHS PLACE AN X UNDER ALL, NONE, OR EACH MONTH THAT APPLIES
 YEAR TYPE   AMOUNT      ALL NONE 01 02 03 04 05 06 07 08 09 10 11 12 PRF FY ENDS
   19   _   _____      _    _   _  _  _  _  _  _  _  _  _  _  _  _  __
   20   _   _____      _    _   _  _  _  _  _  _  _  _  _  _  _  _  __
   21   _   _____      _    _   _  _  _  _  _  _  _  _  _  _  _  _  __
 IF OVER THE MAX OR NONCOVERED EARNINGS INVOLVED, CORRECT THE ABOVE AMOUNTS
 SPECIAL PAYMENTS INVOLVED (Y/N): _    IF YES, CORRECT ABOVE
                        FOREIGN WORK SERVICE MONTHS
          (YY)    ALL   01 02 03 04 05 06 07 08 09 10 11 12

                  __     _   _  _  _  _  _  _  _  _  _  _  _  _
                  __     _   _  _  _  _  _  _  _  _  _  _  _  _
                  __     _   _  _  _  _  _  _  _  _  _  _  _  _
 ELECTION/ENTITLEMENT OPTION: A    DATE(MMYY): 1120
     A. MOST ADVANTAGEOUS MONTH         B. EARLIEST MONTH WITHOUT REDUCTION
     C. CLAIMANT'S CHOSEN MONTH         D. UNREDUCED CLAIMANT
     E. NOT APPLICABLE (DIB AUX SPOUSE WHO MEETS CRITERIA)
     F. OTHER: SPECIAL REASON
```

The DEME screen collects and uses the data provided on the upper portion of DEME screen to determine deductions under the Annual Earnings Test. The bottom portion is where the technician records the month the claimant wants to begin receiving benefits.

NH Dependent Parent (NPAR) Screen

```
MCS       TRANSFER TO:           NH DEPENDENT PARENT                      NPAR
   NH XXXXX3266    PATRI <LAST>                CL XXXXX6708    MELIS <LAST>


DEPENDENT PARENTS:
   NAME: _____ _ _____
   ADDRESS: _____ _____

            _____ _____
   PARENT TYPE: _         1. NATURAL   2. STEPPARENT   3. ADOPTIVE
        IF STEPPARENT, DATE OF STEP-RELATIONSHIP: _____
        IF ADOPTIVE PARENT, DATE OF ADOPTION: _____


   NAME: _____ _ _____
   ADDRESS: _____ _____

            _____ _____
   PARENT TYPE: _         1. NATURAL   2. STEPPARENT   3. ADOPTIVE
        IF STEPPARENT, DATE OF STEP-RELATIONSHIP: _____
        IF ADOPTIVE PARENT, DATE OF ADOPTION: _____
```

The NPAR screen collects information about a dependent parent(s) as a lead to a potential parent's claim.

Citizenship (US and/or Foreign) CLCZ Screen

```
COMM                 CITIZENSHIP (U S AND/OR FOREIGN)                    CLCZ
NH: XXXXX3266 PATRI <LAST>       BN: XXXXX6708 MELIS <LAST>              PIC:

  *COUNTRY/TERRITORY OF CITIZENSHIP: US

     SELECT U S TYPE IF CITIZENSHIP COUNTRY IS U S: _
     1=BIRTH IN U S  2=U S CITIZEN BORN OUTSIDE U S  3=NATURALIZATI

     SELECT U S PROOF IF CITIZENSHIP COUNTRY IS U S:
     1=ENUMERATION        4=DEVELOPMENT PENDING
     2=TITLE 2/18/16      5=NO PROOF
     3=FUTURE USE         6=PRESUMED - SYSTEMS GENERATED ONLY.
  *CITIZENSHIP START DATE (MMDDCCYY): 05181955

  CITIZENSHIP STOP DATE (MMDDCCYY): _____

  IS LAWFUL PRESENCE DATA NEEDED (Y/N): _


  ADD NEW OCCURRENCE (Y/N): N
```

For United States citizens, technicians complete these fields to document the claim.

When claimants are non-U.S. citizens, technicians complete this field to bring the Lawful Presence screen into the claims path.

The CLCZ screen collects the country of citizenship and documents evidence of U.S. citizenship or the need to document lawful presence. Information collected on this screen updates the Integrated Client Data Base Record/Person Information and is available for future claims and other application systems that request the claimant's mailing address.

Claimant Mailing Address (CADR) Screen

```
MCS                       CLAIMANT MAILING ADDRESS                      CADR
NH: XXXXX3266 PATRI <LAST>            CL: XXXXX6708 MELIS <LAST>



  *ADDRESS 1: 234 SECURITY BLVD.         ADDRESS 2: _____
   ADDRESS 3: _____ ADDRESS 4: _____
  *CITY: ANNAPOLIS                        STATE: MD        ZIP: 21401
   STATE & COUNTY CODE: _____            COUNTY: _____

   COUNTRY: _____                CONSULAR CODE: ___
   FOREIGN POSTAL ZONE: _____

  *BANK ACCOUNT (Y/N): _                 *DIRECT EXPRESS (Y/N): _

   DIRECT DEPOSIT ROUTING TRANSIT NUMBER: _____    ACCOUNT TYPE (C/S): _
   DEPOSITOR ACCOUNT NUMBER: _____

   DOMESTIC PHONE: _____            FOREIGN PHONE: _____
   ENTER PHONE CODE: 3   1=HOME    2=WORK    3=NONE     4=UNKNOWN
                         5=OTHER   6=ATTORNEY   7=MOBILE.
                                                    TRANSFER TO: ____
```
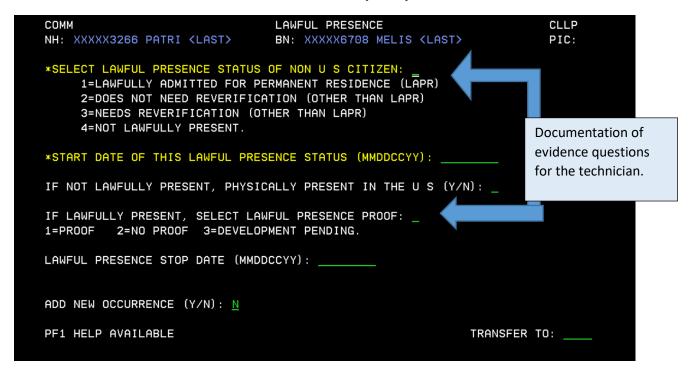
The CADR screen collects contact and payment information.   The address data entered on this screen updates the Integrated Client Data Base Record/Person Information and is available for future claims and other application systems that request the claimant's mailing address.

Client Address (CLAD) Screen

```
           TRANSFER TO:              CLIENT ADDRESS                        CLAD
                                   CL XXXXX6708      MELIS  <LAST>


     ADDRESS TYPE: PRINCIPAL DWELLING RESIDENCE




     ADDRESS: 234 SECURITY BLVD.        _____
     _____
        CITY: ANNAPOLIS           STATE: MD    ZIP: 21401

     STATE/COUNTY CODE: 21010    DISTRICT OFFICE CODE: 277

     FOREIGN COUNTRY: _____    FOREIGN POSTAL ZONE: _____
        CONSULAR CODE: ___   GEOGRAPHIC CODE: _____

      START      STOP      N/E
     (MMDDYY)  (MMDDYY)
      120720    _____      X



     NEW (Y/N): N    DELETE THIS PAGE (Y/N): N    EXIT CLAD (Y/N): N    01 OF 01
```

The CLAD screen collects the principal dwelling residence addresses that may or may not be the same as the mailing address.

Lawful Presence (CLLP) Screen

```
   COMM                         LAWFUL PRESENCE                    CLLP
   NH: XXXXX3266 PATRI <LAST>    BN: XXXXX6708 MELIS <LAST>        PIC:

   *SELECT LAWFUL PRESENCE STATUS OF NON U S CITIZEN: _
        1=LAWFULLY ADMITTED FOR PERMANENT RESIDENCE (LAPR)
        2=DOES NOT NEED REVERIFICATION (OTHER THAN LAPR)
        3=NEEDS REVERIFICATION (OTHER THAN LAPR)
        4=NOT LAWFULLY PRESENT.

   *START DATE OF THIS LAWFUL PRESENCE STATUS (MMDDCCYY): _____

   IF NOT LAWFULLY PRESENT, PHYSICALLY PRESENT IN THE U S (Y/N): _

   IF LAWFULLY PRESENT, SELECT LAWFUL PRESENCE PROOF: _
   1=PROOF   2=NO PROOF   3=DEVELOPMENT PENDING.

   LAWFUL PRESENCE STOP DATE (MMDDCCYY): _____


   ADD NEW OCCURRENCE (Y/N): N


   PF1 HELP AVAILABLE                          TRANSFER TO: ____
```

Documentation of evidence questions for the technician.

The CLLP screen comes into the claims path when technicians code "IS LAWFUL PRESENCE DATA NEEDED" as "Y" on the CLCZ screen (page 11). Technicians document the immigration status under one of the four categories and the status of development (e.g., proof, no proof, or development pending).

Beneficiary Marriage (BMAR) Screen

```
COMM                        BENEFICIARY MARRIAGE                        BMAR
NH: XXXXX3266 PATRI <LAST>        BN: XXXXX6708  MELIS <LAST>          PIC:


*SPOUSE'S FIRST NAME: _____   MIDDLE: _  *LAST: _____
SPOUSE'S SSN: _____
SPOUSE'S BIRTHDATE (MMDDCCYY): _____   IF BIRTHDATE UNKNOWN, AGE: ___
*MARRIAGE DATE (MMDDCCYY): _____   *PROOF (Y/N): _
MARRIAGE CITY: _____       MARRIAGE STATE/FOREIGN COUNTRY: __
*SELECT MARRIAGE TYPE: _   1=CLERGY/PUBLIC OFFICIAL  3=OTHER CEREMONIAL
                           2=COMMON LAW              4=DEEMED.
SELECT SPECIAL RELATIONSHIP: _   1=216B1  2=216F1  3=202C2  4=216K  5=216C2/G2.
PROTECTED MARRIAGE (Y/N): _
MARRIAGE END DATE (MMDDCCYY): _____      PROOF (Y/N): _
SELECT MARRIAGE END REASON: _
1=DEATH  2=DIVORCE  3=ANNULMENT OF VOIDABLE  4=PUTATIVE  5=VOID/VOIDED.
MARRIAGE ENDED CITY: _____   MARRIAGE ENDED STATE/FOREIGN COUNTRY: __
IF SPOUSE DECEASED, DATE OF DEATH (MMDDCCYY): _____
*OTHER MARRIAGES (Y/N): N

ADD NEW OCCURRENCE (Y/N): N

PF1 HELP AVAILABLE                                    TRANSFER TO: ____
```

The BMAR Screen comes into the claims path when filing for benefits on a spouse/widow(er)'s earnings record. The marriage data collected documents the entitlement factors for spouse/widow(er)'s benefits. Information collected on this screen updates the Integrated Client Data Base Record/Person Information and is available for future claims.

Dependent Child In Care (DCIC) Screen

```
                        DEPENDENT CHILD IN CARE                        DCIC
   NH: XXXXX3266 PATRI <LAST>        BN: XXXXX6708 MELIS <LAST>        PIC:

   CHILD OF N H UNDER AGE 16 OR DISABLED IN PAST 13 MONTHS OR SINCE N H DEATH

   *CHILD FIRST NAME: _____   MIDDLE: _  *LAST NAME: _____
   *S S N CHILD ENTITLED ON: _____    *PIC: __    CHILD BOAN: _____
   *MONTH CHILD IN CARE MET (MMCCYY): _____

   CHILD ENTITLED ON ANOTHER S S N, ENTER REASON, IF CHILD IN CARE ENDED: _
        1=CHILD ATTAINED AGE 16          4=CHILD MARRIED
        2=CHILD DECEASED                 5=CHILD TERMINATED/OTHER
        3=CHILD NO LONGER DISABLED.
   IF CHILD ENTITLED ON ANOTHER S S N, MONTH CHILD IN CARE ENDED (MMCCYY): _____


   REMARKS: _____


   ADD NEW OCCURRENCE (Y/N): N
```

The DCIC screen collects data for each child in the care of an auxiliary spouse or surviving spouse child-in-care beneficiary. The child in the beneficiary's care must be a child of the NH who is under age 16 or disabled and entitled to child's benefits. Data for each "in care" child is entered on separate DCIC screens.

CL Military Service (CLMS) Screen

```
MCS                        CL MILITARY SERVICE                        CLMS
NH: XXXXX3266 PATRI <LAST>                 CL: XXXXX6708 MELIS <LAST>
FIRST NAME USED IN SERVICE: _____    MI: _  LAST NAME: _____
SERVICE NO: _____
*RECEIVE OR ELIGIBLE FOR MIL OR CIV FEDERAL AGENCY BENEFIT (SELECT ONE): _
                1=CIVILIAN  2=MILITARY  3=BOTH  4=NONE.
[ A/R  BRANCH OF SERVICE   START    END    N/E  RANK            PROOF
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
|  _   _____   _____  _____  _   _____   ___
```

The CLMS one of two screens that asks for information about military service. The screen comes into the path when the technician enters "Y" to "In Active Military Service After Sept 7 1939" on the ADDB screen (pg. 5).

CL Military Retirement/Federal Benefit (CLMR) Screen

```
MCS      TRANSFER TO:        CL MILITARY RETIREMENT/FEDERAL BENEFIT   CLMR
     NH XXXXX3266   PATRI   <LAST>        CL XXXXX6708    MELIS    <LAST>

 IF RETIRED FROM MILITARY, BASIS OF RETIREMENT: _
  1. LENGTH OF SERVICE           3. RESERVE SERVICE PAYABLE AT AGE 60
  2. DISABILITY                  4. OTHER
     IF OPTION 4 CHOSEN, EXPLAIN: _____
 IF RETIRED AND SERVICE AFTER DEC 31, 1956, INDICATE BRANCH OF SERVICE PAYING
 BENEFIT: _    1. ARMY              5. COAST GUARD
              2. NAVY              6. PUBLIC HEALTH SERVICE
              3. AIR FORCE         7. COASTAL/GEODETIC SURVEY
              4. MARINE CORPS      8. OTHER
     IF OPTION 8 CHOSEN, EXPLAIN: _____
   WAIVED ALL/PART OF RETIREMENT TO GET VA OR OTHER FED CREDIT (Y/N): _

 IF ELIGIBLE FOR CIVILIAN FEDERAL AGENCY BENEFITS, INDICATE BENEFIT TYPE: _
     1. SERVICE  2. SURVIVOR  3. DISABILITY  4. OTHER
     IF OPTION 4 CHOSEN, EXPLAIN: _____
   NAME OF FED AGENCY: _____
   YEARS EMPLOYED: __    DATE CLAIM FILED: _____   CLAIM NO.: _____
   MOST RECENT AGENCY: _____
    CITY: _____    STATE: __   LAST WORKED: _____
```

The CLMR screen is a condition screen that comes into the claims path when the CLMS screen shows the claimant is receiving or eligible for a military or civilian benefit.

CL Railroad Employment (CLRR) Screen

```
MCS      TRANSFER TO:         CL RAILROAD EMPLOYMENT                  CLRR
    NH XXXXX3266    PATRI <LAST>          CL XXXXX6708    MELIS <LAST>

RR EMPLOYEE: MELISSA     EDWARDSS              SSN: XXXXX6708
   MONTHS WORKED IN RR AFTER 1936: ___  BEFORE 1937: ___   LAST 18 MOS (Y/N): _
   EVER FILE FOR RRB RET/DISAB (Y/N): _   IF YES, CLAIM NO: _____
   IF EMPLOYEE LIVING, REC'D RRB SICKNESS/UNEMPLOYMENT IN LAST 18 MOS (Y/N): _
   IF RRB EMPLOYEE DECEASED, SURVIVOR EVER RECEIVE RRB BENEFITS (Y/N): _
   EMPLOYEE WORK IN RR AFTER APPLYING FOR SOC SEC BENEFITS (Y/N): _

IF RR EMPLOYMENT IN LAST 18 MONTHS OR WORK AFTER FILING FOR SS BENEFITS:
   RR EMPLOYER: _____
   WORK LOCATION: _____
   DEPT OCCUPATION: _____

IF CLAIMANT EVER RECEIVED RRB BENEFITS:
   RR APPLICANT: MELISSA     EDWARDSS         CLAIM NO: _____
   RR EMPLOYEE NAME: _____ _ _____     SSN: _____
   RELATIONSHIP: _____
   BENEFIT TYPE: _ SELECT 1. MONTHLY   2. LUMP-SUM   3. RESIDUAL
   HAS RRB NOTIFIED APPLICANT THAT RRB MAY BE AFFECTED BY ENTITLEMENT TO
     SOCIAL SECURITY BENEFITS (Y/N): _
```

The CLRR screen comes into the path when the technician enters "Y" to either WORKED IN RR FOR 5 YEARS OR MORE or RECEIVING RR RETIREMENT PENSION/ANNUITY on Additional Benefits (ADDB).

SP Railroad Employment (SPRR) Screen

```
MCS      TRANSFER TO:         SP RAILROAD EMPLOYMENT                  SPRR
    NH XXXXX6708    MELIS <LAST>          CL XXXXX6708    MELIS <LAST>

RR EMPLOYEE: PATRICK     <LAST>              SSN: XXXX23266
   MONTHS WORKED IN RR AFTER 1936: ___  BEFORE 1937: ___   LAST 18 MOS (Y/N): _
   EVER FILE FOR RRB RET/DISAB (Y/N): _   IF YES, CLAIM NO: _____
   IF EMPLOYEE LIVING, REC'D RRB SICKNESS/UNEMPLOYMENT IN LAST 18 MOS (Y/N): _
   IF RRB EMPLOYEE DECEASED, SURVIVOR EVER RECEIVE RRB BENEFITS (Y/N): _
   EMPLOYEE WORK IN RR AFTER APPLYING FOR SOC SEC BENEFITS (Y/N): _

IF RR EMPLOYMENT IN LAST 18 MONTHS OR WORK AFTER FILING FOR SS BENEFITS:
   RR EMPLOYER: _____
   WORK LOCATION: _____
   DEPT OCCUPATION: _____
```

The SPRR screen comes into the path when the technician enters "Y" in WORKED IN RR FOR 5 YEARS OR MORE and "Y" in [3-C] SPOUSE on ADDB (pg. 5).

Government Pension (GPI1) Screen

```
COMM                         GOVERNMENT PENSION                         GPI1
                                    CL: XXX-XX-6708    MELIS<LAST> SS


*GOVERNMENT PENSION IDENTIFICATION NUMBER: _____
                                           _

*ENTER GOVERNMENT PENSION TYPE: _
   1=FEDERAL  2=STATE  3=LOCAL  4=MILITARY.

*IS THIS GOVERNMENT PENSION BASED ON ANOTHER PERSON'S EARNINGS (Y/N): N
*IS THIS GOVERNMENT PENSION BASED ONLY ON EMPLOYMENT COVERED UNDER SS (Y/N): N

 EARLIEST DATE ELIGIBLE FOR THIS PENSION (MMDDCCYY): _____   PROOF (Y/N): _

 PERIODIC PAYMENTS AWARDED (Y/N): _        LUMP SUM PAYMENT AWARDED (Y/N): _

 DATE PENSION AMOUNT WAS LAST VERIFIED (MMCCYY): _____

 FUTURE PENSION ENTITLEMENT DATE (MMCCYY): _____

 DELETE THIS GOVERNMENT PENSION (Y/N): N
```

The GPI1 screen comes up in the claim's path when the technician records a "Y" for "Qualify for US FED/State/Local Government Pension based on any work performed which was not covered under SS on the ADDB screen (pg. 5).

Government Pension-Address (GPI2)

```
COMM                      GOVERNMENT PENSION-ADDRESS                     GPI2
                                    CL: XXX-XX-6708    MELIS <LAST>

 PENSION IDENTIFICATION NUMBER: 12345           PENSION TYPE: FEDERAL

 EMPLOYER NAME: _____
                _
 ADDRESS 1: _____   ADDRESS 2: _____
 ADDRESS 3: _____   ADDRESS 4: _____
      CITY: _____       STATE: __    ZIP: _____
   CONTACT: _____       PHONE: _____   EXTENSION: ____
    E-MAIL: _____         FAX: _____

 PAYER NAME: _____
 ADDRESS 1: _____   ADDRESS 2: _____
 ADDRESS 3: _____   ADDRESS 4: _____
      CITY: _____       STATE: __    ZIP: _____
   CONTACT: _____       PHONE: _____   EXTENSION: ____
    E-MAIL: _____         FAX: _____

 PAYER PLAN STATE: __      PAYER PLAN NAME: _____

 PF1 HELP AVAILABLE                              TRANSFER TO: ____
```

The GPI2 screen comes into the claim's path when the technician records a "N" for "Is this government pension based on another person's earnings or only on employment covered under SS on the GPI1 screen. Technicians document the government employer and government pension payer information.

Government Pension Federal 1 (GPF1)

```
COMM                    GOVERNMENT PENSION FEDERAL 1                      GPF1
                                    CL: XXX-XX-6708    MELIS <LAST>


   PENSION IDENTIFICATION NUMBER: 12345            PENSION TYPE: FEDERAL




   *WAS ANY FEDERAL EMPLOYMENT COVERED UNDER SOCIAL SECURITY (Y/N): _
   *PROOF (Y/N): _

   SELECT THE REASON FOR COVERAGE UNDER SOCIAL SECURITY: _
     1=HIRED AFTER 12/31/83
     2=REHIRED AFTER 12/31/83 (AT LEAST 365 DAY BREAK)
     3=LEGISLATIVE EMPLOYEE WHO DISCONTINUED CSRS PARTICIPATION
     4=VOLUNTARY ELECTION.
   PROOF (Y/N): _

   WHAT IS THE 60TH MONTH OF EMPLOYMENT COVERED UNDER SS (MMCCYY): _____
   PROOF (Y/N): _

   PF1 HELP AVAILABLE                                   TRANSFER TO: ____
```

The GPF1 screen comes into the claim's path when the technician records a "N" for "Is this a government pension based on another person's earnings, and based only on employment covered under SS on the GPI1 screen (pg. 16).

Government Pension Periodic Payments (GPP1)

```
COMM                 GOVERNMENT PENSION PERIODIC PAYMENTS           GPP1
                                    CL: XXX-XX-6708    MELIS <LAST>

   PENSION IDENTIFICATION NUMBER: 12345         PENSION TYPE: FEDERAL

   [ *START (MMDDCCYY)   STOP (MMDDCCYY)    *AMOUNT       *FREQUENCY
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _
     _____          _____          _____      _

   NEXT EXPECTED PENSION INCREASE DATE (MMCCYY): _____
   MORE PERIODIC PAYMENTS (Y/N): N
   PF1 HELP AVAILABLE                                   TRANSFER TO: ____
```

The GPP1 screens comes into the claim's path when the technician records a "Y" for period payments on the GPI1 screen (pg. 16).

Remarks (RMKS) Screen

```
MCS        TRANSFER TO:       REMARKS SCREEN                    RMKS
   NH XXXXX3266    PATRI <LAST>       CL XXXXX6708    MELIS <LAST>

   _____
   _____
   _____
   _____
   _____
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   _____
   _____
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   _____
   _____
   _____
   _____
   _____

MORE (Y/N): _                                            PAGE 1
```

The RMKS screen is the last page of the claim's path. It collects information and/or explanations an applicant may provide when completing the application.