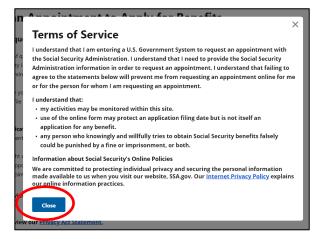
Important - The Third-Party Path follows the identical flow and screen description as the path for first-party users, except for an additional screen (screen # 8 part of this package). The additional screen requests contact information of the individual providing the information for the potential claimant. Individuals can distinguish these screens by looking at the message located at the top of the pages (e.g., "For the person you are assisting..."). Both the first and third party assistor paths are also available to mobile users.

Social Security	[→ EXIT
Request an Appointment to Apply for Benefits	
Answer a few questions to schedule an appointment	
We will ask a series of questions about you (or someone you are assisting) and schedule an appointment to apply for Supplemental Security Income (SSI) and other potential Social Security benefits. Answering the questions may take approximately 5-10 minutes.	
We may use the date you submit the information as the date of the application if you submit the information and keep the appointment to apply for benefits. It is important that you do not miss your appointment to avoid the loss of potential benefits.	
This is NOT an application for benefits. You must complete an application with SSA to receive a formal determination of eligibility or entitlement. Once you submit the information, we will schedule an appointment to complete the application.	
Please contact us right away if you are not available the date and time of the appointment we provide you or if you need to reschedule your appointment. Visit our <u>Frequently Asked Ouestions</u> to find out more about scheduling and rescheduling an appointment.	
Please read and review our <u>Terms of Service.</u>	
Start Exit	

Screen #1 - Welcome Page

This is the "Welcome Page" where individuals receive information about the process. We revised the headers of this tool to replace "File" with "Apply" as suggested by public comments received during the emergency OMB clearance. We also made the same changes within the pages based on the appropriate context of the statement.

Terms of Service (ToS) link



The ToS link informs individuals of various privacy and security aspects before the individual enters the Government information system. The ToS acknowledges that we may monitor activity within the online system. The pop-up message also provides a direct link to SSA's Internet Privacy

Policy that explains the agency's online information practices.

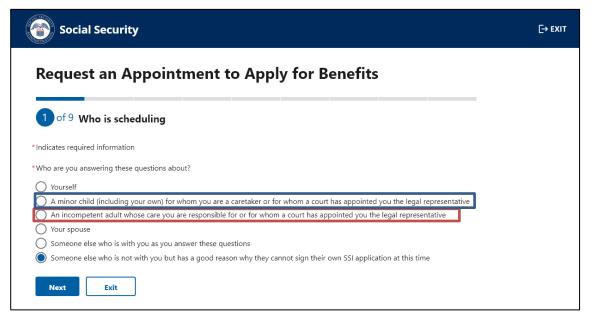
We removed the "Back" and "Exit" button options and replaced them with a single "Close" option at the bottom of this screen to simplify the screen as both options led to the same result: a return to the welcome page. Once individuals close the ToS pop-up message, they can select the "Start" button to proceed in the tool.

Social Security	[→ EXIT
Request an Appointment to Apply for Benefits	
Privacy Act Statement: Collection and Use of Information	
Sections 202, 205, 223, 226, 806, 1611(c), 1616, 1631(d) and (e), 1634(a), and 1837 of the Social Security Act, as amended, allow us to collect this information. Furnishing us this information is voluntary. However, failing to provide all or part of the information may prevent us from scheduling an appointment.	
We will use the information you submit to schedule an appointment to determine a potential claimant's eligibility for benefits. We may also share your information and the information you submit on behalf of a potential claimant for the following purposes, called routine uses:	
 To third party contacts (e.g., employers and private pension plans) in situations where the party to be contacted has, or is expected to have, information relating to the individual's capability to manage his or her benefits or payments, or his or her eligibility for or entitlement to benefits or eligibility for payments, under the Social Security program when: (a) The individual is unable to provide information being sought; OR (b) the data is necessary to establish the validity of evidence or to verify the accuracy of information presented by the individual; and 	
 To contractors, cooperative agreement awardees, State agencies, Federal agencies and Federal congressional support agencies for research and statistical activities that are designed to increase knowledge about present or alternative Social Security programs; are of importance to the Social Security program or the Social Security beneficiaries; or are for an epidemiological project that relates to the Social Security program or beneficiaries. We will disclose information under this routine use pursuant only to a written agreement with us. 	
In addition, we may share this information in accordance with the Privacy Act and other Federal laws. For example, where authorized, we may use and disclose this information in computer matching programs, in which our records are compared with other records to establish or verify a person's eligibility for Federal benefit programs and for repayment of incorrect or delinquent debts under these programs.	
A list of additional routine uses is available in our Privacy Act System of Records Notice (SORN) 60-0089, entitled Claims Folders System, as published in the Federal Register (FR) on October 31, 2019 at 84 FR 58422. Additional information, and a full listing of all of our SORNs, is available on our website at <u>www.ssa.gov/</u> privacy.	
Next Exit	

Screen #2 - Privacy Act (PA) Statement page

Due to 508 compliance issues, we converted the link for the PA Statement into a single page so mobile users can read and review it. The prior link included within the welcome page generated a pop-up message, which produced issues reports.

Screen #3 - Selecting path for users (Who is Scheduling)



We ask individuals to indicate who they are answering the questions about. If they select the "Yourself" option or the "Someone else who is with you as you answer these questions" option, individuals will continue on the path for "First-Party" users.

First Party user is an individual who can sign an application on their own behalf. If the individual selects any other option, the system presents the Assistor (Third-Party) path. Although individuals making the request for their child or for an incompetent adult whose care they are responsible for are considered "First-Party users" in some contexts because they might be able to sign the benefit application on the claimant's behalf, for the purpose of the description of this online tool, we include them on the "Third-Party Path" screen package as it follows the same pathing for questions and format.

Based on public comments submitted during the emergency OMB clearance, we revised this screen to separate "An incompetent adult whose care you are responsible for or for whom a court has appointed you the legal representative" into its own standalone radio button option.

<u>Note:</u> All fields with an asterisk (*) are mandatory fields and individuals must enter a response in order to proceed to the next screen. If an individual does not enter or select a response, the system provides an alert for individuals to take action and correct the information.

Screen #4 - Personal Information

2 of 9 Pers	onal Information			
Indicates required in				
For the person you	-		Suffix	
First name John	Middle name	*Last name Doe	Select one 🗢	
International Phone number 444-444-4444				
Mailing address Street address		Street addres	ss line 2	
123 Test St				
Street address line 3		Street addres	is line 4	
	State ZI	P Code		
lity	MD 🖨 🗌	21231		
City Baltimore	mb •			
-				
Baltimore		nfirmation electronically if an	email is provided below.	
-		nfirmation electronically if an	email is provided below.	

Individuals must provide their personal contact information (name, phone number, and mailing address) to submit their appointment request and receive an appointment confirmation via mail. If an individual voluntarily provides an email address, we will email the appointment confirmation as well. Based on a public comment about the contact information, we split the prior information message into two new informational messages to inform users about the importance of the information and why we are collecting a phone number, mailing address, and optional email address.

Individuals not entering the required information or selecting "Exit" receive the following alerts:

Please correc Error: First nam Error: Last nam Error: Phone nu Error: Mailing a	ie imber	information:	
Indicates required informatio First name Please enter a first name. Vour phone number and address where we can se address where we can se	Middle name	"Last name Please enter a last name. Vilected so we have a number to continu	Suffix Select one. •
*Phone type U.S. International *Phone number Please enter 10 digits (Exam	nple: 999-999-9999)		



Screen #5 - Date of Birth and #6 Social Security Number

Social Security	[→ EXIT
Request an Appointment to Apply for Benefits	
3 of 9 Date of Birth	
*Indicates required information	
For the person you are assisting	
* What is their date of birth? Example: 4 21 1975	
Month Day Year	
12 29 1966	
Next Previous Exit	
	-
Social Security	[→ EXIT
Social Security Request an Appointment to Apply for Benefits	[→ exit
Request an Appointment to Apply for Benefits	[→ EXIT
	[→ EXIT
Request an Appointment to Apply for Benefits	[→ ехіт
Request an Appointment to Apply for Benefits	[→ exit
Request an Appointment to Apply for Benefits of 9 Social Security Number Indicates required information For the person you are assisting *What is their Social Security Number (SSN)?	[→ EXIT
Request an Appointment to Apply for Benefits of 9 Social Security Number Indicates required information For the person you are assisting *What is their Social Security Number (SSN)? Example: 111-11-1111	[→ EXIT
Request an Appointment to Apply for Benefits of 9 Social Security Number Indicates required information For the person you are assisting *What is their Social Security Number (SSN)?	[→ EXIT
Request an Appointment to Apply for Benefits of 9 Social Security Number Indicates required information For the person you are assisting *What is their Social Security Number (SSN)? Example: 111-11-1111	[→ EXIT

Upon entering the personal contact information for the potential claimant who they are assisting and selecting ""Next," the individual is asked to provide the date of birth and Social Security number of the potential claimant. We require this information to establish the appointment under the correct record and to alert us if there are special internal indicators that need further evaluation.

Screen #7 - Disability Information

Social Security	[→ EXIT
Request an Appointment to Apply for Benefits	
5 of 9 Disability	
* Indicates required information	
For the person you are assisting	
* Do they have a physical or mental disabling condition that has lasted or can be expected to last at least 12 months or result in death? () Yes () No	
*Are they blind or do they have low vision even with glasses or contacts? Yes No	
*What date did the physical or mental disabling condition begin?	
• We know it can be hard to identify a specific date for many people. If you do not know the specific day but you know the month, you can enter the first day of the month. If you do not know the specific month, try to make your best guess based on your memory.	
Example: 4 21 1975 Month Day Year 4 21 1975	
There are several ways to receive information from us if they are blind or have a visual impairment. They can request special notice options at the conclusion of this request for an appointment.	
Next Previous Exit	

We request individuals to indicate if the person they are assisting has a disability or if they are blind. If they select "Yes" to the first question, the system presents a third question to provide us with an estimated date of when the condition began. This information, along with the date of birth, helps us to determine the type of appointment needed (e.g., aged, adult, or child appointment). In addition, we provide a message about the option to request special notices for those with a visual impairment.

Individuals selecting "No" to the first two questions receive the following alert advising them of the SSI eligibility requirements. The alert does not prevent individuals from continuing to request an appointment, as individuals are able to file an application to obtain a formal determination from SSA about whether they may be entitled to benefits.

	0	Please review your answers before clicking next. To be eligible for SSI benefits, you must be disabled, blind, or over the age of 65.
Ì	0	There are several ways to receive information from us if you are blind or have a visual impairment. You can request special notice options at the conclusion of this request for an appointment.
	Ne	xt Previous Exit

Screen #8 - Information about You (Parent/Spouse/Someone Else)

Social Se	ecurity			[→ EXI
Request a	an Appointr	nent to Appl	y for Benefits	
6 of 9 Your	^r Information			
*Indicates required inf	formation			
This is information a	about <u>you</u>			
*First name	Middle initial	*Last name	Suffix	
Robert	J	Doe	Select one 🗢	
*Phone type U.S. International				
*Phone number				
123-456-7890				
Email]			
thirdpartyhelper@r	mail.com			
 We will use y 	our email address to send	l you an appointment reque	st receipt.	
Next	evious Exit]		

This screen is to collect information about the third-party assistor using the tool. We request this information to contact the individual that requested the appointment (if needed), and evaluate if they are the parent or caretaker of a child or legal representative or caretaker of an incompetent adult. Their response helps us to determine to whom the mailed appointment confirmation notices should be addressed and who should attend the appointment (e.g., parent, legal guardian, etc.).

Screen #9 - Language Preference

Social Security Request an Appointment to Apply for Benefits	[→ EXIT
7 of 9 Language Preference	
* Indicates required information For the person you are assisting *What language do they prefer for speaking?	
English X V This is the language they will use to communicate with us at their appointment to apply for benefits. We can arrange for an interpreter at no cost to them.	
*What language do they prefer for reading?	
Next Previous Exit	

This screen provides a scroll down with 89 languages and an option for "other" for the individual to indicate their language preference. We request information about the language preference for both speaking and reading. We use the information about the speaking language preference to provide interpreters during the appointment interview. We use the information about reading language preference to provide reading materials (if available) about our programs and certain notices.

For consistency purposes throughout the tool, we revised the language in the informational message to explain to the user that the language selected helps us to communicate with them in the appointment to apply for benefits

Screen #10 - Special Circumstances

Social Security	[→ exi
Request an Appointment to Apply fo	or Benefits
8 of 9 Special Circumstances	
* Indicates required information	
For the person you are assisting	
*Select all life circumstances that apply to you This information will help us provide the best service for these special cases.	
Military casualty/Wounded Warrior	
Veterans Affairs 100% disability	
Homelessness	
Medical condition that is untreatable and expected to result in death	
Need sign language interpreter services	
Need visual accommodation (Notices in braille, data compact disc (CD), audio compact disc (CD), large print, follow-up telephone call)	
Recently released from a correctional institution	
None of the above	
Next Previous Exit	

This screen offers the option for individuals to choose from a list of special circumstances that may apply to them. We use this information to provide either expedited appointments or additional assistance as needed during the appointment interview.

Based on a public comment provided during the OMB emergency clearance, we added language to the "Need visual accommodation" checkbox to include a list of available options to the user.

Screen #11 - Review and Submit

Social Security	[+
equest an Appointment to Apply for Benefits	
of 9 Review and Submit	
nformation about who you are assisting —	
Are you answering these questions about yourself? No	
Who are you answering these questions about? Someone else	
First name John Middle name Albert Last name Doe Suffix No answer	
Phone Type U.S. Phone number 444-444-4444	
Mailing address Street address 123 Test 5t City Baltimos State MD Zip Code 21231	
Email johndoe@mail.com	
What is their Date of Birth? 07/26/1966	
What is their Social Security Number (SSN)? ***-*** Show SSN	
Do they have a physical or mental disabling condition that has lasted or can be expected to last at least 12 months or result in death? No	
Are they blind or do they have low vision even with glasses or contacts? $\ensuremath{\text{No}}$	
'our Information -	
First name Robert Middle initial J Last name Doe Suffix No answer	
Phone Type U.S. Phone number 123-456-7890 Email thirdpartyhelper@mail.com	
Appointment Information -	
What language do they prefer for speaking? English	
What language do they prefer for reading? English	
Select all life circumstances that apply to them None	
Electronic Signature Agreement Understand and agree that my request will be signed electronically when I select the check box below. I understand that my electronic signature has the same legal meaning, validity, and effect as my handwritten signature. I have provided the Social Security Administration with truthful and accurate information. I agree with the Electronic Signature Agreement above.	
You can select the "Previous" button below to go back and make changes if needed. If the information is correct, select the "Submit" button to complete the process and send all collected information to us.	
ubmit Previous Exit	

This screen provides the opportunity for the individual to review all the provided information prior to submission. If individuals need to correct any information, they can go back to the previous pages to edit the answers. Individuals receive the following alert if the electronic signature agreement box is not checked.

Select all life circumstances that apply to them None	
 Electronic Signature Agreement I understand and agree that my request will be signed electronically when I select the check box below. I understand that my electronic signature has the same legal meaning, walidity, and effect as my handwritten signature. I have provided the Social Security Administration with truthful and accurate information. Please click the Electronic Signature Agreement to continue. 	
*I agree with the Electronic Signature Agreement above.	
You can select the "Previous" button below to go back and make changes if needed. If the information is correct, select th "Submit" button to complete the process and send all collected information to us.	ie
Submit Previous Exit	

Screen #12 - Appointment Request Received

Social Security	[→ EXIT
Request an Appointment to Apply for Benefits	
Appointment Request Received	
What can I expect next?	
We will schedule an appointment for you to apply for SSI and any other benefits John Doe might be eligible to receive. We will send the date and time of the appointment in 7-14 business days to the address you provided for John Doe.	
What will happen at the appointment?	
We will help you figure out if John Doe is eligible for any benefits from Social Security, including SSI. Because our applications can be complicated, our goal is to use the meeting to help you understand and complete the application that applies to John Doe's situation.	
Is there anything else I should know?	
We can't make a determination until you submit an application for benefits. We want to make sure John Doe receives the most benefits possible. One of the ways we can help do that is by using today—MM DD YYY—as the application date. For us to do that, though, you need to submit a signed application by a certain date. For SSI, you must apply by MM2 DD2 YYYY2. For other Social Security benefits, you must apply by MM3 DD3 YYYY3.	
If any of these dates fall on a weekend or federal holiday, we must receive the signed application by the following business day.	
How can I prepare for my appointment?	
To help prepare for John Doe's appointment, you may use our <u>Child Disability Starter Kit</u> to get answers to commonly asked questions about applying for SSI. You may also complete the <u>Child Disability Report</u> online.	
Special notice options are available for people who are blind or visually impaired to receive notices and other communications from Social Security in formats other than standard print. You can request <u>Special Notice Options</u> that meet your needs.	
Print Exit	

After the individual submits the requested information, and the information passes certain internal checks, the system displays this screen to inform the individual that SSA has received the information. This screen also provides the specific date the individual submitted the appointment request and the dates that an application must be submitted by to avoid losing benefits.

For consistency within the tool and other related publications, we updated the language on this screen as follows:

- Replaced all occurrences of the word "file" with "apply" or "submit" based on the appropriate context of the statement.
- Added "other Social Security benefits" where applicable.
- Revised the last sentence on the screen to read "Special notice options are available for people who are blind or visually impaired to receive notices and other communications from Social Security in formats other than standard print. You can request Special Notice Options that meet your needs."
- Added the new section: "**How can I prepare for my appointment?**" to provide additional information about the medical portion of the process. The information on this section is dynamic and is displayed based on the information provided (e.g., date of birth, disabled, etc.).

Screen #13 - Alerts

If the information provided does not pass the internal checks, the system provides the following alert informing the individual that we cannot process the request and they can call us.



Our systems undergo daily maintenance during certain timeframes. During this "downtime," our systems may be interrupted and unavailable. Individuals trying to use the tool during the "downtime" will receive the message below.



Individuals attempting to use this online tool within 15 minutes of the "downtime" will receive the screen below to alert them about the system interruption.



Screen #13 – Alerts cont.

To improve the functionality of the tool, avoid duplicative efforts, and expedite the process for individuals requesting appointments, we updated the system to identify individuals already receiving benefits. Individuals already receiving benefits will receive an alert to contact us.



Screen #14 - Email Confirmation Messages

Subject: Online Appointment Request

The Social Security Administration has received your request for an appointment for John Doe. We will send the date and time of the appointment in 7-14 business days to the address you provided for John Doe.

If you are interested in applying for benefits on behalf of John Doe, we may use today—MM DD YYYY—as the application date, but only if you submit a signed application by a certain date. For Supplemental Security Income (SSI), you must apply by MM2 DD2 YYYY2. For other Social Security benefits, you must apply by MM3 DD3 YYYY3.

We are here to help. If you have questions about this message, please call us at 1-800-772-1213.

Please do not reply to this email, as we are unable to respond to messages sent to this address.

Once the information is transmitted to SSA, and if an email address was provided, third-party assistors will receive an email confirmation with the information shown above.

For consistency, we updated the language from "file" to "apply" or "submit" based on the appropriate context of the statement.

The system will also email (if an email address was provided) the potentially eligible individual to alert them of the appointment request. The email sample is shown below:

Subject: Online Appointment Request

The Social Security Administration has received a request for an appointment for you. You will receive the date and time of the appointment by mail and email in 7-14 business days.

If you are interested in applying for benefits, we may use today—MM DD YYYY—as the application date, but only if you submit a signed application at your appointment or by the dates we will provide if you do not apply on your appointment date.

We are here to help. If you have questions about this message, please call us at 1-800-772-1213.

Please do not reply to this email, as we are unable to respond to messages sent to this address.