MCS Screens RIB, SPOU, DIB

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 Retirement, Wife's or Husband's Insurance Benefits, and Disability Insurance Benefits.

This screen package includes the multiple MCS screens technicians may complete when taking an application for Retirement, Disability and Wife's or Husband's Insurance Benefits.

Menu Screen

To start a Retirement or Disability 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 claim for spouse's benefits, they input the worker's SSN as the NH SSN and the SSN of the individual who is filing for spouse's benefits as the CL (claimant) SSN.

```
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
```

MCS Screens RIB, SPOU, DIB
RSDHI Claims Application (APPL) Screen

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.

```
MCS      TRANSFER TO:        RSDHI CLAIMS APPLICATION            APPL

NH NAME: MELISSA                            <LAST>
   SSN: XXXXX6708        SEX: F     BIRTHDATE: 05181957
   PROOF (A/B/C/F/Q): _               PROOF TYPE (P/H/N/O): _
   SELECT CLAIM TYPE(S): _ _ _     1. RETIREMENT   4. AUXILIARY     7. AGE 72
                                   2. DISABILITY   5. UNINS MED ONLY  8. ESRD
ABBREVIATED APPLICATION: _         3. SURVIVOR     6. LUMP SUM

CLAIMANT (IF DIFFERENT)
   NAME: _____  _____  _____  ___
   SSN: _____      SEX _     BIRTHDATE: _____
   PROOF (A/B/C/F/Q): _            PROOF TYPE (P/H/N/O): _
   RELATIONSHIP TO NH: _   1. SPOUSE           (SUBSEQUENT CLAIM: _ )  1. RIB
                          2. SPOUSE WITH CHILD IN CARE              2. DIB
                          3. CHILD
 APPLICANT (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 the Numident record.

Technicians select 1 or 2 when taking a claim for spouse's benefits.

IDEN Screen

The IDEN screen records identifying information about a claimant

```
MCS                    IDENTIFICATION                    IDEN
   NH XXXXX6708   MELIS <LAST>SS      CL XXXXX6708   MELIS <LAST>SS
LANGUAGE SPOKEN AND WRITTEN IS ENGLISH (Y/N): Y
BIRTH CITY: _____   BIRTH STATE: __   BIRTH COUNTRY: __
RECORD OF BIRTH BEFORE AGE 5       PUBLIC (Y/N): _    RELIGIOUS (Y/N): _
OTHER NAMES USED: _____  _____  _____
                  _____  _____  _____
                  _____  _____  _____
                  _____  _____  _____

EVER MARRIED (Y/N): _      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.

                                     TRANSFER TO: ____
```

MCS Screens RIB, SPOU, DIB

Citizenship CLCZ Screen

The CLCZ screen collects the country of citizenship and documents evidence of U.S. citizenship or the need to document lawful presence

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

*COUNTRY/TERRITORY OF CITIZENSHIP: __

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

    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): _____

CITIZENSHIP STOP DATE (MMDDCCYY): _____

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


ADD NEW OCCURRENCE (Y/N): _

PF1 HELP AVAILABLE                               TRANSFER TO: ____
```

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

Additional Benefits (ADDB) Screen

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

```
MCS       TRANSFER TO:           ADDITIONAL BENEFITS                    ADDB
   NH XXXXX6708   MELIS    <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): _         SPOUSE (Y/N): _
RECEIVING RR RETIREMENT PENSION/ANNUITY (Y/N): _  SPOUSE (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): _
   SPOUSE COVERED UNDER SSA OF OTHER COUNTRY (Y/N): _     COUNTRY: _____
CIVILIAN EMPLOYEE OF FEDERAL GOVT IN JAN 1983 (Y/N): _     SPOUSE (Y/N): _
JAPANESE INTERNEE (Y/N): _    VOW OF POVERTY (Y/N): _


CURRENTLY ENTITLED TO A PENSION FROM WORK NOT COVERED UNDER SSA (Y/N): _
IF NO, DO YOU EXPECT TO BE ENTITLED TO A PENSION NOT COVERED UNDER SSA
IN THE FUTURE (Y/N): _   IF YES, SHOW FUTURE ENTITLEMENT DATE (MMYY): ____

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): _
```

MCS Screens RIB, SPOU, DIB

Number Holder (NH) Marriage (NMAR) Screen

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

```
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: ____
```

Beneficiary Marriage (BMAR) Screen

The BMAR Screen comes into the claims path when filing for spouse's benefits. The marriage data collected documents the factors of entitlement for spouse's benefits. Information collected on this screen will propagate to future Title II, XVIII or XVI claims that require documentation of a claimant's marriage.

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

MCS Screens RIB, SPOU, DIB

Dependent Children of NH (DEPC) Screen

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. 2).

```
MCS     TRANSFER TO:         DEPENDENT CHILDREN OF NH              DEPC
    NH XXXXX6708   MELIS <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:
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____
                     _____ _ _____

                                                        PAGE 1
```

Work History (WORK) Screen

The WORK screen records information about a NH's employment or self-employment. It comes into the claims path for a retirement and disability claim when the technician records "Y" to the Work or Earnings in YYYY question on IDEN screen (pg. 2).

```
MCS     TRANSFER TO:          WORK HISTORY                   WORK
    NH XXXXX6708   MELIS <LAST>        CL XXXXX6708   MELIS <LAST>

EMPLOYED IN  2018 2019 2020 2021 (Y/N): _       MMYY        MMYY
    EMPLOYER NAME & ADDRESS                  START DATE    END DATE   N/E
  1. _____
     _____   ____        ____      _
  2. _____
     _____   ____        ____      _
  3. _____
     _____   ____        ____      _


SELF-EMPLOYED IN  2018 2019 2020 2021 (Y/N): _
IF YES, SHOW: YEARS         TYPE OF BUSINESS           NET OVER $400(Y/N)
              __      _____                _
              __      _____                _
              __      _____                _

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

MCS Screens RIB, SPOU, DIB

Earnings (EARN) Screen

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.

```
MCS                              EARNINGS                           EARN
    NH  XXXXX6708    MELIS <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): _

                                                  TRANSFER TO: ____
```

Work Deductions/Election Option (DEME)

The DEME screen comes into the retirement and spouse's claim's path. MCS uses the data provided by the claimant 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.

```
MCS       TRANSFER TO: _____  WORK DEDUCTIONS/ELECTION OPTION       DEME
    NH  XXXXX6708    MELIS <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: _    DATE(MMYY): ____
    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
```

MCS Screens RIB, SPO, DIB

Claimant Mailing Address (CADR)

The CADR screen collects contact and payment information.

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



*ADDRESS 1: _____      ADDRESS 2: _____
 ADDRESS 3: _____      ADDRESS 4: _____
*CITY: _____           STATE: __      ZIP: _____
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: ____
```

Client Address (CLAD) Screen

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

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

ADDRESS TYPE: PRINCIPAL DWELLING RESIDENCE



ADDRESS: _____   _____
         _____   _____
   CITY: _____   STATE: __   ZIP: _____

STATE/COUNTY CODE: _____    DISTRICT OFFICE CODE: ___

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

START     STOP    N/E
(MMDDYY)  (MMDDYY)

_____   _____   =

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

MCS Screens RIB, SPO, DIB

Lawful Presence (CLLP) Screen

CLLP screen comes into the claims path when technicians code "IS LAWFUL PRESENCE DATA NEEDED" as "Y" on the CLCZ screen.

```
COMM                          LAWFUL PRESENCE                      CLLP
NH: XXXXX6708 MELIS <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.
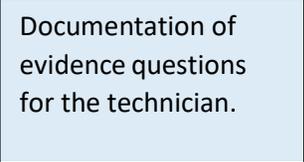
Health Insurance (HIHI) Screen

The HIHI screen comes into the retirement and spouse's claim path when the claimant is age 64 and 8 months. The screen collects the claimant's Supplemental Medical Insurance (SMI) enrollment decisions as well as information that supports enrollment periods and payment of premiums.

```
   TRANSFER TO: ____        HEALTH INSURANCE                    HIHI
NH XXXXX6708    MELIS <LAST>        CL XXXXX6708    MELIS <LAST>


 HI STATUS: NO HI DATA LOCATED
SMI STATUS: NO SMI DATA LOCATED
BIRTH DATE: 05181955  PROOF CODE: B
TYPE OF ACTION: -  SMI: _
             1. ENROLL
             2. REFUSE
                                    ELIGIBLE FOR MEDICAID (Y/N): N
ALLEGED MONTH OF MISINFORMATION BY SSA (MMYY): ____    CRIME VS. U.S. (Y/N): N

EQUITABLE RELIEF REQUESTED (Y/N): _     DEEMED IEP DOB (MMDDYYYY): _____
COVERED UNDER A GROUP HEALTH PLAN BASED ON EMPLOYMENT (Y/N): N
```

MCS Screens RIB, SPO, DIB

Remarks (RMKS) Screen

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.

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

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

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