

This instruction is for (Author **MUST** check one box):

A Sensitive Instruction (these instructions are **for internal SSA use only**).

A Non- Sensitive Instruction (these instructions are **viewable by the public**).

Identification Number: AM-26XXX SEN

Effective Date: TBD

Intended Audience: All Field Ops Direct Service/ADs/FOs/TSCs/WSU/FOSU/PSCs/OCO/OCO-CST/OHO

Originating Office: Centers for Medicare & Medicaid Services (CMS)

Title: Retiring the CMS-1957 form (previously HCFA-1957)

Type: AM – Administrative Message

Program: Medicaid and Medicare

Link to Reference: See [References](#) at the end of this AM.

Retention Date: 12/31/26

A. Purpose

This administrative message (AM) notifies SSA operational components and staff about the retirement of CMS-1957, SSO (Social Security Office) Report of State Buy-in Problem form.

B. Background

Currently, SSA field offices send the paper SSO report of state buy-in form (CMS-1957) to the state buy-in mailbox (statebuy-in@cms.hhs.gov) and CMS OIS (Office of Information Services) mailing address –

CMS, OIS,

Division of Exceptions Processing

Buy-in Workload

P.O. Box 11977

Baltimore, Maryland 21207

Effective April 1, 2026, CMS will no longer use the physical form CMS-1957. SSA staff should use the sample email format provided below to submit state buy-in problems to the designated email box – statebuy-in@cms.hhs.gov.

C. Instructions

To report state buy-in problems, please follow the sample email format below. This format replaces the retired CMS-1957 form and ensures all necessary information is captured for timely case processing.

1. **Send your report to:** statebuy-in@cms.hhs.gov

- **Use the subject line:** SSO REPORT OF STATE BUY-IN PROBLEM – (Beneficiary’s state of jurisdiction)

Example: SSO REPORT OF STATE BUY-IN PROBLEM – New York

2. **Complete all applicable sections:**

- **IDENTIFICATION:** Provide beneficiary information including name, SSN, and date of birth
- **ISSUE:** Provide a detailed description of the issue and request of CMS.
- **SSO Representative Information:** Include your contact details for follow-up

Double-check all beneficiary identifiers and dates before submitting, include any additional details, and supporting documentation that may help CMS resolve the issue efficiently. Allow 30 business days for processing. If the issue remains unresolved after 30 business days, please submit a follow-up request by replying to the original email with “DMSEI Director” added to the beginning of the existing subject line.

If you have questions related to the CMS-1957 form or need assistance with this process, please contact statebuy-in@cms.hhs.gov.

Sample Email Format for SSO State Buy-In Problem Reporting

To: statebuy-in@cms.hhs.gov

From: [SSO Representative Email Address]

Subject: SSO REPORT OF STATE BUY-IN PROBLEM - [Beneficiary’s state of residence]

Body:

Hello,

Ms. Doe contacted the field office regarding the status of her State Buy-In. She states that she should be receiving assistance with Medicare premium payments. Her letter is attached.

I checked the CMS record for the current State Buy-In Accretion period; there isn’t any current coverage information listed. Please advise if she is eligible so that we can update our records.

[Beneficiary name]

[SSN or HICN]

[Date of Birth]

SSO Representative Contact Information:

- **Name:** [Representative Name]
- **Title:** [Representative Title]
- **Contact Phone, if applicable:** [Phone Number]
- **Contact Email:** [Email Address]

Please review and advise on the appropriate resolution for this case.

Thank you,
[SSO Representative Name]

C. References:

[HI 00815.000](#) State Enrollment of Eligible Individuals (Table of Contents)

[HI 00815.036](#) State Response to Public Welfare (PW) Accretion

[HI DAL00815.073](#) Field Office (FO) Assistance to the Texas Health and Human Services Commission

[HI 00815.079](#) Reconciliation of SSI Master Record and the SID (Supplemental Income Data) Line on the MBR

[HI 00815.063](#) Systems Processing of State Responsibility Items

[HI 00815.082](#) Social Security Administration Field Office (FO) Procedures for Resolving Individual State Buy-In Problem Cases Due to Problem with SSR-MBR Interface

[HI 00815.085](#) SSA DO/BO Procedures for Resolving Individual Buy-In Problem Cases Not Involving SSR-MBR Interface

[HI 00815.088](#) Servicing DO/BO Processing of CMS-1957

[HI 00815.091](#) State Agency and Parallel DO Processing of CMS-1957

[HI 00815.094](#) CMS Central Office Procedures for Resolving Buy-In Problem Cases

[HI 00815.204](#) Form CMS-1957 (SSO Report of State Buy-In Problem)

[HI 00815.208](#) Buy-In Form for Railroad Annuitants - Sample

[HI 00930.005](#) Revised Form CMS-2178 U2 (HI/SMI Entitlement Problem Referral)

[HI 00930.080](#) Completion and Use of the CMS-2178-U2 (HIB/SMIB Entitlement Problem — Priority)

[OS 03512.200](#) Treasury Forms and/or Correspondence

[AO 12010.060](#) Health Insurance