

**Supporting Statement for
Continuation of Supplemental Security Income Payments for the Temporarily
Institutionalized – Certification of Period and Need to Maintain Home
20 CFR 416.212(b)(1)
OMB No. 0960-0516**

A. Justification

1. Introduction/Authoring Laws and Regulations

When Supplemental Security Income (SSI) recipients: (1) enter a public institution; or (2) enter a private medical treatment facility with Medicaid paying more than 50 percent of expenses, the Social Security Administration (SSA) reduces their SSI payments to a nominal sum. However, if the institutionalization is temporary (defined as a maximum of 3 months), SSA may waive the reduction. Per sections *1611(e)(1)(G)-(H) of the Social Security Act (Act)* and *Section 20 CFR 416.212(b)(1) of the Code of Federal Regulations*, SSA must receive the following documentation before it can waive the SSI payment reduction: (1) a physician must certify that the SSI recipient will only be institutionalized for a maximum of three months; and (2) the recipient or the recipient's representative payee must certify that the recipient needs SSI payments to maintain the living arrangements to which the individual will return post-institutionalization.

2. Description of Collection

SSA collects this information to determine whether institutionalized SSI recipients will remain in an institution or medical facility for no more than three months, and whether they continue to require SSI payments. As stated above, the information collection helps SSA establish both that the recipient is likely to be only institutionalized for a maximum of three months and that the recipient needs SSI payments to maintain the living arrangements to which the individual will return post-institutionalization.

SSA informs recipients in person and in writing during their initial claim, redeterminations, and case file updates that they are responsible for reporting any changes to their living arrangements. Respondents typically know to complete this form because they understand the requirements for reporting living arrangements as per the SSA technician's explanation during the initial claim process. When a recipient reports a change in living arrangements, such as temporary institutionalization, an SSA technician assesses the information the recipient provides to determine if temporary institutionalization (TI) benefits or other applicable services apply.

The TI benefit policy is a long-standing policy, and to help recipients better understand the policy, we maintain publications and conduct outreach to the public, hospitals, and institutions. Additionally, we developed the SSA-186 to further streamline information collection by allowing us to collect the doctor's and beneficiary's certifications on a single, simplified form. This reduces the time and confusion associated with complying with this information collection.

Historically, respondents contacted us via phone to initiate this information collection. In

addition, the recipient, the representative payee, the recipient family, or the case worker at the hospital also has the option of submitting the SSA-186. The SSA-186 allows individuals to notify SSA, request benefits, and obtain the physician's certification on one document. However, recipients also continue to have the option to notify SSA and submit a handwritten letter regarding "need" if the recipient does not wish to complete the form.

Furthermore, as required by *1611(e)(1)(J)* of the Act, SSA receives notification when a recipient is hospitalized through data-matching and sharing agreements. Specifically, Field Office staff receive monthly alerts through the Title XIX Facility Match, which sends the alerts directly to the beneficiaries' SSI Claims System file for further development. Upon receiving the alert, technicians contact the recipient, representative payee, or hospital staff to determine the recipient's situation. If temporary benefits apply, technicians assist the recipient in obtaining the necessary information. In addition, most hospitals or institutions employ social workers or case workers who help recipients complete the necessary steps to receive TI benefits.

TI rules require recipients to contact SSA before discharge to be eligible to apply for TI benefits, and recipients cannot apply for TI benefits retroactively after discharge. As documented in the above paragraphs, SSA believes that educational and outreach activities, along with the form, may help increase the number of TI recipients.

Recipients who apply for TI benefits include respondents who are both overpaid or not overpaid. Our data shows that recipients who reported overpayments also failed to report their institutionalization timely or did not meet the requirements for TI eligibility, such as not having some expenses that they needed to maintain; having a physician who expected them to remain institutionalized for over 90 days; or failing to submit the physician certification on time. In general, our records show that those who were not overpaid were the ones who either submitted all documentation on time, or were individuals for whom SSA denied TI benefits for one of the following reasons: (1) they filed on time, but did not qualify for TI benefits; they were in non-pay status at the time of application for TI benefits; or (2) they were in initial claim status and, at the time of filing for TI benefits were already in an institution. Through requesting to file TI benefits both timely and through use of the SSA-186, we have seen an overall reduction in both overpayments and denials of TI benefits.

As noted previously, when a respondent chooses to conduct this information collection without using the SSA-186 form, SSA continues to accept a certification or a copy of a certification that the recipient's physician has signed, attesting to the period of confinement. SSA also accepts a signed statement or verbal confirmation from the recipient, or from the representative payee acting on the recipient's behalf, about the need to maintain a home (the form asks the same questions that are on the SSI Claims System screens, which SSA staff would otherwise orally read to the respondent).

We identified the following psychological costs based on the requirements for this information collection:

Psychological Cost #1:

- **Requirement for Program:** The SSA Claims Specialist must receive certain reporting requirements, such as a physician's certification and home expenses statement by the recipient, to determine the SSI recipient is eligible for temporary institutionalization benefits.
- **Psychological Cost:** While we have not collected any data on the psychological costs associated with this information collection, our field office technicians observed that some recipients may experience anxiety related to SSI reporting requirements, including those affecting eligibility for temporary institutionalization benefits.

We understand these psychological costs may cause respondents to delay their completion of the information collection or cause them to abandon the information collection entirely. However, we require full completion of this collection to receive benefits. Therefore, we have taken this potential psychological cost into account when calculating our burden in #12 below.

The respondents are medical providers, and SSI recipients or their representative payees who are applying for TI benefits.

3. Use of Information Technology to Collect the Information

SSA created a fillable PDF version of this form for respondents to download, complete, print, and submit to SSA. Per our recent risk assessment, we are not currently able to include this form as a static, fillable PDF through our Upload Documents portal (OMB No. 0960-0830), as this form requires the signatures (or eSignatures) of two people: the SSI recipient or the recipient's payee, and the physician providing medical treatment to the recipient while the recipient is temporarily institutionalized. Since our current Upload Documents portal does not allow for multiple signatures on the same form, we cannot currently include it in a fillable format through the portal. Although the form does not currently allow for electronic signatures, respondents may print, sign, and then mail, hand-deliver, fax the form to a Field Office for SSA to receive it. We do not require wet signatures on the form.

Respondents who elect not to complete the SSA-186 must transmit the supporting certifications via mail, fax, or hand-delivery to a Field Office. SSA staff then scan and include the form, or documents provided by the recipient, in the SSI recipient's electronic folder by entering them through the in-office SSI Claims System Intranet screens.

This collection does not currently have a fully public-facing Internet version, as we prioritized other information collections for full electronic conversions. Given that information technology modernization (IT Mod) programming is an ongoing, dynamic project, we cannot provide specific timelines for when we will be able to make any information collection request (ICR) available via Internet web-based application. We will ultimately convert most existing ICRs to full electronic versions depending on how they fall within our overall IT Mod schema, but this may be unconnected to the

Paperwork Reduction Act (PRA) approval lifecycle.

We are working with the team developing the agency's mobile-accessible, online processes for completing and uploading forms and they expect to have functionality available to support several more forms in the next 3-6 years. Therefore, we intend to make this available online for electronic submission in 3-6 years, as soon as possible considering supporting functionality, prioritization, and resources. Once the electronic submission version of the form is ready for implementation, we will submit a Change Request to OMB for prior approval.

4. Why We Cannot Use Duplicate Information

The nature of the information we collect and the manner in which we collect it precludes duplication. SSA does not use another collection instrument to obtain similar data.

5. Minimizing Burden on Small Respondents

This collection does not affect small businesses or other small entities.

6. Consequence of Not Collecting Information or Collecting it Less Frequently

If SSA did not collect this information, we would have no means of confirming if institutionalized SSI recipient's payments should continue. In addition, this would not only be a violation of Sections *1611(e)(1)(G)-(H)* of the Act and Section *20 CFR 416.212(b)(1)* of the Code of Federal Regulations, but it can also lead to recipient's unfair receipt or unfair denial of SSI payments. Since SSA only requests this information on an as needed basis, we cannot collect it less frequently. There are no technical or legal obstacles to burden reduction.

7. Special Circumstances

There are no special circumstances that would cause SSA to conduct this information collection in a manner inconsistent with *5 CFR 1320.5*.

8. Solicitation of Public Comment and Other Consultations with the Public

The 60-day advance Federal Register Notice published on April 27, 2026, at 91 FR 22569, and we received no public comments. The 30-day FRN published on June 26, 2026, at 91 FR 38748. If we receive any comments in response to this Notice, we will forward them to OMB. We did not consult with the public in the development revision of this form.

9. Payment or Gifts to Respondents

SSA does not provide payments or gifts to the respondents.

10. Assurances of Confidentiality

SSA protects and holds confidential the information it collects in accordance with *42 U.S.C. 1306*, *20 CFR 401* and *402*, *5 U.S.C. 552* (Freedom of Information Act), *5 U.S.C. 552a* (Privacy Act of 1974), and OMB Circular No. A-130.

11. Justification for Sensitive Questions

As stated in #2 above, we ask some detailed questions about monthly earnings that some may perceive as invasive in nature to assess employees' eligibility for benefits or continued benefits under this program. As a result, this information collection may cause psychological costs related to collecting personal information, as discussed in #2 above. However, we must ask these questions to ensure we comply with the statute when issuing benefits to recipients.

12. Estimates of Public Reporting Burden

Please see the burden chart below:

Method of Completion	Number of Respondents	Frequency of Response	Average Burden Per Response (minutes)	Estimated Total Annual Burden (hours)	Average Theoretical Cost Amount (dollars)*	Average Wait Time in Field Office or Teleservice Centers (minutes)**	Total Annual Opportunity Cost (dollars)***
Statement from other Respondents	26,712	1	15	6,678	\$ 14.27*	48**	\$400,245***
Physician's Certifications	26,712	1	15	6,678	\$52.26*		\$348,992***
Totals	53,424			13,356			\$749,237***

* We based this figure on average disability payments based on SSA's current FY 2026 data ([Effect of COLA on Average Social Security Benefits](#)), and the average Health Practitioners and Technical Occupations hourly wages as reported by Bureau of Labor Statistics data ([Occupational Employment and Wage Statistics](#)).

** We based this figure on the average FY 2026 wait time for teleservice centers (48 minutes which includes the average speed of answer of 7 minutes as well as the average 41-minute wait time for a call back from an SSA technician), based on SSA's current management information data. This figure reflects both data from our systems and the data posted on our public facing website ([Social Security performance | SSA](#)) on the date we drafted this document. As the figures fluctuate daily, the wait times may be different on the website than they appear here. We continue to monitor our website and management information data on call back times to ensure we report updated figures when possible.

*** This figure does not represent actual costs that SSA is imposing on recipients of Social Security payments to complete this application; rather, these are theoretical opportunity costs for the additional time respondents will spend to complete the application. **There is no actual charge to respondents to complete the application.**

We did not include travel time as per our current management information data, respondents who complete the paper forms return them to us via [mail, fax or telephone interview. Should this change in the future, we will include the language and chart for travel time to a field office. There is a possible indirect travel burden to applicants/claimants if they bring the completed form to the field office; however, we receive very few of the forms in this manner, and, therefore, did not include a travel burden for the applicants.

We did not include a separate Learning Cost for this information collection, as we include the Learning Cost in the burdens listed in the chart above.

We base our burden estimates on current management information data, which includes data from actual interviews, as well as from years of conducting this information collection. Per our management information data, we believe that **15 minutes** accurately shows the average burden per response for reading the instructions, gathering the facts, and answering the questions. Based on our current management information data, the current burden information we provided is accurate. The total burden for this ICR is **13,356** burden hours (reflecting SSA management information data), which results in an associated theoretical (not actual) opportunity cost financial burden of **\$749,237**. SSA does not charge respondents to complete our applications.

13. Annual Cost to the Respondents (Other)

This collection does not impose a known cost burden on the respondents.

14. Annual Cost To Federal Government

The annual cost to the Federal Government is approximately **\$212,068**. This estimate accounts for costs from the following areas:

Description of Cost Factor	Methodology for Estimating Cost	Cost in Dollars*
Designing and Printing the Form	Design Cost + Printing Cost	\$0*
Distribution, Shipping, and Material Costs for the Form	Distribution + Shipping + Material Cost	\$0*
SSA Employee (e.g., field office, 800 number, DDS staff) Information Collection and Processing Time	GS-9 employee x # of responses x processing time	\$208,305
Full-Time Equivalent Costs	Out of pocket costs + Other expenses for providing this service	\$0*
Systems Development, Updating, and Maintenance	GS-9 employee x man hours for development, updating, maintenance	\$3,763
Quantifiable IT Costs	Any additional IT costs	\$0*
Total		\$212,068

* We have inserted a \$0 amount for cost factors that do not apply to this collection.

SSA is unable to break down the costs to the Federal government further than we already have. It is difficult for us to break down the cost for processing a single form, as field office staff often help respondents fill out several forms at once, and the time it takes to do so can vary greatly per respondent. Also, because so many employees have a hand in each aspect of our forms, we use an estimated average hourly wage, based on the wage of our average field office employee (GS-9) for these calculations. However, we have calculated these costs as accurately as possible based on the information we collect for creating, updating, and maintaining these information collections.

15. Program Changes or Adjustments to the Information Collection Request

When we cleared this ICR in 2023, the burden was 13,396 hours. However, we are currently reporting a burden of **13,356** hours. The decrease in burden is due to a decrease in the number of responses from 53,586 to 53,424. These figures represent current Management Information data.

*Note: The total burden reflected in ROCIS is **34,726**, while the burden cited in #12 of the Supporting Statement is **13,356**. This discrepancy is because the ROCIS burden reflects the telephone call system wait times. In contrast, the chart in #12 above reflects actual burden.

16. Plans for Publication Information Collection Results

SSA will not publish the results of the information collection.

17. Displaying the OMB Approval Expiration Date

OMB granted SSA an exemption from the requirement to print the OMB expiration date on its program forms. SSA produces millions of public-use forms with life cycles exceeding those of an OMB approval. Since SSA does not periodically revise and reprint its public-use forms (e.g., on an annual basis), OMB granted this exemption so SSA would not have to destroy stocks of otherwise useable forms with expired OMB approval dates, avoiding Government waste.

18. Exceptions to Certification Statement

SSA is not requesting an exception to the certification requirements at 5 *CFR* 1320.9 and related provisions at 5 *CFR* 1320.8(b)(3).

B. Collections of Information Employing Statistical Methods

SSA does not use statistical methods for this information collection.