Summary of Changes
This EM replaces all prior versions, and the latest publication date, February 8, 2021.
This update:

Revises Section D:

- Removes instructions that FOs should not send paper folders to the Office of Hearings Operations (OHO).

FOs should still review all disability paper cases to determine if they can be converted into certified electronic folders and send those cases electronically to OHO. If it is determined that the paper disability case cannot be converted into an electronic folder, the paper folder can be sent to the corresponding OHO hearing office. FOs will continue processing and sending non-medical appeals to OHO electronically, consistent with EM -21000 SEN REV 3.

All sections have been updated to reflect the resumption of workloads. All sites are encouraged to review and reinforce these instructions before resuming workloads.

A. Purpose
This message provides multiple updates regarding the resumption of workloads, case processing, and procedures during the Coronavirus Disease 2019 (COVID-19) pandemic.

This emergency message (EM) informs you of ongoing changes in workload processing due to the COVID-19 pandemic, and provides steps to ensure employees continue to serve the public while providing limited in-person service in Field Offices (FO). **NOTE:** Refer to updated EM 20019 SEN REV 3 containing instructions for state Disability Determinations Services, and federal disability case processing sites (e.g., DPB, DPU, etc.)

B. Background
Effective March 17, 2020 and continuing, SSA has taken steps to protect the public and our employees from the COVID-19 pandemic. These include ensuring the public understands SSA is open for business online, by telephone, and by mail with limited in-person services. It also includes encouraging the use of online and automated telephone services, and limiting in-person service in FOs. With limited exceptions, effective August 31, 2020, offices will resume workloads previously suspended, including processing overpayments and adverse actions that may result in a reduction, suspension or termination of benefits. Offices will continue to process work electronically to the maximum extent possible and in-office service will be by appointment only.

The resumption of normal workload processing for actions previously suspended between March 17, 2020, and August 31, 2020, may result in overpayments during the pandemic period. It is imperative that technicians follow case coding instructions below to ensure that overpayments incurred between March 1, 2020, and September 30, 2020, (the "pandemic period"), that resulted or were compounded by the suspension of certain workloads, and that we identify through December 31, 2020, qualify for the streamlined waiver process described in EM-20037 SEN REV 3.
The streamlined waiver process applies to overpayments that we identify through December 31, 2020 that are a result of actions we had initiated prior to August 30, 2020, and held between March 17, 2020, and August 30, 2020 and resulted in overpayments for the period of March 2020 through September 2020. Since March 17, 2020, these cases have been controlled locally using code 318 in the last three fields of the Unit Code on the development worksheet (DW01) or other workload control listing, or pending in the MHF EMGY location in the PCs.

For example, an RZ was initiated in January 2019, and held pending final adjudication on March 17, 2020. On August 31, 2020, offices resume processing and adjudicate an overpayment that includes a portion within the pandemic period discussed above. The portion of the overpayment incurred for the period from March 2020, through September 2020, meets all of the criteria for the streamlined COVID-19 overpayment waiver process described in EM-20037 SEN REV 3. It is critically important to code this case according to the Critical Case Coding instructions below to identify it as a qualifying COVID-19 overpayment at the point offices resume adjudication on August 31, 2020.

In contrast, a pending RZ that was not initiated prior to August 31, 2020, and not held because of the deferral of certain workloads during the pandemic period does not qualify for the streamlined overpayment waiver process. A routine case pending in backlog that was not manually held during the period March 17, 2020, through August 30, 2020, should not be coded using the instructions below because the overpayment was not caused, or compounded, by SSA’s decision to suspend processing adverse actions.

If the resumption of workloads causes an interruption or loss of healthcare coverage, refer customers to https://www.healthcare.gov/coronavirus/ for information regarding Marketplace coverage, Medicaid, and CHIP during the COVID-19 pandemic.

Encourage the public to use SSA’s Online Services and Automated Telephone Services before referring callers to the FO inquiry line available on the Field Office Locator website. Employees will also assist individuals with my Social Security account maintenance activities.

Individuals with a my Social Security account can complete the following actions online:

- Get a proof of income letter (Benefit Verification)
- Get a Social Security 1099 (SSA-1099)
- Check application status
- Change an address (beneficiaries)
- Set up or change direct deposit (beneficiaries)
- Request a replacement Social Security Card (with exceptions)
- Access Individual Representative Payee services
- Access the new Retirement Calculator
- Opt out of mailed notices for those available online

C. General Instructions

Offices should continue to follow procedures in GN 00410.000 Processing Claims and Payments in Disasters to the extent they are practicable during a widespread closure of SSA field offices and align with the guidance below. We will continue to update this message and supporting procedures as circumstances change.

CRITICAL CASE CODING INSTRUCTIONS

Overpayments Resulting from the Resumption of Workloads

Any overpayments resulting from the resumption of adverse actions previously held between March 17, 2020, and August 31, 2020, must be coded according to the instructions below. This coding is critical to identifying overpayments that qualify for the streamlined waiver process described in EM-20037 SEN REV 3.
• Input “CV19” in the CG field of the SSR for SSI cases
  
  For MSSICS cases, use the Miscellaneous Data Screen via the Claims Clearance Screen using the update selection (2+6 from MSSICS Main Menu).  
  For Non-MSSICS cases, complete a 1719B input; see SM 01005.525.

• Input “CV19” in the Special Message field of the MBR for Title II cases, see MS 06307.008.

NOTE: Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.

For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category; select the remark titled COVID-19 CV19 and select Send to PCOM.

For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen; select the remark titled COVID-19. Non-MSSICS cases-SPE1 Input and select Send to PCOM.

Disaster Coding
All claims filed during the period of limited in-person service should be identified by coding “318” in the last three fields of the UNIT CODE on the DW01, see GN 00410.010 B.2.

Title II Claims
For Title II claims, enter the disaster listing code of “499” on the MCS DECI screen.

D. Workloads that continue to be suspended during the COVID-19 Pandemic

1. Certain in-person replacement SSN cards, except in situations as provided under E.9.c., continue to be suspended due to limited in-office services.
2. SSI absence from the U.S. suspensions and Title II automated alien non-payment suspensions described in RS 02610.001 generated by the Left US RETAP selection.
3. Suspensions for failure to respond to the 2019 Foreign Enforcement Questionnaire (FEQ) remain on hold, and the 2020 FEQ mailer continues to be suspended due to international mail delays and suspensions resulting from the COVID-19 pandemic.

E. Special Handling- All Workloads

1. Resume Processing Overpayments and Adverse Actions  
   Effective March 17, 2020, offices suspended processing manual overpayments and adverse actions that would result in a reduction, suspension, or termination of benefits. Effective August 31, 2020 resume normal workload processing of these held actions.
   
   Held actions are controlled locally using code 318 in the last three fields of the Unit Code on the development worksheet (DW01) or other workload control listing, or pending in the MHF EMGY location in the PCs.
   
   To locate pending adverse actions, search office listings for code 318 in the last three fields of the UNIT CODE on the DW01. Review the claim and remarks to ensure proper documentation and proofs before adjudicating the open action.
   
   IMPORTANT: It is critically important when resuming normal workload processing that technicians code the Special Message field of the MBR, and the CG field of the SSR according to the instructions above.

• Input “CV19” in the CG field of the SSR for SSI cases
  
  For MSSICS cases, use the Miscellaneous Data Screen via the Claims Clearance Screen using the update selection (2+6 from MSSICS Main Menu).
For Non-MSSICS cases, complete a 1719B input (see SM 01005.525).

- Input “CV19” in the Special Message field of the MBR for Title II cases, see MS 06307.008.
  
  **NOTE:** Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.

  For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category, select the remark titled COVID-19 CV19 and select Send to PCOM.

  For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen, select the remark titled COVID-19. NON-MSSICS cases-SPE1 Input and select Send to PCOM.

2. Supplemental Security Income (SSI) and Medicaid

Continue to follow disaster procedures for obtaining evidence and verifying income and resources when conducting SSI Pre-effectuation Reviews. See GN 00410.010 C.5, and GN 00410.010 C.7-8.

Resume processing all redeterminations, limited issues, and standalone post-eligibility events according to normal instructions.

**IMPORTANT:** When adjudicating previously suspended adverse actions that result in an overpayment input “CV19” in the CG field of the SSR for SSI cases:

- For MSSICS cases, use the Miscellaneous Data Screen via the Claims Clearance Screen using the update selection (2+6 from MSSICS Main Menu).

  **NOTE:** Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.

  For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category, select the remark titled COVID-19 CV19 and select Send to PCOM.

  For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen, select the remark titled COVID-19. NON-MSSICS cases-SPE1 Input and select Send to PCOM.

a) Interim Assistance

SSA will continue to follow the 30-calendar day rule for States to submit an Interim Assistance Reimbursement (IAR) authorization per SI 02003.006.C and SI 02003.020.D. Systems may extend eIAR expiration dates for cases set to expire during the COVID-19 pandemic, as needed. Systems will continue monitoring eIAR cases approaching expiration.

**NOTE:** If the State agency requests additional time to process IAR cases, alert your Regional Contact for additional guidance. Technicians should follow SI 02003.000.

When the State is authorized to sign the PERC, we recognize the State or state employee acting on behalf of the State as the proper applicant for completing and signing the PERC. Follow the attestation procedure in GN 00201.015F and complete a Report of Contact (DROC) with the name of the State agency, the State employee’s name, title, and telephone number.

b) SSI Living Arrangements (LA) – RESUMPTION INSTRUCTIONS

PE Living Arrangements changes (LA)

Resume processing support and maintenance received in cash and in-kind (ISM), including the value of
one-third reduction (VTR) for all PE Living Arrangement changes with residence start dates beginning February 29, 2020 to the present. Follow existing LA instructions in SI 00835.001 through SI 00835.901.

- For any ISM or support and maintenance received in cash prior to and after February 29, 2020, remove the ISM exclusion.
- Continue following LA procedures due to displacement from a Presidential Declared Disaster (PDD) per criteria in SI 00830.620B.
- Follow instructions in SI 00835.050 and SI 00830.620, and process and document case(s) per SI 00835.050H, as follows:
  - Use “CVD” as the PDD code (use “CVDX” as the CG field PDD code).
  - Where the living arrangement change results in an overpayment, remember to input “CV19” in the CG field on the SSR.

**NOTE:** Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.

For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category, select the remark titled COVID-19 CV19 and select Send to PCOM.

For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen; select the remark titled COVID-19. Non-MSSICS cases-SPE1 Input and select Send to PCOM.

For unit code fields, technicians will use their individual 3-position unit code followed by 318 (e.g. XXX318) when completing any LA PDD actions, documentation, etc.

c) **Income and Resources – RESUMPTION INSTRUCTIONS**

Resume processing all income and resource changes according to normal instructions. Continue to follow instructions in EM-20014 SEN REV 3 for treatment of common types of disasters-related assistance due to COVID-19 pandemic.

**IMPORTANT:** When adjudicating previously suspended adverse actions that result in an overpayment Input “CV19” in the CG field of the SSR for SSI cases:

- For MSSICS cases, use the Miscellaneous Data Screen via the Claims Clearance Screen using the update selection (2+6 from MSSICS Main Menu).
- For Non-MSSICS cases, complete a 1719B input (see SM 01005.525).

**NOTE:** Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.

For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category, select the remark titled COVID-19 CV19 and select Send to PCOM.

For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen; select the remark titled COVID-19. Non-MSSICS cases-SPE1 Input and select Send to PCOM.

d) **Dedicated Accounts**

Process payments to dedicated accounts, and associated EA and IN diaries, under normal procedures in SI 01130.601, SM 01311.667, and GN 00602.140.

Do not apply alternative signature methods in GN 00201.015 to form SSA-6233.

A bank account is required by Section 1631(a)(2)(F) of the Social Security Act.
• There are no exceptions, even under disaster procedures, to release funds to an alternate account, or as a paper check.

• If a payee states they cannot establish a bank account due to limited access or services at financial institutions, the payee must wait until they can open an account with the proper titling to receive Dedicated Account funds.

SSA-552 Dedicated Account Use of Funds Statement

This form must have a wet signature, except for the emergency exception described below. Field offices may mail or fax the form for signature.

Read the form in its entirety to the payee prior to attesting and store a copy in the Electronic Folder. Mail a copy of the attested form to the payee for their records and inform them that they must still return a signed SSA-552, when possible. Form SSA-552, with a wet signature, must be in file for any other payments to the dedicated account.

Document this conversation on the DROC screen in MSSICS, or SSA-5002 faxed to the Electronic Folder, if MSSICS is unavailable.

Use of Dedicated Account Funds GN 00602.140

There are no changes to the use of funds in a dedicated account under this EM. Loss of income for one or more deemors in the household is not automatically a permissible use of dedicated account funds.

• The emergency exception in GN 00602.140B allows use of dedicated account funds to prevent the child from becoming homeless or malnourished.

• Any special requests for use of funds from, or for additional funds to be released to the dedicated account during the COVID-19 disaster, procedures must still meet the criteria in GN 00602.140B.

• Document the request on a DROC in MSSICS (or SSA-5002 if MSSICS is unavailable) and inform the payee of their record keeping responsibilities and annual accounting requirements.

• Provide the payee with a notice of determination with appeal rights when allowing or denying a request for release of funds. Requests to use funds from, or for additional funds to be released to the dedicated account should be handled promptly.

3. Direct Deposit Changes

a) Direct Express Card Changes:

- Comerica has ceased referring Direct Express (DE) cardholders to their local FO for assistance with DE related matters during the pandemic unless it is determined to be dire need.

- If the Direct Express cardholder or his or her representative payee requests to change or cancel Direct Express, the technician must first verify the identity of the beneficiary or recipient.

- The technician should use only open-ended questions when talking to the cardholder, as well as, be aware not disclose any identifying information to the caller or provide any assistance or coaching in answering questions. Before processing a Direct Express account change or cancellation, please request the following information from the caller:

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Lastly, if the caller alleges fraud, such as an unauthorized change to the record, see GN 04110.010B. If the reporter alleges direct deposit fraud, or wants to place a Direct Deposit (Auto-Enrollment) Fraud Prevention (DDFP) block on his or her title II or title XVI record, verify the identity of the reporter, see GN 02402.023, GN 03380.005B.1., and GN 03380.005B.2.

b) Changes to the Direct Deposit Fraud Prevention (DDFP) Block:
   When beneficiaries, recipients and representative payees call to request or change the DDFP block, follow guidance in GN 02402.023. After the interview:
   - the TSC manager will send the request to the servicing FO email box including “COVID-19 Emergency - Management Action- N8NN DDFP Block Request” in the subject line.
   - the FO manager will assign it to the FO technician to complete the input,
prepare and upload the SSA-5002 into Claims File User Interface (CFUI). The SSA-5002 must include a statement to identify the action as, “DDFP Change Requested during COVID-19 Emergency”

4. Non-receipt Requests and Emergency Payments
Process according to GN 00410.020 Processing Payment Actions in Disasters and evaluate each situation to determine the appropriate payment type.

**IMPORTANT:** Offices should limit Immediate Payments (IPs) to dire need situations only as they require in-office appointments in the FO. In addition, offices should not print and mail Third Party Drafts. Follow instructions for processing CPS payments in Title II Critical Case/Title XVI Financial Emergency TC 15001.010.

**NOTE:** International mail delays and suspensions are ongoing at this time. Please check https://about.usps.com/newsroom/service-alerts/ for a list of affected countries. **Non-receipt of checks should not be processed for beneficiaries in these countries;** instead, please refer inquirers to their Federal Benefits Unit (FBU) to enroll in International Direct Deposit (IDD) or Correspondent Direct Deposit (CDD) https://www.ssa.gov/foreign/foreign.htm.

5. Medicare
a) Part B Supplemental Medical Insurance (SMI) Processing:
Effective May 26, 2020, Part B SMI applicants enrolling during a special enrollment period (SEP) have the option to apply online or by fax. Please refer to AM 20023 SEN REV and OB 20-012 SEN REV for descriptions of the new fax and online options available.

Offices will continue to accept the CMS-40B (Application for Medicare Part B Medical Insurance) and the CMS-L564 (Request for Employment Information), including those from International Volunteers, **without a wet signature.** However, the online option will require beneficiaries to provide an eSignature (digital signature) and a valid email address.

If the beneficiary is unable to obtain evidence from the employer, group health plan (GHP) or large group health plan (LGHP), refer to HI 00805.295 and HI 00805.355 for alternative documentation.

**IMPORTANT:** If a beneficiary is unable to mail the CMS application or evidence via mail, accept copies via fax and prioritize processing.

b) Medicare Premium Issues
Refer customers to https://www.healthcare.gov/coronavirus/ for more information regarding healthcare coverage during the coronavirus pandemic, including Marketplace coverage, Medicaid, and CHIP.

Additional information and what actions beneficiaries should take is available on CMS’ website:

- Marketplace Coverage & Coronavirus (https://www.healthcare.gov/coronavirus/)
- Enrollment Issues for COVID-19 Pandemic-Related National Emergency Questions and Answers for Medicare Beneficiaries

6. Representative Payee WORKLOADS
a) Representative Payee Applications
Suspend requirements for in-person interviews for representative payee applicants and follow enhanced telephone authentication procedures explained in GN 00203.020

b) Capability Interviews
Due to limited in-office appointments, please follow GN 00502.030 for developing other lay evidence in lieu of a face-to-face interview and GN 00502.113 for guidance in conducting the interview by telephone.

c) Monitoring conducted by State Protection and Advocacy (P&A) grantees
P&A reviewers resumed conducting all types of payee monitoring reviews starting August 3, 2020. P&As conduct onsite reviews when State and local conditions allow, and all parties involved in the review are comfortable with in-person interactions.

The P&As conduct reviews via telephone or video when State or local conditions do not allow for in-person interactions or any party involved in the review is uncomfortable with in-person interactions.

Continue to follow GN 00605.662 to verify the legitimacy of P&A grantees when a payee or beneficiary questions the legitimacy of a P&A reviewer.

RO staff and payee cadre members may continue to work on P&A conducted payee reviews and develop misuse investigations.
7. SSI Redeterminations (RZ), Limited Issues (LI) – RESUMPTION INSTRUCTIONS
Resume processing all redeterminations, limited issues, and standalone post-eligibility events according to normal instructions. Follow guidance in SI 02305.001, SI 02305.015, and SI 04070.040 when adjudicating RZs and LIs.
Continue to process RZs/LIs for Medicaid eligibility and 1619B actions according to instructions in SI 02302.030 and SI 02302.040 based on the Medicaid Use test and alleged earnings to ensure healthcare coverage.

For HEP profile M or E cases requiring a start date due to the SSR’s computation history (CMPH) segment capacity completing the RZ is the preferred method of start dating the SSR (see EM 20021 SEN REV for more information on SSRs with the CMPH segment reaching capacity). However, in the event the SSR cannot be start dated prior to the auto-termination date please use the workaround in EM 20021 SEN REV.

IMPORTANT: When adjudicating previously suspended adverse actions that result in an overpayment
Input “CV19” in the CG field of the SSR for SSI cases:
  - For MSSICS cases, use the Miscellaneous Data Screen via the Claims Clearance Screen using the update selection (2+6 from MSSICS Main Menu).
  - For Non-MSSICS cases, complete a 1719B input (see SM 01005.525).

NOTE: Use the Remarks Tool (RMKS) in the OQA Toolbar in PCOM to load this code.
  For Title II cases: on the SMS1 screen in MONET, select an open message field. In the RMKS tool, select the PCOM Remarks category, select the remark titled COVID-19 CV19 and select Send to PCOM.
  For Title XVI cases: For MSSICS cases-on the CMSC screen, in the CASE RELATED DATA field in MSSICS, select the remark titled COVID-19 CV19 and select Send to PCOM. For non-MSSICS cases, navigate to the SPE1 screen; select the remark titled COVID-19. Non-MSSICS cases-SPE1 Input and select Send to PCOM.

8. Continuing Disability Reviews (CDR) and Expedited Reinstatement (EXR)
a) Work CDRs -- Resume processing all Work CDRs. Earlier instructions were to identify cases held for adverse actions with an issue of “COVD19” on the eWork development worksheet. Technicians should receipt in the COVID19 tickle once the review is completed in eWork. Use the eWork MI application to assist in identifying cases. Resume normal DECEFFECT procedures per the Handling eWork’s DECEFFECT Tickle Guide.

Note to FOs: For POS exceptions, follow the DECEFFECT process when making follow-ups.

DECEFFECTs involving suspension or termination in the months of March to September 2020:
FO technicians and DEs will take the following actions:
  - If more than 2 months have passed since the eWork effectuation, review the record to see if there is evidence that substantial gainful activity (SGA) has stopped.
  - If evidence suggests SGA continues, document the evidence and determination in the remarks of the eWork development worksheet. Follow-up on the DECEFFECT per regular procedures
  - If evidence suggests SGA has ended
    - Make phone attempt to obtain a statement from the claimant. If the attempt is successful:
b) Medical CDRs – Resume processing Medical Continuing Disability Reviews per EM-20019 SEN REV 3, including CDR cessations. FOs can resume sending paper-folders with a prior Comparison Point Decision (CPD).

**NOTE:** Medical CDR cessation appeal affirmations are automated to the MBR and SSR. Upon receipt of the EDCS action, FOs must determine if statutory benefits were paid in any month between March 2020 and September 2020. If so, technicians must add a special message of “CV19” to the MBR and/or SSR. The SSR must also contain a special code in the CG field of the SSR (CV19) (See EM 20037 SEN REV)

c) Expedited Reinstatement – Resume processing EXRs according to the attached instructions. Technicians will process all continuances and cessations. EXRs will be processed via paper, similar to normal processing.

Continue to intake EXRs utilizing the alternative signature instructions outlined in the attachment below.

Continue to issue continuous critical payments (CPS) for Title II claimants and continuous Force Due Payments for Title XVI claimants who allege dire need for benefit continuation beyond the 6-month provisional benefit period. These payments will be made until a determination is effectuated or the claimant requests the benefits stop.

Per HI 00801.165, if the provisional benefit period ends because an individual received cash payments for six months, but a decision has not been made regarding whether he or she meets the disability criteria for reinstatement of benefits, Medicare coverage will end the last day of the last month of the provisional benefit period except in the following situations:

- The individual is still in the extended period of Medicare, or
- The individual is entitled to Medicare on the basis of age or ESRD, or
- The individual has requested reinstatement of Medicare under the Premium-HI for the Working...
Disabled provisions.
For inquiries on Medicare and the Provisional Period, see HI 00801.164.

NOTE: If DDS issues a cessation, FOs and PCs should determine if CPS payments were made for any month from March 2020 to September 2020. If so, add a special message of “CV19” to the MBR and/or SSR. The SSR must also contain a special code in the CG field of the SSR (CV19) (See EM 20037 SEN REV 3)
For associated procedures, refer to the embedded document titled, Instructions to Resume Processing EXRs

Instructions to Resume Processing EXRs.docx

d) Non-disability hearings resumed and separate instruction have been provided. See EM-21000 SEN REV 3.
e) Overpayment reconsiderations, waiver requests and personal conferences, EM-20037 SEN REV 3.

9. Enumeration (SSN) Workloads
Existing automated enumeration processes including Enumeration at Birth (EAB), Enumeration at Entry (EAE), and Enumeration Beyond Entry (EBE) will continue to be available. Online services for SSN replacement (iSSNRC) cards will also be available for eligible individuals.

a) SSN VERIFICATION (NUMI-LITE):

Individuals who cannot use the online iSSNRC application may request an SSN printout (Numi-lite) by phone, fax, or mail. The SSN Printout is a paper printout that displays the name of an individual and the SSN that we assigned to that individual. Explain to the requestor the SSN printout is not official verification of the SSN, the SSN card is the only official verification of the SSN, and the SSN printout has the same information as the SSN card, but has none of the security features. Procedures in GN 03340.015 C.2 and C.3 provide guidance for verifying the identity of individuals making an access request to the record by telephone and mail requests. Per RM 10225.005 stamp the FO address on the SSN Printout and sign the document before providing it to the applicant. The SSN printouts can be mailed to the individuals address. Standard fees described in EM-14057 SEN REV for providing the SSN printout will be waived during the COVID-19 pandemic.

When parents do not know the SSN of their children, we recommend reminding parents of other sources that may have this information. It is very likely the SSNs of their children would appear on prior year tax forms, medical records, housing records, insurance records, welfare records, and school records. If the parents state they have no other way to obtain the SSN, they should file for a replacement card for the child by submitting a completed paper SS-5 and provide all required evidence by mail.

Per RM 10205.085 if an SS-5 is submitted, but ITEM 2 is blank and question 11 is YES, we should attempt to locate the SSN with an alpha query. If we locate the SSN, treat the application as a request for a replacement card and annotate “SSN-FO write-in” on remarks on the summary screen.

If a parent requests a SSN printout, verify the parent’s information as well as the child’s information. Ensure that the requesting parent is listed as the parent on the child’s NUMIDENT. We are not permitted to provide a SSN over the phone, even to a parent.

Number Holder’s (NH) who contact SSA and request their own SSN printouts, but do not know their own SSN, using guidance in GN 03340.015, are able to complete and fax a SSA-795 to the FO with the following information:
FOs should retain the Privacy Penalty Statement for future reference per GN 03340.015.

In cases where the individual requests a faxed copy the requestor should include the fax number on the SSA-795 request for their SSN Printout. Fax is considered a secure means of transmission by the agency.

**NOTE:** We cannot provide the faxed SSN Printout to a general number. We can only use a fax where the NH has access/control. We should not release a SSN printout to a public establishment like Kinkos or FedEx for the individual to then go pick it up. The agency has no control over these public sites, and the risk of PII loss would be high. We need to advise the NH in advance that they need to utilize a fax number to which they have personal access.

For SSN printout requests where the information provided does not match the Numident information. We are not permitted to tell a requestor which information is incorrect because that is a potential release of PII. We should provide a generic letter that the record cannot be located and provide instructions on how a person can apply for a replacement card.

**NOTE:** E-Verify is extending the timeframe for resolving SSA Tentative Nonconfirmations (TNCs). Employers have been instructed not to take any adverse actions on employee at this time. FO’s and TSC’s may advise callers that their cases are in “Interim Case Status” and will be pending until we resume normal operations.

We are prioritizing requests for in-person SSN services and dire need situations. Please review the Dire Need Face to Face Interview Decision Tree to determine if the applicant will qualify for an in-person interview.

b) **ORIGINAL SSN CARDS:**

Establish Face-to-Face appointments for all original SSN card requests for individuals Age 12 and older, regardless of need.

Original SSN card applications can be processed by mail when the applicant is a child under the age of 12 or adoptions when a new (different) SSN is requested since a face-to-face interview is not mandatory. See Original SSN for Infant and Face-to-Face Interview and How to Process New (Different) Social Security Number (SSN) Requests for Adoption Cases.
c) REPLACEMENT SSN CARDS:

Suspend processing face-to-face replacement SSN card requests except when an individual:

- Needs to update or correct his or her SSN record (such as name, date of birth, or citizenship) and

- Requires the update or correction to obtain income, resources or medical care or coverage, or other services or benefits, for example:
  - To file a tax return
  - To apply for or obtain healthcare coverage
  - To apply for housing
  - To apply for the Economic Impact Payment

NOTE: This list is not all-inclusive and individuals do not need to provide evidence of the need to update or correct their record.

For all other replacement SSN cards: Applicants should mail in the completed SS-5 application with the necessary proofs; this ensures limited contact with the public.

Interview Instructions

During the face-to-face interview, the interviewer should:

1.) Secure applicant's completed SS-5 application,

2.) Complete the SSA-5002 documenting the mandatory face-to-face interview, when appropriate, e.g., age 12 or over (date of contact, applicant information, ID presented, and answers to additional questions in RM 10205.112 and RM 10205.113). Also, see RM 10205.110.

3.) Make copies and certify the applicant's original documents (i.e. proof of age, proof of identity), and

4.) Scan all forms and documents into Worktrack

NOTE: Technicians should not request immigration documents through the mail from a non-citizen applicant.
It is a misdemeanor for a non-citizen to be without immigration documentation on their person. RS 002004.020 states we should not ask non-citizens to mail immigration documents. Non-citizens are eligible for SSN printouts. Process the application if you receive mailed immigration documentation from a non-citizen, but DO NOT request this documentation.

Guidance on acceptance of Form I-20: We may accept electronically signed I-20s (Certificate of Eligibility for
Nonimmigrant Student Status) for enumeration purposes. Technicians may accept electronically signed I-20s signed March 26, 2020 through the end of COVID-19.

In name change situations, certain documents (i.e., marriage certificate) that meet the criteria in RM 10212.015D may also serve as proof of identity documentation (i.e. Driver's License).

F. General Procedures

1. Limited In-Person Interviewing

Managers or designated staff are the only individuals authorized to schedule in-office appointments during the COVID-19 pandemic. Refer to EM-20028 SEN for appointment procedures and instructions for screening in-office visitors during the COVID-19 pandemic.

In-person interviews continue to be restricted to dire need and prioritized situations including, but not limited to:

   a) Original and replacement SSN cards, as defined in Section E.9.
   b) Immediate Payments (IPs) expedited in the FO based on dire need as outlined in RS 02801.001, RS 02801.010 and SI 02004.100
      • In all possible cases, and in those where individuals cannot visit an office, issue Critical Payment for Title II beneficiaries RS 02801.001 or an Emergency Advance Payment (EAP) for SSI recipients per instructions in SI 02004.001.
      • Issue Immediate Payments per instructions in RS 02801.001, RS 02801.010 and SI 02004.100.
      • During the COVID-19 pandemic, FO and Area Director Office (ADO) supervisors will temporarily serve as cashiers in the Third Party Payment System (TPPS). Management certifications are suspended for this period. Contact your regional TPPS administrator with any access issues or questions.
   c) Death correction cases that do not meet face-to-face exceptions in GN 02602.055 E, (b) (7)(E).

2. Extend Good Cause

Continue to apply maximum flexibility when deciding whether to extend good cause provisions based on examples in GN 03101.020 related to the timely filing of applications, the submission of evidence, appeals, hearings, redeterminations, and continuing disability reviews.

Extend good cause during the pandemic period starting in March 1, 2020 and continuing, considering unusual, unexpected, or unavoidable circumstances beyond the claimant’s control that prevent timely action. Consider extending these good cause provisions for information due when resuming adverse actions.

Due to mail handling and delays with timely mailing of and receiving Goldberg Kelly (GK) notices, continue to apply the good cause provisions with maximum flexibility in individual circumstances.

Continue to process appeals and follow due process guidance per SI 04010.020 and SI 04005.012.

3. Resume Failure to Cooperate (FTC) and Failure to Provide Information Determinations – RESUMPTION INSTRUCTIONS

Offices may continue processing insufficient evidence determinations based on failure to
cooperate with requests for evidence or action and whereabouts unknown. Follow existing instructions in GN 01010.410, DI 11018.005, DI 13015.001, DI 23007.000, DI 28075.005, GN 01010.410, and SI 00601.110, SI 02301.235

If you identify a failure to cooperate (FTC) denial that was made improperly between March 17, 2020 and August 31, 2020, take corrective action to restore the claim to its status prior to being improperly denied for FTC and follow the steps outlined below to resume processing the claim. For specific instructions on reactivations and reopenings, please consult EM-20019 SEN REV 3.

If the last contact attempt was prior to August 17, 2020, technicians should follow the steps outlined below before closing the action.

a. Technicians must make an additional attempt to notify, as applicable, the claimant, applicant, appointed representative, or third party by telephone and by letter that we still need the evidence or action,
b. Follow special handling procedures for claimants who meet the criteria defined in DI 23007.001A.
c. Provide a due process statement that if the claimant does not comply with our request for evidence or action, we will make a determination based on the evidence in file, which may result in a reduction, suspension, or termination of benefits.
d. Allow the claimant 15 days to respond (10 days plus 5 for mail), and
e. Follow the steps in DI 11018.005, DI 13015.001, and SI 00601.110 before making a determination based on the evidence in file.

IMPORTANT: DDS employees should continue to follow FTC guidance in EM 20019 SEN REV 3.

NOTE: COVID-19 concerns remain a good reason for failure to cooperate with requests for evidence or action. For example, if a claimant contacts the DDS and indicates he or she needs assistance completing forms, and does not believe he or she can safely receive assistance due to COVID 19 concerns:

- Offer to collect the information by telephone, or if the claimant objects to completing the forms by telephone,
- Hold case processing until the claimant receives assistance completing the forms.

4. Communication and Documentation

Follow existing procedures in GN 01070.228 and limit DOTEL usage considering call volumes on the national #800 number and FO general inquiry (GI) lines. Expedite communication across operational components using the e562 and Manager-to-Manager (M2M) online applications.

a) WorkTrack is critical to ensuring remote workers can process initial and post-entitlement/eligibility workloads during the COVID-19 pandemic. TSC and PSC employees can query and view documents within WorkTrack to obtain information related to pending issues in the FOs and WSUs. To further-enable a virtual work environment, we have enhanced the WorkTrack business process to provide our offices guidance on the most efficient utilization of WorkTrack and Desktop Faxing.

- Profile and assign items in WorkTrack within 5 business days.
- Field offices should monitor profiled items to completion, as they do with other pending work.
- Medicare enrollment forms (i.e. CMS 40B, CMS L564, etc.) are the exception and should be processed within 10 calendar days.
- WT HOLD Feature: WT is not a document repository; however,
Some items should be held if they are connected to certain adverse actions.

- Continue to follow regular signature requirements along with the guidance on the Section G Signature Policy.

- For original evidence received by mail, ensure to affix the certification stamp to the copies prior to scanning into WT.

- **DO NOT** shred paper evidence based on its entry into WorkTrack. Offices may only shred paper documents when electronic copies of those documents are entered into a permanent document repository. Retain paper or electronic documents using standard document retention guidelines.

- For additional guidance on WorkTrack, see:
  - WorkTrack 2.0 Training
  - WorkTrack 2.0 Application

**IMPORTANT: SSA-827 Scanning Issue**

Effective immediately, offices should not include the second page of the SSA-827 form when uploading the form into WorkTrack (WT). WT does not allow the inclusion of a barcode, therefore when the SSA-827 form is uploaded from WT into E-VIEW it is without a barcode. In E-VIEW, the front page of the SSA-827 form, that contains the wet signature, shows as page 1 and the back of the SSA-827 form shows as page 2. The DDS systems auto-receipt functionality identifies only page 2 as the SSA-827 form. Due to this systems limitation only the back of the SSA-827 form has been going out with MER requests. It is critical that DDSs have access the signature page to obtain MER. As a temporary workaround, until this issue is resolved, only scan page 1 of the SSA-827 form into WT.

b) eMailer [TC 00101 027](#) is a web-based application designed to assist SSA employees with distributing general information to the public and promoting the electronic services available at the Social Security Online website.

FO, WSU, and TSC technicians can send certain
forms and general information via text or email using the eMailer tool.

Access the eMailer application

G. Signature Policy

1. To the extent possible use attestation as the preferred signature method in accordance with alternative signature methods described in GN 00201.015 and DI 11005.056.

2. Effective May 21, 2020 representatives may submit the SSA-1696 or other written notice of appointment with an electronic signature. Technicians must follow temporary guidance in EM-20022 REV and follow the steps in the workflow to obtain verbal confirmation from the claimant of the representative appointment and signature on the SSA-1696 or other written notice of appointment.

3. In situations where a loss of benefits is possible, FO or WSU adjudicators may sign applications on behalf of a claimant. When payment is initiated based on an FO or WSU signature, obtain an application signed by the applicant postadjudicatively and use signature procedures per GN 00201.015 B.3.

H. Obtaining Evidence and Extending Timeframes

1. Telephone Requests – To expedite processing, request medical and non-medical evidence by telephone following the guidance in DI 22505.030. This also includes medical evidence of capability on the SSA-787 (Physician’s/Medical Officer’s Statement of Patient’s Capability to Manage Benefits) in initial claims and post-entitlement/eligibility situations.

2. During the COVID-19 pandemic, in initial claims and PE situations, SSA will attempt to obtain necessary evidence to adjudicate claims and follow FTC instructions (See Section F.3. above).
   a. SSA will apply Good Cause if claimant is unable to submit evidence due to COVID 19 concerns (See Section F.2. above).

   b. Control outstanding development locally development worksheet (DW01) or other workload control listing, or file pending in the MHF EMGY location in the PCs. Continue to monitor workload control listings and assist the claimant in obtaining evidence where needed.

   NOTE: COVID-19 Related MCS Diaries – Evidence Development - PC instruction for 90 day diary extension:
   If you find a matured MCS diary in Paperless, and the evidence was not secured at the time of adjudication due to EM 20010 Disaster Procedures, extend the diary for 90 days and wait for further guidance.

   • Review MCS and see if there is a Unit Code of 318 (in the last three fields) on DW01 and a Listing Code of 499 on DECI for the corresponding diary.

   • If so, hold the ACR for 90 days with a HOLD location of MHF/EMGY in the Module location. The ACR should mature to Mod_CA.
• If not, process as normal. DO NOT apply these instructions to cases without a Unit Code of 318 and a Listing Code of 499.

c. Do not pay retroactive benefits based on allegation. Expedite development of the claim to adjudicate and release retroactive benefits and any representative fees. If the evidence needed to adjudicate retroactive benefits includes primary identification documents, schedule an in-office appointment to view and certify the evidence.

3. No Beneficiary's Own Account Number (No BOAN) Cases - Monthly benefits are not payable to Title II beneficiaries who do not have a Social Security number (SSN) and have not submitted an application for an SSN with the required evidence for enumeration. Beneficiaries without an SSN who do not submit an application for an SSN with the required evidence (no BOAN cases) would be entitled, but placed in suspense. When adjudicating a claim into suspense for no BOAN, advise the beneficiary that monthly benefits are not payable until the beneficiary applies for an SSN and provides the required evidence.

Direct all program-related and technical questions to your RO support staff or PC OA staff. RO support staff or PC OA staff may refer questions or problems to their Central Office contacts.

References

EM-20022 REV Temporary Instructions for the documentation of the Appointment of a Representative during the Coronavirus Disease 2019 (COVID-19) Pandemic
DI 11005.056 Signature Requirement for Form SSA-827
GN 00401.000 Disaster Management
GN 00410.000 Processing Claims and Payments in Disasters
GN 00410.095 SSNs for Individuals Affected by Disaster
GN 00410.020 Processing Payment Actions in Disasters
GN 00410.030 Reinstatement of Benefits in Disasters
GN 00410.050 Disaster Exhibits
GN 00301.060 Emergency Evidentiary Procedures
GN 02406.000 Failure to Receive a Check/Payment – Title II, Title XVI
GN 02406.023 Direct Deposit Fraud Prevention Policy
RS 02801.010 Immediate Payment (IP) Criteria and Process
SI 02004.130 Field Office Procedures forSSI Immediate Payments
TC 25001.000 Nonreceipt of Payment
GN 02406.008 Nonreceipt Direct Express Card
GN 02406.007 Nonreceipt Direct Deposit
RM 10205.110 Mandatory In-Office Interview New SSN Applicants 12 Years or Older
HI 01001.025 Payment by Remittance
HI 01001.090 Receipt of Premiums in the Field Office (FO)
DI 22505.030 Obtaining Medical Evidence by Telephone
DI 11018.005 Field Office Responsibilities in a Failure to Cooperate-Insufficient Evidence Decision (FTC)
DI 23020.005 Critical Cases
DI 11005.601 The Disability Interview-- Identifying Terminal Illness (TERI) Cases
RS 00203.032 Benefits Enumeration Requirements
RM 00207.035 Auxiliary and Survivor Claims – General SSN
RM 00207.045 FO Procedures – Auxiliary or Survivor Claimant Does Not Have SSN
RM 10205.001 How to Apply for a Social Security Card
RM 10210.010 When to Consider an Application for an SSN Card Filed

GN 02807.000 Prisoner Provisions
SI 00520.001 Residence in an Institution
SI 00501.410 Ineligibility Due to Absence from the United States/Developing Presence
SI 02301.225 Absence From the United States (N03), Not a United States Resident (N23)
SI 00835.500 First-of-the-Month (FOM) Residence and ISM Determinations
SI 00835.001 Introduction to Living Arrangements and In-Kind Support and Maintenance
SI 00835.901 Values for In-Kind Support and Maintenance for 2006 and Later
SI 00830.620 Disaster Assistance - Presidentially-Declared Disaster
SI 00835.050 Living Arrangement Changes for Victims of Presidentially Declared Disasters