

**Department of Human Services
QN-112 SVES – Title II – SSA Retirement, Survivors,
Disability and Health Insurance Benefits Information**

**SSN: 123-45-6789 Birth Month: ALL Birth Day: ALL Birth Year: ALL
First Name: ALL Last Name: ALL Start Date: 07/01/2007 End Date: 07/14/2007**

Name: FIRST M LAST SSN: 123-45-6789 Member ID: 12345678 Gender: F FIPS: 26163
Date of Birth: 01/01/1960 Date of Death: 01/01/2006 Alias SSN: 333-11-9999

Residence Address:

Address Line 1: 100 WESTERN AVE
Address Line 2:
Address Line 3:
City, State, Zip: KALAMAZOO, MI 49008
Scrub IND 1: BA – Bad address
Scrub IND 2: BR – Bad range
Scrub IND 3: BU – Bad unit number

Benefit Information:

CAN/BIC: 123456789/AA-AA
Direct Deposit Type: C – CHECKING
Payment Status (LAF CD): PB – Delayed claim (beneficiary's claim not finally adjudicated)

Deferred Payment DT: 07/2007
Initial Entitlement DT: 07/2007
Current Entitlement DT: 07/2007
Suspension/Term DT:
Monthly Benefit: \$234.56
Category of Assistance: A – Aged

Health Insurance Benefit Information:

Health INS Option CD: G – Yes (good cause)
Health INS Start DT: 07/2007
Health INS Stop DT:
Supplemental Medical INS CD: N – No (no response)
Supplemental Medical INS Start DT: 07/2007
Supplemental Medical INS Stop DT:

Other Benefit Information:

Black Lung Entitlement CD: E – Entitled
Black Lung Benefit: \$100.00
Railroad IND: A – Active claim

Monthly Benefit Information:

Date	Amount	Type
09/2007	\$243.93	C – Benefits paid
08/2007	\$243.93	C – Benefits paid
07/2007	\$243.93	C – Benefits paid
06/2007	\$243.93	C – Benefits paid
05/2007	\$243.93	C – Benefits paid
04/2007	\$243.93	C – Benefits paid
03/2007	\$243.93	C – Benefits paid
02/2007	\$243.93	C – Benefits paid

The following information explains the fields on the *State Verification Exchange System (SVES) Title II Report*.

The date report was generated is in the upper left hand header.¹

TITLE: The type of report being returned. The Title II report will read *Department of Human Services, QN-112 SVES – Title II – SSA Retirement, Survivors, Disability and Health Insurance Benefits Information*.

SSN: This field shows the Social Security number(s) (SSNs) that were used as one of the Business Objects search data; the default is 000000000.

¹ The date format for all codes is either CCYYMMDD or CCYYMM.

BIRTH MONTH: This field shows the birth month when the birth month was used as one of the Business Objects search data. The default is ALL birth months.

BIRTH DAY: This field shows the birth day when the birth day was used as one of the Business Objects search data. The default is ALL birth days.

BIRTH YEAR: This field shows the year of birth when the birth year was used as one of the Business Objects search data. The default is ALL birth years.

FIRST NAME: This field shows the first name of the person to be located when the first name was used as one of the Business Objects search data. The default is ALL first names.

LAST NAME: This field shows the last name of the person to be located when the last name was used as one of the Business Objects search data. The default is ALL last names.

START DATE: This field shows the start date when the start date was used as one of the Business Objects search data. The default is 01-01-0001.

END DATE: This field shows the end date when the end date was used as one of the Business Objects search data. The default is 12-31-9999.

NAME: This is the name of the located person – in first name, middle initial and last name format.

SSN: The SSN of the person who was submitted to SVES on a locate request. If an SSN is not present on the Federal Case Registry (FCR) Input Person/Locate Request Record, the FCR will attempt to identify an SSN for the person using other information on the input record. If a verified SSN cannot be found for a person, the input record will be rejected and returned to the submitter on the *Participant Not Found Report*.

MEMBER ID: The submitter's unique identifier for the person who is a participant in a case that is presently on, or is being added to, the FCR, or that is the subject of a locate request.

GENDER: The Title II recipient's gender:

F – Female M – Male	U – Unknown
------------------------	-------------

FIPS: The five-digit Federal Information Processing Standards (FIPS) code associated with the Title II recipient's county code for the jurisdiction responsible for payment.

DATE OF BIRTH: The Title II recipient's date of birth.

DATE OF DEATH: The Title II recipient's date of death. The FCR returns "01" in the day

portion of the Title II *Date of Death* field if the Social Security Administration's (SSA's) records contain 00 in the day portion of the date.

ALIAS SSN: The multiple SSN, as provided by the FCR, used for the locate request.

RESIDENCE ADDRESS:

ADDRESS LINE 1: The street address supplied by SVES.

ADDRESS LINE 2: The street address supplied by SVES.

ADDRESS LINE 3: The street address supplied by SVES.

CITY, STATE, ZIP: The city that is associated with the Title II recipient's residence address; will be blank if not available. The state and corresponding zip code will follow the city.

SCRUB IND 1-3: Indicates whether the residence address is a good address:

BA – Bad address	EA – Empty address
CH – Changed address	GA – Good address

If the scrub indicator is BA or CH, one or more of the following codes will show:

BR – Bad range, house number is out of range for that street	MX – Mismatched state and zip code
BU – Bad unit number	NC – Non-determined city name
BX – Missing state code and zip code	NZ – Non-determined zip code
MA – Mismatched address: street name is not found in city	

CAN/BIC: CAN – Claim Account Number (9 digits) / BIC – Beneficiary Identification Code assigned to the Title II recipient.

The BIC codes are as follows:

A – Primary claimant	DA – Remarried widow, 3 rd claimant
B – Aged wife (62+) 1 st claimant	DC – Surviving divorced husband (60+), 1 st claimant
B1 – Aged husband (62+), 1 st claimant	DD – Aged widow, 4 th claimant
B2 – Young wife with child, 1 st claimant	DG – Aged widow, 4 th claimant
B3 – Aged wife, 2 nd claimant	DH – Aged widower, 3 rd claimant
B4 – Aged husband, 2 nd claimant	DJ – Aged widower, 4 th claimant
B5 – Young wife, 2 nd claimant	DK – Aged widower, 5 th claimant
B6 – Divorced wife (aged), 1 st claimant	DL – Remarried widow, 5 th claimant
B7 – Young wife, 3 rd claimant	DM – Surviving divorced husband, 2 nd claimant
B8 – Aged wife, 3 rd claimant	DN – Remarried widow, 5 th claimant
B9 – Divorced wife, 2 nd claimant	DP – Remarried widower, 2 nd claimant
BA – Aged wife, 4 th claimant	DQ – Remarried widower, 3 rd claimant
BD – Aged wife, 5 th claimant	DR – Remarried widower, 3 rd claimant
BG – Aged husband, 3 rd claimant	DS – Surviving divorced husband, 3 rd claimant
BH – Aged husband, 4 th claimant	DT – Remarried, 5 th claimant
BJ – Aged husband, 5 th claimant	DV – Surviving divorced wife, 3 rd claimant
BK – Young wife, 4 th claimant	DW – Surviving divorced wife, 4 th claimant
BN – Divorced wife, 3 rd claimant	DX – Surviving divorced husband, 4 th claimant
BP – Divorced wife, 4 th claimant	DY – Surviving divorced wife, 5 th claimant
BQ – Divorced wife, 5 th claimant	DZ – Surviving divorced husband, 5 th claimant
BR – Divorced husband (aged) 1 st claimant	E – Mother, widow, 1 st claimant
BT – Divorced husband, 2 nd claimant	E1 – Surviving divorced mother, 1 st claimant
BW – Young husband, 2 nd claimant	T9 – MQGE, 9 th claimant
BY – Young husband with child, 1 st claimant	TA – MQGE, primary beneficiary
CA-CK – Child	TB – MQGE, aged spouse, 1 st claimant
C1-C9 – Child	TC – MQGE, childhood disability benefit, 1 st claimant
D – Aged widow (60+), 1 st claimant	TD – MQGE, aged widow(er), 1 st claimant

<p>D1 – Aged widow, 1st claimant D2 – Aged widow, 2nd claimant D3 – Aged widower, 2nd claimant D4 – Widow (remarried after age 60), 1st claimant D5 – Widower (remarried after age 60), 1st claimant D6 – Surviving divorced wife (over 60), 1st claimant D7 – Surviving divorced wife, 2nd claimant D8 – Aged widow, 3rd claimant D9 – Remarried widow, 2nd claimant E2 – Mother, widow, 2nd claimant E3 – Surviving divorced mother, 2nd claimant E4 – Father, widower, 1st claimant E5 – Surviving divorced father, widower, 1st claimant E6 – Father, widower, 2nd claimant E7 – Mother, widow, 3rd claimant E8 – Mother, widow, 4th claimant E9 – Surviving divorced father, widower, 2nd claimant EA – Mother, widow, 5th claimant EB – Surviving divorced mother, 3rd claimant EC – Surviving divorced mother, 4th claimant ED – Surviving divorced mother, 5th claimant EF – Father, widower, 3rd claimant EG – Father, widower, 4th claimant EH – Father, widower, 5th claimant EJ – Surviving divorced father, 3rd claimant EK – Surviving divorced father, 4th claimant EM – Surviving divorced father, 5th claimant F1 – Parent, father F2 – Parent, mother F3 – Parent, stepfather F4 – Parent, stepmother F5 – Parent, adopting father F6 – Parent, adopting mother F7 – Parent, 2nd alleged father F8 – Parent, 2nd alleged mother J codes involve prouty wife and HIB K codes involve prouty wife not entitled to HIB M – Uninsured beneficiary T – Fully insured beneficiaries who have elected entitlement only to HIB or uninsured beneficiary or renal disease beneficiary T2 – Medicare Qualified Government Employment (MQGE) 2nd T3 – MQGE, 3rd claimant T5 – MQGE, 5th claimant T6 – MQGE, 6th claimant T7 – MQGE, 7th claimant T8 – MQGE, 8th claimant TJ – MQGE, aged spouse, 4th claimant</p>	<p>TE – MQGE, young widow(er), 1st claimant TF – MQGE, parent (male) TG – MQGE, aged spouse, 2nd claimant TH – MQGE, aged spouse, 3rd claimant TK – MQGE, aged spouse, 5th claimant TL – MQGE, aged widow(er), 2nd claimant TM – MQGE, aged widow(er), 3rd claimant TN – MQGE, aged widow(er), 4th claimant TP – MQGE, aged widow(er), 5th claimant TQ – MQGE, parent (female) TR – MQGE, young widow(er), 2nd claimant TS – MQGE, young widow(er), 3rd claimant TT – MQGE, young widow(er), 4th claimant TU – MQGE, young widow(er), 5th claimant TV – MQGE, disabled widow(er), 1st claimant TW – MQGE, disabled widow(er), 2nd claimant TX – MQGE, disabled widow(er), 3rd claimant TY – MQGE, disabled widow(er), 3rd claimant TZ – MQGE, disabled widow(er), 4th claimant W – Disabled widow, 50+, 1st claimant W1 – Disabled widower (50+), 1st claimant W2 – Disabled widow, 2nd claimant W3 – Disabled widower, 2nd claimant W4 – Disabled widow, 3rd claimant W5 – Disabled widower, 3rd claimant W6 – Disabled surviving divorced wife, 1st claimant W7 – Disabled surviving divorced wife, 2nd claimant W8 – Disabled surviving divorced wife, 3rd claimant W9 – Disabled widow, 4th claimant WB – Disabled widower, 4th claimant WC – Disabled surviving divorced wife, 4th claimant WF – Disabled widow, 5th claimant WG – Disabled widower, 5th claimant WJ – Disabled surviving divorced wife, 5th claimant WR – Disabled surviving divorced husband, 1st claimant WT – Disabled surviving divorced husband, 2nd claimant</p>
---	---

DIRECT DEPOSIT TYPE: The method that is used to send direct deposit payments to the Title II beneficiary:

<p>C – Checking S – Savings</p>	<p>U – Unknown</p>
--------------------------------------	--------------------

PAYMENT STATUS (LAF CD): The Title II recipient's Ledger Account File Code, which reflects the payment status for the beneficiary:

A – Withdrawal for adjustment	SS – Nonpayment to post secondary students during summer months
AA – Adjusted to split PIC in advance file status	SW – Worker's compensation/public disability benefit offset
AC – PIA correction	SX – Conditional status
AD – Adjusted for dual entitlement	S0 – Pending determination of continuing disability
AE – Withdrawn for recomputation	S1 – Worked outside US
AF – Transferred to another program service center	S2 – Worked inside US
AJ – Worker's comp offset	S3 – Suspended, primary beneficiary worked in US
AM – Withdrawn from HIB-only status	S4 – Failed to have child care
AP – Withdrawn for change of PIC	S5 – Primary beneficiary worked outside US
AR – Withdrawal of a beneficitation from LAF-S or T	S6 – Development of better address for mail or direct deposit
AW – Withdrawn to impose worker's comp offset/public disability benefits	S7 – Suspension – prisoner, extended trial work period or refusing vocation rehabilitations services
A0-A9 – Withdrawn for recomputation	S8 – Payee is being determined
B – Abatement status	S9 – Miscellaneous suspension
C – Current pay status (except railroad)	T – Disability benefits terminated because of conversion to retirement benefits
D – Deferred payment status	TA – Advance filing claim terminated before maturity
DP – Deferred because of public assistance	TB – Mother, father terminated – entitled to disabled widow benefits
DW – Deferred for Worker's compensation offset	TC – Disabled widow age 62, and not entitled as aged widow
D1 – Deferred for Foreign work test	TJ – Advanced filed claim terminated after maturity
D2 – Deferred for annual retirement test	TL – Termination of post-secondary student
D3 – Deferred as an auxiliary because the primary beneficiary is LAF-D2	TP – Terminated for change of payment identification code on post-entitlement actions
D4 – Deferred for no child in care	TX – Terminated status
D5 – Deferred as auxiliary because primary beneficiary is LAF	T& – Claim was withdrawn
D6 – Deferred to recover overpayments not separately defined	T0 – Benefits payable to some other agency
D9 – Deferred for other reasons	T2 – Dependent terminated due to death of primary beneficiary
E – Current payment certified-Railroad Retirement Board	T1 – Death of Beneficiary
F – Advance filing for current payment through railroad retirement board	T3 – Divorce, marriage, remarriage
J – Advance file current pay case	T4 – Attainment of age 18 or 19 and not disabled
K – Advance filing for deferred payment	T5 – Entitlement to other benefits
L – Advance filing for conditional payment	T6 – Child beneficiary no longer entitled because of age, termination of mother because of death or marriage of the last remaining child entitled to receive benefits
N – Disallowed claim	T7 – Adoption of child, mother terminated
ND – Denied claim	T8 – Child no longer disabled; mother/father terminated
P – Delayed claim (adjudication pending)	T9 – Terminated for other reasons
PB – Delayed claim – not finally adjudicated	U – Active uninsured status
PT – Claim has been terminated from delayed claims status	W – Withdrawal before entitlement
R – Kill Credit	X+ – SMI withdrawn, beneficiary entitled only to SMI
SB – Benefits due but not paid under \$1	X0 – Claim transferred to railroad retirement board
SD – Technical entitlement, either the beneficiary is entitled on another claim, or the disability family maximum provision has reduced the MBA to zero	X1 – Death of beneficiary
SF – Prouty beneficiary fails to meet residency requirement	X5 – Entitled to other benefits
SH – Prouty beneficiary receiving government pension	X7 – Health insurance benefits terminated
SJ – Alien suspension	X8 – Payee being developed
SK – Deportation	X9 – Entitlement being interrupted for other reason
SL – Beneficiary is in barred payment country	XD – Withdrawal for adjustment
SP – Prouty beneficiary receiving public assistance	XF – Entitlement moved to another program service center
	XK – Beneficiary deported
	XX – Adjusted/suspended/terminated/uninsured status

DEFERRED PAYMENT DT: The Title II recipient's initial date on which the first or next deferred payment is made.

INITIAL ENTITLEMENT DT: The date of initial entitlement; the date that the Title II recipient was initially eligible for Title II benefits.

CURRENT ENTITLEMENT DT: The date that the Title II recipient was initially eligible for Title II benefits for the current period of entitlement.

SUSPENSION/TERM DT: The date that the event which caused the suspension or termination of Title II benefits for this recipient occurred.

MONTHLY BENEFIT: The Title II recipient's net monthly benefit.

CATEGORY OF ASSISTANCE: Category of Assistance – The Title II recipient's state exchange categorical assistance field:

A – Aged B – Blind C – AFDC D – Disabled F – Food Stamps H – Health Maintenance I – Income Maintenance	J – AFDC and Food Stamps K – Food Stamps and Medicaid N – Title XIX Medicaid Eligibility P – Child Support Enforcement S – Statement of Consent U – Unemployment Compensation Blank – None
--	--

HEALTH INS OPTION CD: The Title II recipient's health insurance option field:

C – None (cessation) D – None (denied) E – Yes (automatic) F – None (invalid enrollment) G – Yes (good cause) H – None (not eligible or did not enroll) P – Railroad	R – None (refused) S – None (no longer under renal disease provision) T – None (termination for nonpayment of premiums) W – None (withdrawal) X – None (Title II termination) Y – Supplemental insurance (part B) is payable Blank – (means not applicable)
--	---

HEALTH INS START DT: The date that the Title II recipient became eligible for health insurance.

HEALTH INS STOP DT: The date that the Title II recipient's health benefits ended.

SUPP. MED INS CD: Supplemental medical insurance (SMI) field:

C – No: Cessation D – No: Denied F – No: Terminated G – Yes: Good cause N – No: No response P – Railroad R – No: Refused	S – No: No longer under the renal disease provision T – No: Terminated for non-payment W – No: Withdrawal Y – Yes Blank – (means not applicable)
--	--

SUPP. MED INS START DT: The first month that the Title II recipient became eligible for SMI.

SUPP. MED INS STOP DT: The last month of coverage for the Title II recipient's SMI

benefits.

BLACK LUNG ENTITLEMENT CD: The Title II recipient's Black Lung entitlement field:

D – Death termination E – Entitled N – Nonpayment	P – Pending entitlement T – Terminated (other than death) Blank – No Black Lung entitlement
---	---

BLACK LUNG BENEFIT: The Title II recipient's Black Lung payment amount.

RAILROAD IND: The Title II recipient's railroad claim indicator field:

A – Active Claim S – Suspended Claim	T – Terminated Claim Blank – No Claim
---	--

MONTHLY BENEFIT INFORMATION: Monthly Benefit Credited (MBC) – This field contains the number of occurrences of the historical payment fields.

DATE (MONTHLY BENEFIT): If applicable, this field will contain the first MBC date.

AMOUNT (MONTHLY BENEFIT): If applicable, this field will contain the first MBC amount. This amount may appear after an individual dies. Review the LAF Code to determine if a payment was issued.

TYPE (MONTHLY BENEFIT): This field will contain one of the following codes:

C – Benefits paid E – Benefits not paid, due to delayed/pending or suspense	N – Benefits not paid Blank – Benefits not paid or not applicable
--	--

Definitions/Abbreviations

- BIC – Beneficiary Identification Code
- CAN – Claim Account Number
- HIB – Health Insurance Benefit
- LAF CD: The Title II recipient's Ledger Account File Code
- MBA – Monthly Benefit Amount
- MBR – Master Beneficiary Record
- MQGE – Medicare Qualified Government Employment
- Prouty – A special category of benefit was established for certain men born prior to 1900 and women born prior to 1898.
- SMI – Supplemental Medical Insurance