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BENEFICIARY EXCHANGE (BENDEX)

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**EIS 1104 - BENEFICIARY EXCHANGE (BENDEX)**  
**REVISED 03/01/07 - CHANGE NO. 05-07**

**I. GENERAL INFORMATION**

The Beneficiary Data Exchange (BENDEX) system is a daily computer match by social security numbers (SSN) between the public assistance case files and Social Security records. All recipients with valid social security numbers entered on the DSS-8124, DSS-8125, DSS-8126, or DSS-8590 are included in the match. The match is used to verify RSDI benefits in determining eligibility for various public assistance programs. The Bendex provides:

- A. Timely adjustment of assistance after a reported change in RSDI benefits.**
- B. Reduction in processing time due to less frequent use of the SSA-1610 (Information Request and Report) and DSS-1639 (Assistance and Services Referral Form).**

**II. BENDEX PROCESSING**

**A. When an individual becomes eligible for public assistance:**

- 1. The State Office sends the individual's information to the Social Security Administration (SSA) in Baltimore, Maryland each week on Saturday or Monday. SSA matches the individual with their files and submits information back to the State Office on Tuesday. At that time;
- 2. On-line BENDEX is updated by the files; and
- 3. An individual BENDEX information sheet is printed and mailed to the county department of social services.

**B. On-line BENDEX is updated, and a BENDEX information screen is produced when one of the following occurs:**

- 1. A recipient first receives Social Security, or
- 2. Benefits increase or decrease, or
- 3. Hospital benefits change, or
- 4. He becomes entitled to Supplemental Medicare B insurance, or
- 5. There is any other change in the SSA's Master Beneficiary Records.

**NOTE: BENDEX information sheets are not printed for the annual SSA cost of living adjustment (COLA).**

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**III. BENDEX INFORMATION SHEET**

BENDEX information sheets are an 8 ½" x 11" printout to be filed in the case record.

The printout is sorted into 7 sections:

COUNTY INFORMATION

CNDS DEMOGRAPHIC DETAILS

SSA DEMOGRAPHIC DETAILS

CLAIM INFORMATION

HEALTH INSURANCE BENEFIT (HIB-PART A) ENTITLEMENT

SUPPLEMENTAL MEDICAL INSURANCE ENTITLEMENT (SMI-PART B) INFORMATION

CLAIM PAYMENT HISTORY

**A. BENDEX Data Exchange Information Sheet County Information**

1. Today's Date - The date the BENDEX sheet is printed.
2. BENDEX Date - The date in the upper right corner is the state processing date. SSA changes are effective the month following that date.
3. County - The individual's county of actual residence.
4. District - The three-digit county district number.
5. Aid Program/Category - A one letter alpha character to designate the public assistance program and a two-letter alpha character to designate the aid category.
6. Head of Household - The name of the Head of Household of the EIS or FSIS case.
7. Case ID - An eight-digit number assigned by EIS when an application is entered into the system, or a nine-digit number assigned by FSIS when the application is.
8. County Case No. - The six digit county case number in EIS or FSIS.

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III. (CONT'D)

B. CNDS Demographic Details

1. Full Name - Full name of client in CNDS.
2. Sex - Male or Female.
3. Age - Client age in years.
4. Individual ID - A unique ten-digit number ending with an alpha character that is assigned to each individual in EIS or FSIS.
5. Date of Birth - Date of birth in CNDS.
6. SSN - SSN assigned to an individual.

C. SSA Demographic Details

1. SSA Name - The name of the client of the EIS or FSIS case as keyed in the SSA system.
2. SSA Birth Date - Date of birth on SSA file.
3. CNDS Birth Date Is - Indicated only when discrepancy as compared to the SSA birth date.
4. SSA Death Date - Date of death on SSA file.  
  
P = Proven  
Blank = Not Proven
5. CNDS First Name Is - Indicated only when discrepancy as compared to the SSA first name.
6. Sex - Male or Female.
7. Disability Onset - The entry is the month/year or N/A. In disability cases N/A means 'not available', or the onset was prior to 1975, while in non-disability cases it means 'not applicable'.
8. Citizenship Start - (MMCCYY) The first month and year of a client's citizenship began in a particular country.

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III. C. (CONT'D)

9. Citizenship Stop - (MMCCYY) The last month and year of a client's citizenship ended in a particular country.
10. Country - Country of citizenship spelled out up to 17 positions.
11. Citizenship Proof - This position is conditional, based on the country of citizenship being the United States (US). The values are:  
  
N = Not Proven  
Y = Proven  
C = Presumed  
Or  
Blank when the country of citizenship is equal to anything other than the US.
12. Dual Entit SSN - The other SSN under which the beneficiary is entitled.
13. Trip Entit SSN - The third account on which the other entitlement exists for Title II benefits.
14. Cross Ref SSN - The account on which actual or potential entitlement exists.
15. SSI Status Codes - Reflects the beneficiary's status in the SSI program:
  - A. Individual eligible for SSI and not eligible for Medicaid or third party buy-in.
  - B. Terminated due to excess income resulting from Title II benefit rate increases.
  - C. Conditional SSI payment.
  - D. Denied
  - E. Receives Federal payment.
  - G. SSI recipient engaging in SGA; not eligible for special SSI payment; retains eligibility for Titles XIX and XX.

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III. C. 15. (CONT'D)

- I. Ineligible spouse or parent, or essential person.
  - M. SSI recipient engaging in SGA: eligible for special SSI.
  - P. Pending SSI determination.
  - S. Receives State supplement.
  - T. Terminated for reasons not specifically defined.
  - U. Terminated due to death; source of report unknown.
  - V. Terminated via T30 procedure; not reaccreted.
  - W. State supplement terminated (no longer used).
  - X. Terminated due to death.
  - Y .Terminated due to excess income.
  - Z. Terminated due to excess resources.
16. SSI Status Date - (MMCCY) The month of first payment or the month following the month of last payment.
17. RR Claim ID - Railroad Retirement Board account number.
18. RR Status Code - Code to indicate the status of Railroad Claim:

A = Current payment  
T = Railroad benefit terminated

**NOTE: OBSOLETE CODES F OR S MAY APPEAR ON OLD RECORDS.**

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III. C. (CONT'D)

19. RR Jurisd Start - (MMCCYY) Railroad Annuitant claim was effective.
20. RR Jurisd Stop - (MMCCYY) Railroad Annuitant's benefits stopped.

D. Claim Information

1. Current Claim No. - The recipient's SSA claim number under which he receives benefits according to SSA files. (Refer to VIII. C. below for an explanation of the suffixes.)
2. Latest Mod Date - Latest date information received from SSA.
3. Payment Cycle - Indicates when the benefit check was released.  
  
1st cycle = 3<sup>rd</sup> of the month.  
2nd cycle = 2<sup>nd</sup> Wednesday of the month.  
3rd cycle = 3<sup>rd</sup> Wednesday of the month.  
4th cycle = 4<sup>th</sup> Wednesday of the month.
4. Previous Mod Date - Previous date information received from SSA.
5. Direct Deposit Type -  
  
C = Checking account  
S = Savings account  
Blank = No direct deposit
6. Pay Status Codes - This indicates whether a benefit amount is payable or the reason it is not payable.

Adjustment:	AD	Adjusted for dual-entitlement.
	AS	Adjusted for simultaneous entitlement.
	A9	All other adjustment actions.
Current Payment:	CP	Current Payment Status Code.
RRB Involvement:	E	RRB paying benefits.

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III. D.6. (CONT'D)

Current Payment:	CA	Claim has been adjudicated; Entitlement is a future date.
Advanced Filing Deferred:	DP	Receipt of public assistance.
	DW	Receipt of worker's compensation.
	D1	Engaging in foreign work.
	D2	Beneficiary overpaid because of work.
	D3	Auxiliary's benefits withheld because of D2 status for primary beneficiary.
	D4	Failure to have child in care.
	D5	Auxiliary's benefits withheld because of a D1 status for primary beneficiary.
	D6	Deferred to recover overpayment for reason not attributable to earnings.
	D9	Miscellaneous deferment.
Denied:	N	Disallowed claim.
	ND	Disability claim denied.
Delayed:	K	Advanced filing for deferred payment.
	L	Advanced filing.
	P	Adjudication pending.
	PB	Benefits delayed, due but not paid.
	PT	Claim terminated from delayed status.
R	Kill Credit (deletes payment record).	
Suspended:	S0	Determination of continuing disability is pending.
	S1	Beneficiary engaged in work outside the U.S.
	S2	Beneficiary is working in the U.S. and expects to earn in excess of annual allowable limit.
	S3	Auxiliary's benefits withheld because of S2 status of primary beneficiary.
	S4	Failure to have child in care.
	S5	Auxiliary's benefits withheld due to S1 status for primary beneficiary.
	S6	Check was returned - correct address being developed.
	S7	Disabled beneficiary suspended due to refusal of vocational rehabilitation; imprisoned; extended trial work period.
	S8	Suspended while payee is being determined.
	S9	Suspended for reason not separately defined.

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III. D.6. (CONT'D)

	SD	Technical entitlement only. Beneficiary is entitled on another claim.
	SF	Special age 72 beneficiary fails to meet residency requirement.
	SH	Special age 72 beneficiary is receiving a Government pension.
	SJ	Alien suspension.
	SK	Beneficiary has been deported.
	SL	Beneficiary resides in a country to which checks cannot be sent.
	SM	Beneficiary refused cash benefits (entitled to HI-SMI only).
	SP	Special age 72 beneficiary suspended due to receiving public assistance.
	SS	Post secondary student summer suspension.
	SW	Suspended because of worker's compensation.
Terminated:	TA	Terminated prior to entitlement.
	TB	Mother, father terminated because widow(er)'s benefits.
	TC	Disabled widow attained age 62 and is not entitled as an aged widow.
	TJ	Advanced - filed claim terminated after maturity.
	TL	Termination of post secondary student.
	TP	Terminated because of change in type of benefit or post-entitlement action.
	T	Converted from disability benefits to retirement benefits upon reaching age 65.
	T0	Benefits are payable by some other agency.
	T1	Terminated due to death of the beneficiary.
	T2	Auxiliary terminated due to death of the primary.
	T3	Terminated due to divorce, marriage or remarriage of the beneficiary.
	T4	Child attained age 18 or 22 and is not disabled; mother/father terminated because last child attained age 18.
	T5	Beneficiary entitled to other benefits equal or larger.

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Terminated:	T6	Child is no longer a student or disabled; or the last entitled child died or married.
	T7	Child beneficiary was adopted.
	T8	Primary beneficiary no longer disabled or the last disabled child no longer disabled.
	T9	Terminated for reason not separately defined.
Uninsured:	U	Beneficiary is entitled only to HI or SMI.
Withdrawal	W	Withdrawal before entitlement.
Other adjustment or termination status:	X0	Claim transferred to RRB.
	X1	Beneficiary died.
	X5	Entitled to other benefits.
	X7	HIB/SMI terminated.
	X8	Payee is being developed.
	X9	Terminated for reason not separately defined.
	XD	Withdrawn for adjustment.
	XK	Deportation.
	XR	Withdraw from SMI.

7. Current Payment Amount - A six digit field indicating the monthly benefit amount paid to the beneficiary.
8. Dual Entitlement Claim ID - The other SSN under which the beneficiary is entitled.
9. Gross Payment Amount - The monthly SSA benefit due before collection of SMI premium, overpayment, attorney fees or unpaid maritime tax.
10. Triple Entitlement Claim ID - The third account on which the other entitlement exists for Title II benefits.
11. Monthly Net Benefit - The actual money amount payable before SMI deductions prior to dollar rounding.

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III. D. (CONT'D)

12. Cross Reference Claim ID - The account on which actual or potential entitlement exists. If a dual entitlement account number is provided and it is equal to the Cross Reference SSN, this field will be blank.
13. Monthly Retro Payment - Amount of underpayment for a beneficiary. A beneficiary receiving directed installments or any beneficiary receiving Title II benefits. This could be a premium refund.
14. Monthly Garnishment Amt - The amount of money withheld from the monthly payment to satisfy a court ordered garnishment.
15. Medicare Premium Deduction - Field will display active, blank, or inactive. Active means this claim is paying. Inactive means another claim (or no claim) is paying.
16. SSI Overpayment Amount - Shows the amount the number holder was overpaid in SSI benefits. Sometimes a number holder receives SSI benefits prior to receiving SSA benefits. Once the SSA benefits are awarded, a portion of the SSI benefits can be recovered. This can be done by taking money out of the number holder's SSA check each month. This withheld amount is separate and in addition to the Monthly OP DED Amt below.
17. Payee - SSA Payee Name.
18. Monthly Overpay Ded Amt - Reflects the monthly amount withheld from the benefits to recover an overpayment.
19. Payee Address Line 1 - SSA Payee Address.
20. Initial Entitlement Date - Initial entitlement date to SSA benefits. If different from Current Entitlement Date, this may indicate that the beneficiary has more than one period of entitlement.

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III. D. (CONT'D)

21. Payee Address Line 2 - SSA Payee Address.
22. Current Entitlement Date - Current entitlement date to SSA benefits.
23. Payee City and State Address - SSA Payee Address, City, and State.
24. Payee Effective Date - Payment history current effective date of current payment.
25. Payee State's Zip Code - SSA Payee State's Zip Code.
26. Overpay Deduct End Date - (MMCCYY) The month, century and year that overpayment recovery will cease. Benefits will be resumed at the full rate the following month.

E. Health Insurance Benefit (HIB-Part A)

1. Health Insurance Type -  
F = Free  
P = Premium HI
2. Premium Amount - The amount withheld for HI part A Medicare coverage, when Health Insurance is premium HI.
3. Enrollment Period -  
A = Annual Enrollment Period  
D = Initial Enrollment Period based on same or related DIB impairment  
G = General Enrollment Period  
I = Initial Enrollment Period  
N = Not within any enrollment period  
Q = Qualified Medicare Beneficiary enrollment  
R = Reinstated following appeal  
S = Special Enrollment Period  
T = Transfer  
U = Unknown  
X = Enrollment based on EBO provisional  
W = No Medicare waiting period

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III. E. (CONT'D)

4. 1st Continuous Entitlement Date - Earliest continuous date of entitlement to HI regardless of basis type.
5. HI Start Date - (MMCCYY) Start date for the basis type.
6. HI End Date - (MMCCYY) Effective date for the first month of non-coverage of the previous period of HI.
7. Basis For Insurance -  
A = Age  
D = Disabled  
E = End Stage Renal  
W = Working Disabled
8. Reason If Not Covered -  
A = Age 65 Convert  
C = DIB ceased  
D = Denied  
I = Invalid enroll  
N = No longer renal  
P = Premium  
Q = Uninsured to insured  
R = Refused  
S = No SMI coverage  
U = Unknown  
T = T2 Term  
V = Voided enrollment  
W = Enrollment withdrawal  
X = Withdrawal of application
9. 3rd Party Prem Payer -  
S01 through S99 = state billing  
T01 through Z98 = private third party billing  
Z99 = conditional state group payer
10. 3rd Party Category -  
S = State  
P = Private  
Q = QMB Conditional

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III. E. (CONT'D)

11. 3rd Party Prem Started - (MMCCYY) The effective date of the HI third party premium payer.
12. 3rd Party Prem Ended - (MMCCYY) The date the HI third party premium payment stopped.

F. Supplemental Medical Insurance Entitlement (SMI-Part B)

1. Premium Amount - The full premium amount collectible which includes the regular Part B premium, the catastrophic add-on and prescription drug add-on and IRMAA.
2. Enrollment Period -  
  
A = Annual Enrollment Period  
D = Initial Enrollment Period based on same or related DIB impairment  
G = General Enrollment Period  
I = Initial Enrollment Period  
N = Not within any enrollment period  
Q = Qualified Medicare Beneficiary enrollment  
R = Reinstated following appeal  
S = Special Enrollment Period  
T = Transfer  
U = Unknown  
X = Enrollment based on EBO provisional  
W = No Medicare waiting period
3. 1st Continuous Entitlement Date - Earliest continuous date of entitlement to SMI regardless of basis type.
4. SMI Start Date - (MMCCYY) The effective date of the first period of Supplemental Medical Insurance for the current basis type.
5. SMI End Date - (MMCCYY) The effective date for which a previous period of Part B coverage was terminated.
6. Basis for Insurance -  
  
A = Age  
D = Disability  
E = End Stage Renal  
W = Working Disabled

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III. F. (CONT'D)

7. Reason If Not Covered -

A = Age 65 convert  
C = DIB ceased  
D = Denied  
I = Invalid enroll  
Q = Uninsured to insured  
R = Refusal  
N = No longer renal  
p = Premium nonpayment  
U = Unknown  
V = Voided enrollment  
W = Enrollment withdrawal  
S = No SMI coverage  
T = T2 Term  
X = Withdrawal of application

8. 3rd Party Prem Payer -

010 through 650 = The agency code for the State billed for SMI premium payments.  
700 = Civil Service OPM  
A01 through R99 = Private payer Group Payer Enrollment.

9. 3rd Party Category -

C = Civil  
P = Private  
S = State

10. Variable SMI Premium - An amount lower than the regular amount of Supplemental medical insurance premium.

11. 3rd Party Prem Started - (MMCCYY) The date for which a third party accepted liability of first paid Part B premiums.

12. Variable SMI Start Date - (MMCCYY) Variable Supplemental Medical Insurance start date.

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III. F. (CONT'D)

13. 3rd Party Prem Ended - (MMCCYY) The last month for which a third party no longer accepted liability for Part B premiums. The third party has paid Part B premiums due for the month indicated.
14. Variable SMI End Date - (MMCCYY) Variable Supplemental Medical Insurance term date.

G. Claim Payment History

Current and Prior Three Months Social Security Claim Payments Reported = These are benefit amounts received the month following the BENDEX date plus the three prior months. These fields reflect information received from SSA. IF SSA reports zero benefits, zeroes are displayed. If no information is reported by SSA, blanks are displayed.

**NOTE: COST OF LIVING INCREASES MAY BE AN EXCEPTION BECAUSE SSA UPDATES THEM A MONTH EARLIER THAN USUAL.**

IV. ONLINE VERIFICATION SYSTEM INFORMATION:

To access the BENDEX in OLV, access the following link:

[http://www.ncdhhs.gov/ncfast/olv/OLV%20Education\\_final\\_v1.1.pdf](http://www.ncdhhs.gov/ncfast/olv/OLV%20Education_final_v1.1.pdf)

BENDEX Data Exchange Screens show the following information:

Recipient Demographic

Recipient Details

Claim Information

HIB Entitlement (Part A)

SMIT Entitlement (Part B)

Payment History

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IV. (CONT'D)

A. Recipient Demographic

RECIPIENT	Demographic
Full Name : Sunrise Sunset	
Aliases :	
Sex : Female	
Age : 43 years	
Date of Birth : 04/06/1985	
Races :	
Language :	
Ethnicity :	
Identifiers : SSN = 987654321	

1. Full Name - Full name of client in CNDS.
2. Sex - Male or Female.
3. Age - Client age in years.
4. Date of Birth - Date of birth in CNDS.
4. Races -
5. Language -
6. Ethnicity -
7. Identifiers - SSN assigned to an individual.

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IV. (CONT'D)

B. Recipients Details

DETAILS

Date of Birth Source : Proven

Death Date :

Date of Death Source :

Disability Onset Date : 1/2007

Bendex State : North Carolina

Bendex County : Beaufort

Citizenship Start 5/1967  
Date

End Date

Country US

US Citizenship Proof Proven

Type : A - Primary Claimant

Entitlement Type :

Entitlement Status :

Claim Cross References :

Dual Entitlement Claim ID :

Triple Entitlement Claim ID :

SSI Status : Ineligible

SSI Status Date : 3/1/2009

1. Date of Birth Source:

P = Proven  
Blank = Not Proven

2. Death Date: Date of Death of the recipient. Day of actual death will be shown when available. However, if the date of death is posted from a returned check, the day will reflect '01' or the date the returned check was processed.

3. Date of Death Source:

P = Proven  
Blank = Not Proven

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IV. B. (CONT'D)

4. Disability Onset Date: The entry is the month/year or N/A. In disability cases N/A means 'not available', or the onset was prior to 1975, while in non-disability cases it means 'not applicable'.
5. Bendex State:
6. Bendex County:
7. Citizenship Start Date: (MM/YY) The first month and year of client's citizenship began in a particular country.
8. Citizenship End Date: (MM/YY) The last month and year of a client's citizenship ended in a particular country.
9. Country: Country of citizenship spelled out up to 17 positions.
10. US Citizenship Proof: This position is conditional, based on the country of citizenship being the United States (US). The values are:  
  
N = Not Proven  
Y = Proven  
C = Presumed  
Or Blank when the country of citizenship is equal to anything other than the US.
11. Type:
12. Entitlement Type:
13. Entitlement Status:
14. Claim Cross References: The account on which actual or potential entitlement exists.
15. Dual Entitlement Claim ID: The other SSN under which the beneficiary is entitled.
16. Triple Entitlement Claim ID: The third account on which the other entitlement exists for Title II benefits.
17. SSI Status: Reflects the beneficiary's status in the SSI program:
  - A. Individual eligible for SSI and not eligible for Medicaid or third party buy-in.

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IV.B.17. CONT'D

- B. Terminated due to excess income resulting from Title II benefit rate increases.
- C. Conditional SSI payment.
- D. Denied
- E. Receives Federal payment.
- F. SSI recipient engaging in SGA; not eligible for special SSI payment: retains eligibility for Titles XIX and XX.
- G. Ineligible spouse or parent, or essential person.
- H. SSI recipient engaging in SGA: eligible for special SSI.
- I. Pending SSI determination.
- J. Receives State supplement.
- K. Terminated for reasons not specifically defined.
- L. Terminated due to death; source of report unknown.
- M. Terminated via T30 procedure; not reaccreted.
- N. State supplement terminated (no longer used).
- O. Terminated due to death.
- P. Terminated due to excess income.
- Q. Terminated due to excess resources.

17. SSI Status Date: (MMDDCCYY) The month of first payment or the month following the month of last payment.

C. **Claim Information**

**CLAIM INFORMATION**

<b>Claim ID :</b> 123456789D6	<b>Direct Deposit Type :</b> Checking
<b>Process Date :</b> 5/1/2011	<b>Current Payment Amount :</b> \$695.00
<b>Modification Date :</b> 4/11/2011	<b>Gross Amount Payable :</b> \$695.10
<b>Previous Modification Date :</b> 3/4/2011	<b>Monthly Net Benefit Amount :</b> \$695.00
<b>Pay status :</b> Cp - Current Payment	<b>Monthly Retroactive Payment Amount :</b> \$0.00
<b>Bendex Status :</b> Agency Conflict - Individual Was Moved From Hawaii To Nc	<b>Monthly Garnishment Amount :</b> \$0.00
<b>Welfare Agency :</b> North Carolina	<b>SSI Overpayment Amount :</b> \$0.00
<b>Initial Entitlement Date :</b> 6/1/1972	<b>Medicare Premium Deduction :</b> Inactive
<b>Current Entitlement Date :</b> 1/1/2001	<b>Monthly Overpayment Deduction Amount :</b> \$0.00
<b>Deferred Payment Date :</b>	<b>Overpayment Deduction End Date :</b>
<b>Payment Cycle :</b> Third Of The Month	<b>Payment Effective Date :</b> 11/2010
<b>Payee Information</b> Netta Della 3 Queen Rd. RALEIGH NC 99999	

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IV.C. CONT'D

1. Claim ID: The recipient's SSA claim number under which he receives benefits according to SSA files. (Refer to VIII. C. below for an explanation of the suffixes.)
2. Direct Deposit Type:  
  
C = Checking account  
S = Savings account  
Blank = No direct deposit
3. Process Date:
4. Current Payment Amount: A six digit field indicating the monthly benefit amount paid to the beneficiary.
5. Modification Date: Latest date information received from SSA
6. Gross Amount Payable: The monthly SSA benefit due before collection of SMI premium, overpayment, attorney fees or unpaid maritime tax.
7. Previous Modification Date: Previous date information received from SSA.
8. Monthly Net Benefit Amount: The actual money amount payable before SMI deductions prior to dollar rounding.
9. Pay Status: Indicates whether a benefit amount is payable or the reason it is not payable. Codes below:

Adjustment:	AD	Adjusted for dual-entitlement.
	AS	Adjusted for simultaneous entitlement.
	A9	All other adjustment actions.
Current Payment:	CP	Current Payment Status Code.
RRB Involvement:	E	RRB paying benefits.
Current Payment:	CA	Claim has been adjudicated; Entitlement is a future date.
Advanced Filing	DP	Receipt of public assistance.
Deferred:	DW	Receipt of worker's compensation.
	D1	Engaging in foreign work.
	D2	Beneficiary overpaid because of work.
	D3	Auxiliary's benefits withheld because of D2 status for primary beneficiary.
	D4	Failure to have child in care.

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IV.C.5. CONT'D

	D5	Auxiliary's benefits withheld because of a D1 status for primary beneficiary.
	D6	Deferred to recover overpayment for reason not attributable to earnings.
	D9	Miscellaneous deferment.
Denied:	N	Disallowed claim.
	ND	Disability claim denied.
Delayed:	K	Advanced filing for deferred payment.
	L	Advanced filing.
	P	Adjudication pending.
	PB	Benefits delayed, due but not paid.
	PT	Claim terminated from delayed status.
	R	Kill Credit (deletes payment record).
Suspended:	S0	Determination of continuing disability is pending.
	S1	Beneficiary engaged in work outside the U.S.
	S2	Beneficiary is working in the U.S. and expects to earn in excess of annual allowable limit.
	S3	Auxiliary's benefits withheld because of S2 status of primary beneficiary.
	S4	Failure to have child in care.
	S5	Auxiliary's benefits withheld due to S1 status for primary beneficiary.
	S6	Check was returned - correct address being developed.
	S7	Disabled beneficiary suspended due to refusal of vocational rehabilitation; imprisoned; extended trial work period.
	S8	Suspended while payee is being determined.
	S9	Suspended for reason not separately defined.
	SD	Technical entitlement only. Beneficiary is entitled on another claim.
	SF	Special age 72 beneficiary fails to meet residency requirement.
	SH	Special age 72 beneficiary is receiving a Government pension.
	SJ	Alien suspension.
	SK	Beneficiary has been deported.
	SL	Beneficiary resides in a country to which checks cannot be sent.
	SM	Beneficiary refused cash benefits (entitled to HI-SMI only).
	SP	Special age 72 beneficiary suspended due to receiving public assistance.
	SS	Post secondary student summer suspension.
	SW	Suspended because of worker's compensation.

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BENEFICIARY EXCHANGE (BENDEX)  
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IV.C.5. CONT'D

Terminated:	TA	Terminated prior to entitlement.
	TB	Mother, father terminated because beneficiary is entitled to disabled widow(er)'s benefits.
	TC	Disabled widow attained age 62 and is not entitled as an aged widow.
	TJ	Advanced - filed claim terminated after maturity.
	TL	Termination of post secondary student.
	TP	Terminated because of change in type of benefit or post-entitlement action.
	T	Converted from disability benefits to retirement benefits upon reaching age 65.
	T0	Benefits are payable by some other agency.
	T1	Terminated due to death of the beneficiary.
	T2	Auxiliary terminated due to death of the primary.
	T3	Terminated due to divorce, marriage or remarriage of the beneficiary.
	T4	Child attained age 18 or 22 and is not disabled; mother/father terminated because last child attained age 18.
	T5	Beneficiary entitled to other benefits equal or larger.
Terminated:	T6	Child is no longer a student or disabled; or the last entitled child died or married.
	T7	Child beneficiary was adopted.
	T8	Primary beneficiary no longer disabled or the last disabled child no longer disabled.
	T9	Terminated for reason not separately defined.
Uninsured:	U	Beneficiary is entitled only to HI or SMI.
Withdrawal	W	Withdrawal before entitlement.
Other adjustment	X0	Claim transferred to RRB.
	X1	Beneficiary died.
	X5	Entitled to other benefits.
	X7	HIB/SMI terminated.
	X8	Payee is being developed.
	X9	Terminated for reason not separately defined.
	XD	Withdrawn for adjustment.
	XK	Deportation.
	XR	Withdraw from SMI.

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BENEFICIARY EXCHANGE (BENDEX)

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IV.C.5. CONT'D

10. Monthly Retroactive Payment Amount: Amount of underpayment for a beneficiary. A beneficiary receiving directed installments or any beneficiary receiving Title II benefits. This could be a premium refund.
11. Bendex Status:
12. Monthly Garnishment Amount: The amount of money withheld from the monthly payment to satisfy a court ordered garnishment.
13. Welfare Agency:
14. SSI Overpayment Amount: Shows the amount the number holder was overpaid in SSI benefits. Sometimes a number holder receives SSI benefits prior to receiving SSA benefits. Once the SSA benefits are awarded, a portion of the SSI benefits can be recovered. This can be done by taking money out of the number holder's SSA check each month. This withheld amount is separate and in addition to the Monthly OP DED Amt below.
15. Initial Entitlement Date: Initial entitlement date to SSA benefits. If different from Current Entitlement Date, this may indicate that the beneficiary has more than one period of entitlement.
16. Medicare Premium Deduction: Field will display active, blank, or inactive. Active means this claim is paying. Inactive means another claim (or no claim) is paying.
17. Current Entitlement Date:
18. Monthly Overpayment Deduction Amount: Reflects the monthly amount withheld from the benefits to recover an overpayment.
19. Deferred Payment Date:
20. Overpayment Deduction End Date: (MMCCYY) The month, century and year that overpayment recovery will cease. Benefits will be resumed at the full rate the following month.

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IV.C.5. CONT'D

21. Payment Cycle:

1<sup>st</sup> cycle = 3<sup>rd</sup> of the month.  
2<sup>nd</sup> cycle = 2<sup>nd</sup> Wednesday of the month.  
3<sup>rd</sup> cycle = 3<sup>rd</sup> Wednesday of the month.  
4<sup>th</sup> cycle = 4<sup>th</sup> Wednesday of the month.

22. Payment Effective Date:

23. Payee Information:

SSA Payee Name  
SSA Payee Address  
SSA Payee Address Line 2  
SSA City, and State  
SSA Payee State's Zip Code

IV. D. HIB ENTITLEMENT (PART A)

HIB ENTITLEMENT (PART A)

Type : Free      Premium Amount : \$0.00

Enrollment      Entitlement Date : 1/2001  
Period :

HI Start Date 3/1/2004      1/1/2001

HI End Date      3/1/2004

Basis for Age      Disabled  
Insurance

Reason If Not      Age 65 Convert  
Covered

3rd Party Premium Payer  
:

3rd Party Category :

3rd Party Premium Start  
Date :

3rd Party Premium End  
Date :

1. Type:

F = Free  
P = Premium HI

2. Premium Amount - The amount withheld for HI part A Medicare coverage, when Health Insurance is premium HI.

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BENEFICIARY EXCHANGE (BENDEX)

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IV. D. (CONT'D)

3. Enrollment Period:

Annual Enrollment Period

Initial Enrollment Period based on same or related DIB  
impairment

General Enrollment Period

Initial Enrollment Period

Not within any enrollment period

Qualified Medicare Beneficiary enrollment

Reinstated following appeal

Special Enrollment Period

Transfer

Unknown

Enrollment based on EBO provisional

No Medicare waiting period

4. Entitlement Date: Current entitlement date to SSA  
benefits.

5. HI Start Date: (MMDDCCYY) Start date for the basis  
type.

6. HI End Date: (MMDDCCYY) Effective date for the first  
month of non-coverage of the previous period of HI.

7. Basis for Insurance Age:

A = Age

D = Disabled

E = End Stage Renal

W = Working Disabled

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BENEFICIARY EXCHANGE (BENDEX)

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IV. D. (CONT'D)

8. Reason If Not Covered:
- Age 65 Convert
  - DIB ceased
  - Denied
  - Invalid enroll
  - No longer renal
  - Premium
  - Uninsured to insured
  - Refused
  - No SMI coverage
  - Unknown
  - T2 Term
  - Voided enrollment
  - Enrollment withdrawal
  - Withdrawal of application
9. 3<sup>rd</sup> Party Premium Payer:
- S01 through S99 = state billing
  - T01 through Z98 = private third party billing
  - Z99 = conditional state group payer
10. 3<sup>rd</sup> Party Category:
- State
  - Private
  - QMB Conditional
11. 3<sup>rd</sup> Party Premium Start Date: (MMCCYY) The effective date of the HI third party premium payer.
12. 3<sup>rd</sup> Party Premium End Date: (MMCCYY) The date the HI third party premium payment stopped.



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BENEFICIARY EXCHANGE (BENDEX)

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**IV.E. (CONT'D)**

4. SMI Start Date: (MMCCYY) The effective date of the first period of Supplemental Medical Insurance for the current basis type.
5. SMI End Date: (MMCCYY) The effective date for which a previous period of Part B coverage was terminated.
6. Basis for Insurance:
  - A Age
  - D Disability
  - E End Stage Renal
  - W Working Disabled
7. Reason If Not Covered
  - A Age 65 Convert
  - C DIB ceased
  - D Denied
  - I Invalid enroll
  - N No longer renal
  - P Premium
  - Q Uninsured to insured
  - R Refused
  - S No SMI coverage
  - U Unknown
  - T T2 Term
  - V Voided enrollment
  - W Enrollment withdrawal
  - X Withdrawal of application
8. 3rd Party Premium Payer:

010 through 650: The agency code for the State billed for SMI premium payments.

700: U.S. Civil Service Commission
9. Variable SMI Premium:
10. 3<sup>rd</sup> Party Category:

Civil  
Private  
State
11. Variable SMI Start Date: (MMCCYY) Variable Supplemental Medical Insurance start date.

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BENEFICIARY EXCHANGE (BENDEX)  
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**IV. E. (CONT'D)**

- 12. 3<sup>rd</sup> Party Premium Start Date: (MMCCYY) First month of coverage for which third party paid HI premium.
- 13. Variable SMI End Date: (MMCCYY) Variable Supplemental Medical Insurance termination date.
- 14. 3<sup>rd</sup> Party Premium End Date: (MMCCYY) Last month of coverage for which third party paid HI premium.

**IV. F. PAYMENT HISTORY**

**PAYMENT HISTORY**

Railroad  
Claim ID :

Railroad Jurisdiction Start Date :

Railroad  
Status :

Railroad Jurisdiction End Date :

Date	Amount
5/1/2011	\$695.00
4/1/2011	\$695.00
3/1/2011	\$695.00
2/1/2011	\$695.00

- 1. Railroad Claim ID: Railroad Retirement Board account number.
- 2. Railroad Jurisdiction Start Date: (MMDDYY) Railroad Annuitant claim was effective.
- 3. Railroad Status: One letter code to indicate the status of Railroad Claim:  
  
A = Indicates a current payment  
T = Indicates Railroad benefit terminated.
- 4. Railroad Jurisdiction End Date: (MMDDYY) Railroad Annuitant's benefits stop date.  
  
Date/Amount: Beneficiary's prior month's benefit amount.

**IV. G. LOGOFF PROCEDURES**

Click the Log Out button.

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BENEFICIARY EXCHANGE (BENDEX)

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**V. USE OF FORMS**

The BENDEX sheets and on-line BENDEX must be used as much as possible. However, there may be situations which require additional information.

**A. Use form DMA-5049 (Referral to local Social Security Office) for Medicaid clients who:**

1. Have potential for RSDI benefits but have not applied; or
2. Have applied for RSDI benefits but have not been notified of a decision; or
3. Have a change in case status and the Social Security office needs to be notified.

**B. Use form SSA-1610 (Information Request and Report) to:**

1. Verify the date of receipt of lump sum payments from RSDI.
2. Obtain additional information to verify or clarify recorded data on a Medicaid recipient appearing erroneously on the printout.
  - a. Indicate the item(s) in question in red ink.
  - b. Obtain clarification/verification by telephone from the local SSA Office when there is an emergency need for the item in question.

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**VI. MESSAGE LIST**

**A. Payment Status Messages**

1. **Adjustment Messages** - The beneficiary's account has been withdrawn for adjustment as:

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"ONE OF SEVERAL POSSIBLE RATE ADJUSTMENTS IS BEING FIGURED"	The adjustment is generally accomplished in 30 days. A subsequent BENDEX verifies the new amount.
"MISCELLANEOUS ADJUSTMENT NOT PROVIDED WITH A SPECIFIC CODE"	No specific reason is provided by SSA. A Subsequent BENDEX verifies the new benefit amount.
"CHANGE IN BENEFIT RATE NOT DUE TO A RECOMPUTATION TO INCLUDE ADDITIONAL EARNINGS"	Benefits are being adjusted due to reasons other than earnings. A subsequent BENDEX verifies the new benefits amount.
"AN AUXILIARY'S/SURVIVOR'S BENEFITS ARE BEING COMBINED WITH THAT INDIVIDUAL'S OWN OLD AGE INSURANCE BENEFIT"	For example, combining a widow's benefit with the wage earner's own retirement. A subsequent BENDEX verifies the new benefit amount.
"CANCELLATION OF WORKMAN'S COMPENSATION OFFSET IS IN PROCESS"	Recipient has been receiving workman's compensation which is terminated. A subsequent BENDEX verifies the new benefit amount.

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BENEFICIARY EXCHANGE (BENDEX)

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VI. A.1. (CONT'D)

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"A BENEFICIARY WHO HAS BEEN ENTITLED TO HIS ONLY IS NOW BEING AWARDED MONTHLY BENEFIT"	A recipient who has been entitled to hospital insurance to hospital insurance benefits only is now being awarded monthly Social Security payment. A subsequent BENDEX verifies the new benefit amount.
"RECOMPUTATION"	SSA is re-computing the person's SSA payment. A subsequent BENDEX verifies the new amount.
"SPLIT PAYMENTS" (Advance File Only)	A husband and wife's benefit formerly combined into one check is now being split. Each receives a separate check. A subsequent BENDEX verifies the new amount.
"CHANGE IN PAYMENT IDENTIFICATION CODE OR POST ENTITLEMENT ACTION"	Self-explanatory. A subsequent BENDEX verifies the new amount.
"SIMULTANEOUS ENTITLEMENT"	Person is entitled under two account numbers. A subsequent BENDEX PROVIDES BENEFIT AMOUNTS.
"WORKMAN'S COMPENSATION OFFSET IS BEING IMPOSED"	Benefits are being adjusted because the recipient <u>is receiving</u> workman's compensation. A subsequent BENDEX verifies the Social Security.

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BENEFICIARY EXCHANGE (BENDEX)

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**VI. A.1. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"STATUS IS BEING CHANGED FROM NON-PAYMENT TO CURRENT PAYMENT STATUS"	A recipient who has not been receiving payment is now being awarded monthly benefits. A subsequent BENDEX verifies the new amount.
"STATUS IS BEING CHANGED FROM CURRENT-PAYMENT STATUS TO DEFERRED-PAYMENT STATUS"	A recipient's monthly Social Security Benefits have been postponed for future payment.
"ABATEMENT STATUS"	A claim was filed but the recipient died prior to entitlement.

**2. Currently Paid Status Messages**

"BENEFICIARY IN CURRENT PAY STATUS"	Recipient receives Social Security.
"CURRENT PAYMENT, ADVANCE FILING"	Payment is effective on the date shown as initial date of entitlement. Explanation: A payment for November is paid on December 3, etc.

**3. Deferred/Suspended Messages**

"BENEFICIARY IS ENGAGING IN FOREIGN WORK"	Recipient is engaged in works outside the USA.
"TO RECOVER AN OVERPAYMENT RESULTING FROM BENEFICIARY'S WORK"	SSA is recovering an overpayment due to beneficiary working.
"AUXILIARY'S BENEFITS WITHHELD BECAUSE OF AN OVERPAYMENT RESULTING FROM PRIMARY BENEFICIARY WORK"	Wife/child's benefits are deferred because the primary beneficiary's benefits are deferred. SSA is recovering overpayment due to work.

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VI. A.3. (CONT'D)

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"YOUNG MOTHER (under age 62) HAS NO CHILD IN HER CARE"	There is no child in the care of this recipient.
"AUXILIARY'S BENEFITS WITHHELD BECAUSE PRIMARY BENEFICIARY IS ENGAGING IN FOREIGN WORK"	Wife/child's benefits are being withheld because the primary beneficiary is working outside the USA.
"IN ORDER TO RECOVER AN OVERPAYMENT WHICH RESULTED FOR REASONS NOT ATTRIBUTABLE TO EARNINGS"	SSA is recovering an overpayment.
"FOR REASONS OF MISCELLANEOUS DEFERMENT NOT PROVIDED WITH A SPECIFIC CODE"	Self-explanatory. A subsequent BENDEX may be received showing resumption of benefits.
"BENEFICIARY IS RECEIVING PUBLIC ASSISTANCE"	A PROUTY beneficiary is receiving public assistance or SSI. When public assistance is terminated, the recipient again is eligible for Social Security.
"BENEFICIARY IS RECEIVING WORKMAN'S COMPENSATION"	Pertains only to disability beneficiaries. Workman's compensation <u>equals or exceeds</u> benefits.
"CONTINUING DISABILITY INVESTIGATION"	SSA is investigating whether the recipient continues to be disabled.
"WORKING BENEFICIARY"	Recipient's earning have exceeded or are anticipated to exceed the monthly and yearly limits.
"AUXILIARY BENEFITS WITHHELD - WORK STATUS"	Wife/child's benefits suspended because primary beneficiary's earnings have exceeded or are anticipated to exceed monthly and calendar year limits.

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BENEFICIARY EXCHANGE (BENDEX)  
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VI. A.3. (CONT'D)

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"CHECK RETURNED FOR WRONG ADDRESS	The recipient's check returned to SSA marked "address unknown." SSA is investigating.
"DIB BENEFICIARY REFUSED VOC-REHAB"	A recipient of disability insurance benefits refused to accept vocational rehabilitation services.
"PAYEE NOT DETERMINED"	SSA is in the process of establishing a payee.
"UNKNOWN"	Benefits suspended with no specific reason given. (Recipient's notice from SSA contains a specific reason for suspension.)
"SPECIAL AGE 72 (PROUTY) RECEIVING GOVERNMENT PENSION"	A PROUTY beneficiary is receiving a government pension, which is <u>equal to or greater than</u> benefit.
"BENEFICIARY REFUSED BENEFITS"	The beneficiary refused to accept Social Security benefits. (Entitled to HIB-SMIB only).
"BENEFICIARY HAS BEEN DEPORTED"	Self-explanatory.
"BENEFITS DUE BUT NOT PAID"	Usually less than \$1.00.
"TECHNICAL ENTITLEMENT"	Entitlement to a benefit on another claim causes an auxiliary benefit on this claim not to be paid.
"SPECIAL AGE 72 (PROUTY) BENEFICIARY SUSPENDED BECAUSE OF FAILURE TO MEET RESIDENCY REQUIREMENTS"	Recipient not admitted to USA for permanent status.

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**VI. A.3. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"ALIEN SUSPENSION SECTIONS OF SOCIAL SECURITY ACT APPLY"	Either recipient has not been admitted for permanent residency and/or has not been in the USA for 5 years. Social Security office can provide reason for suspension.
"BENEFICIARY RESIDES IN A COUNTRY TO WHICH CHECKS CANNOT BE SENT"	Self-explanatory.
"WORKMAN'S COMPENSATION PAYMENTS PRECLUDE PAYMENT OF BENEFITS"	Pertains only to disability beneficiaries. Workman's compensation <u>equals or exceeds benefits</u> .

**4. Termination Messages**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"ENTITLED TO OTHER FEDERAL BENEFITS"	The benefits are payable by an agency other than SS (For example: VA or Railroad Retirement).
"DEATH OF BENEFICIARY"	Self-explanatory.
"DEATH OF PRIMARY BENEFICIARY"	Self-explanatory. BENDEX data for survivors (widow/children) verifies new Social Security benefits for them.
"BENEFICIARY'S MARITAL STATUS WAS CHANGED"	Self-explanatory.
"CHILD ATTAINED MATURITY"	A child beneficiary attained age 18 (or 22 if an active student) and is not disabled or attending school; or, if beneficiary is a mother/father, terminated based on last entitled child's attainment of age 18.

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**VI. A.4. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"ENTITLED ON OTHER ACCOUNT"	The recipient is entitled to benefits on another account.
"CHILD'S STATUS CHANGED"	A child is no longer a student or disabled, or (if beneficiary is a mother/father) the last entitled child died or married.
"CHILD ADOPTED"	A child recipient has been adopted.
"BENEFICIARY RECOVERED"	The primary beneficiary or the last disabled child recovered from a disability.
"TERMINATED-REASON UNKNOWN"	Self-explanatory. The specific reason for termination will be provided in the recipients notice from SSA.
"DISABLED WIDOW(ER) HAS REACHED AGE 65 BEING CONVERTED TO AGED BENEFITS"	Self-explanatory. Claim suffix changes from W to D.
"TERMINATED PRIOR TO ENTITLEMENT"	Self-explanatory.
"ADVANCE FILED CLAIM TERMINATED AFTER MATURITY"	Terminated prior to entitlement. Action too late to stop check from being issued.
"BENEFICIARY BECAME ENTITLED TO WIDOW(ER)'S BENEFITS BASED ON DISABILITY"	Self-explanatory.
"CHANGE OF BENEFICIARY ACCOUNT SUFFIX"	Social Security claim suffix has changed. Example: B to D.
"CLAIM WITHDRAWN"	Self-explanatory.

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**VI. A.4. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"TERMINATION OF STUDENTS (POST SECONDARY) BENEFITS DUE TO LEGISLATIVE CHANGES IN STUDENT REQUIREMENTS."	Self-explanatory.
5. <b>Non-Payment Status Information</b> - The following SSA messages are printed when an individual is removed from the category of HIB-SMI Only Benefits:	
"DEATH OF BENEFICIARY"	Self-explanatory.
"BENEFICIARY ENTITLED TO CASH BENEFITS"	A recipient entitled to hospital or supplemental medical benefits only is now in the process of becoming eligible for cash benefits. Subsequent BENDEX contains the new amount.
"PAYEE NOT DETERMINED"	Self-explanatory.
"MISCELLANEOUS"	Miscellaneous termination reason not provided with a specific code.
"CLAIM TRANSFERRED TO RRB"	Self-explanatory.
"HOSPITAL OR SMI ONLY BENEFITS BEING TERMINATED"	Self-explanatory. SSA can provide reason for termination.
"WITHDRAWN FOR ADJUSTMENT"	Self-explanatory.
"WITHDRAWN BECAUSE FILE IS BEING TRANSFERRED TO ANOTHER PAYMENT CENTER"	Self-explanatory.

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**VI. A. 5. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"BENEFICIARY NO LONGER ELIGIBLE FOR HOSPITAL OR SMI ONLY BENEFITS BECAUSE HE/SHE WAS DEPORTED"	Self-explanatory.
"WITHDRAWAL OF SMI BENEFITS (BENEFICIARY WAS ENTITLED TO SMIB ONLY)"	Recipient requested SMI be terminated.
"TERMINATED TITLE XVIII STATUS"	Self-explanatory.
<b>B. SMI (Medicare B) Option</b>	
"ENROLLED IN SMIB"	Self-explanatory.
"NO SMI-CESSATION OF DISABILITY"	Recipient recovered from disability.
"SMI DENIED"	Recipient is ineligible for SMI.
"BENEFICIARY ENROLLED FOR SMI UNDER SSA GOOD CAUSE"	Recipient had a good reason for late enrollment for SMI.
"NO RESPONSE FROM BENEFICIARY WHEN ASKED FOR ELECTION CONCERNING SMI"	Self-explanatory.
"INVALID ENROLLMENT HAS BEEN TERMINATED"	Self-explanatory.
"NO SMI TERMINATED BECAUSE OF NON-PAYMENT OF PREMIUMS"	Self-explanatory.
"VOLUNTARY WITHDRAWAL FROM SMIB"	Self-explanatory.

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**VI. B. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"BENEFICIARY ENTITLED TO SMIB; RAILROAD RETIREMENT BOARD HAS JURISDICTION FOR PREMIUM COLLECTION"	Recipient is receiving Railroad Retirement benefits. RR Board responsible for collecting premiums.
"SMI REFUSED OR DENIED FOR ALIEN RESIDENT"	Beneficiary refused supplemental medical insurance benefits or was denied for alien resident.
"NO SMI; NO LONGER UNDER RENAL DISEASE PROVISION"	Relates to disabled recipient who had kidney transplant or dialysis ended 12 months ago.

**C. Communication Code**

**1. Records which are fully processed and contain  
pertinent MBR data:**

"AGENCY CONFLICT - INDIVIDUAL ALREADY ACCRETED BY STATE XXX"	Record is in conflict with another state. Fraud may be a possibility.
"RECORD MATCHED"	Record is fully processed with pertinent data extracted from the MBR.
"BENEFITS, IF PAYABLE, ARE PAID TO OTHER THAN BENEFICIARY"	Self-explanatory.
"THE BENEFICIARY WAS TERMINATED MMYY BY SSA. NO FURTHER REPORTS WILL BE FURNISHED UNDER THIS CLAIM NUMBER"	Self-explanatory.
"SSA HAS NOT COMPLETED FULL SEARCH OF THE MASTER BENEFICIARY RECORD AND IS CONTINUING TO INVESTIGATE"	The state should receive a record in the next regular BENDEX run.

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**VI. C.1. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"BENEFICIARY IS TERMINATED ON THIS RECORD. THE MBR CONTAINS A CROSS-REFERENCE NUMBER, BUT THE SYSTEM WAS NOT ABLE TO LOCATE THE OTHER RECORD."	Self-explanatory.
"POSSIBLE ENTITLEMENT UNDER ANOTHER ACCOUNT, BUT SSA IS UNABLE TO DETERMINE THE OTHER ACCOUNT - STATE SHOULD DETERMINE PROPER CLAIM NUMBER AND RESUBMIT TO BENDEX."	No further exchange is made on this terminated case.
<b>2. Records returned without any information:</b>	
"SSI-RRB" NO TITLE II DATA EXISTS FOR THIS PERSON AT THIS TIME.	Self-explanatory.

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**VI. C. (CONT'D)**

3. **Records returned without full MBR data since disclosure is no longer appropriate:**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"CLIENT IS TERMINATED FROM BUY-IN-STATE SHOULD REACCRETE IF ELIGIBILITY IS ONGOING".	No further data exchange through BENDEX.
"STATE HAS DELETED FROM BENDEX DUE TO DEATH OR CLIENT NO LONGER ELIGIBLE ON STATE ROLLS".	Self-explanatory.
"AGENCY CONFLICT-ACTIVE BENDEX EXCHANGE ONGOING STATE XXX".	Record is in conflict with another state. One state is deleting their record and receiving no further exchange.

4. **Records returned without MBR data:**

"THE ACCOUNT HOLDER ON THIS ACCOUNT DIED IN MMY. CLAIMANTS FOR SURVIVOR BENEFITS MAY BE REFERRED TO LOCAL SSA OFF"	Self-explanatory.
"DOB UNM"	Date of birth unmatched on month and year. Processing ceased.
"GIV UNM"	Given name unmatched. Processing ceased.

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**VI. C.4. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"IMP CAN"	Impossible claim number. The SSN on the input record is invalid; not all numeric or out of the range issued by SSA.
"IMP CODE"	The communication code on direct input record is either blank or invalid.
"NO AUTH"	Category of assistance code on direct input case is missing or invalid.
"NO DEX"	SSA is unable to determine which action the state is attempting. Accretion and deletion cases received as direct input for same SSN.
"NO FILE"	Claim number in possible range but nonexistent on MBR. No entitlement to SSA benefits on this SSN.
"SUR UNM"	Surname unmatched. Processing ceased.
"?"	Error in SSA Communication Code.

**D. Hospital Insurance - (Medicare A) Option**

"NO. CESSATION OF DISABILITY"	Self-explanatory.
"NO. DENIED"	Self-explanatory.
"YES. AUTOMATIC ENTITLEMENT, NO PREMIUM NECESSARY"	Self-explanatory.

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**VI. D. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"NO. TERMINATED FOR INVALID ENROLLMENT OR ENROLLMENT VOIDED"	Self-explanatory.
"YES. GOOD CAUSE"	Self-explanatory.
"NO NOT ELIGIBLE FOR FREE PART A, OR DID NOT ENROLL FOR PREMIUM PART A"	Self-explanatory.
"RAILROAD JURISDICTION"	Self-explanatory.
"NO. REFUSED FREE PART A"	Self-explanatory.
"NO. TERMINATED NO LONGER ENTITLED UNDER RENAL DISEASE PROVISION"	Self-explanatory.
"NO. TERMINATED FOR NON-PAYMENT OF PREMIUMS"	Self-explanatory.
"NO. WITHDRAWAL FROM PREMIUM PART A"	Self-explanatory.
"YES. PREMIUM PART A IS PAYABLE"	Self-explanatory.
"NO. PART A TERMINATED DUE TO DIVORCE, MARRIAGE, DISABILITY RECOVERY OR MISCELLANEOUS".	Self-explanatory.

**E. SSI Indicator**

"TERMINATED DUE TO EXCESS INCOME CAUSED BY TITLE II BENEFIT RATE INCREASE"	First month of non-eligibility.
"CONDITIONAL SSI PAYMENT"	First month of entitlement.
"DENIED"	Denial date.

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**VI. E. (CONT'D)**

<u>SSA MESSAGE</u>	<u>EXPLANATION</u>
"BENEFICIARY IS ELIGIBLE FOR SSI"	First month of entitlement (Initial or first month of entitlement after redetermination).
"ENGAGING IN SGA, NOT ELIGIBLE FOR SPECIAL SSI PAYMENT BUT RETAINS ELIGIBILITY FOR TITLE XIX AND TITLE XX"	First month of non-eligibility for payment.
"INELIGIBLE SPOUSE, PARENT, ESSENTIAL PERSON"	Date of filing.
"ENGAGING IN SGA; ELIGIBLE FOR SPECIAL SSI PAYMENT"	First month of entitlement.
"PENDING SSI DETERMINATION"	Date of filing.
"ENTITLED TO SSI STATE SUPPLEMENT ONLY"	First month of entitlement.
"NON-PAYMENT"	First month of non-eligibility.
"RETURNED CHECK, DATE OF DEATH QUESTIONABLE"	Month check returned, Title XVI and Buy-In terminated; Title II not terminated until valid date of death received.
"TERMINATED (T30), BUT NOT REACCREDITED"	First month of non-eligibility.
"STATE SUPPLEMENT TERMINATED"	First month of non-eligibility. (No longer used.)
"TERMINATED-DEATH"	First month of non-eligibility.
"TERMINATED-EXCESS INCOME"	First month of non-eligibility.
"TERMINATED-EXCESS RESOURCES"	First month of non-eligibility.

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**VII. DEFINITION LISTING**

**Adjustment** - A recipient's benefits are changed due to re-computation of earnings or another change in situation.

**Accretion** - An individual added to the BENDEX files.

**Beneficiary/Recipient** - An individual added to the BENDEX files.

**BIC** - Beneficiary Identification Code. This is the suffix to SSN or claim number.

**Buy-In** - A program whereby the state pays Supplemental Medical Insurance (SMI) premiums for eligible Medicaid recipients.

**CAN** - SSA abbreviation for "Claim Account Number."

**Change Report** - The BENDEX record automatically submitted to the State when an individual has a change in Social Security entitlement, benefit amount, benefit status, Supplemental Medical Insurance option, and Supplemental Security Income status.

**Claim Number** - The account number used by SSA to identify the individual whose earnings benefits are being paid. It is an account number followed by a suffix, sometimes as many as three characters, designating the type of beneficiary; for example, wife, widow, child, etc. suffixes.

**Claimant** - A person who has filed an application for Social Security benefits but has not yet received them.

**Current Pay Status** - The beneficiary is being paid his monthly benefits on a regular schedule.

**Deferred** - A payment status in which the payment is made at a later date for various reasons.

**Deletion** - The removal of a person from the BENDEX program for various reasons, such as he is no longer a recipient of public assistance.

**DMA - 5004 (DSS-MS-3)** - The form completed by the income maintenance caseworker to notify the central office that an individual has not been correctly added to or deleted for Medicare Buy-In or to report incorrect dates of coverage.

**EIS** - Eligibility Information System.

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**VII. (CONT'D)**

**Eligible** - As applied to Title II, a potential beneficiary meets all the requirements for receiving Social Security benefits except that he has not yet filed an application. As applied to Title XVI, Supplemental Security Income (SSI), an individual is receiving SSI payments.

**Entitlement** - A potential beneficiary has met all the legal requirements for receiving Social Security benefits and receives the payment as his legal right.

**FSA** - Family Support Administration. The federal office in Health and Human Services responsible for the administration of the AFDC programs.

**FSIS** - Food Stamp Information System.

**HCFA** - Health Care Finance Administration. The federal office in Health and Human Services responsible for administration of the Medicare and Medicaid programs.

**HI** - SSA abbreviation for Health Insurance.

**HIB** - SSA abbreviation for Hospital Insurance Benefits (Medicare A).

**Initial BENDEX Record** - The addition of a record prepared by the State to initiate BENDEX exchange between SSA and the State for all public assistance recipients with a Social Security claim or account number reported on computer input documents.

**MBR** - SSA abbreviation for Master Beneficiary Record. This is a tape record containing the payment, beneficiary, and benefit history data for beneficiaries entitled to Social Security benefits.

**MMDDYY** - A code indicating the six positions for month, day, and year.

**Non-Matched Record** - SSA was unable to match the data sent by the State. The reason for the non-match is printed on an Individual BENDEX Data Exchange Report sent to you.

**Payment Status** - The status of the beneficiary's Social Security benefits. They may be suspended, deferred, or currently paid or terminated.

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**VII. (CONT'D)**

**PROUTY Beneficiary** - A person receiving special Social Security benefits not based solely on quarters of coverage.

**Railroad Claim Number** - The number issued by the Railroad Retirement Board to control payments of annuities and pensions under the Railroad Retirement Act. The claim number begins with a one to three letter alphabetic prefix denoting the type of payment, followed by six or nine numeric digits. Although acceptable for SMI Buy-In purposes, Railroad Retirement (RR) claim numbers cannot be used to obtain RR benefit information through BENDEX.

**RSDI** - SSA abbreviation for Retirement, Survivors, and Disability Insurance.

**SMI (SMIB)** - This is a SSA abbreviation for Supplemental Medical Insurance. It is also known as "Part B" of Medicare.

**SMIB Option** - This is a SSA code to indicate the beneficiary's status relative to SMI.

**SSA** - Social Security Administration of the Department of Health and Human Services.

**SSI** - Supplemental Security Income. The Title XVI program which provides cash assistance to needy aged, blind, and disabled persons.

**SSI/SDX** - Supplemental Security Income. Supplemental Security Income/State Data Exchange used in verifying SSI benefits.

**SSN** - The beneficiary's own account number (also known as BOAN).

**State Agency Code** - A three-digit code, which identifies each state. See State Codes.

**State BENDEX File** - The file is set up and maintained by Data Processing on all public assistance recipients for whom BENDEX exchange has been requested. This file is updated with the receipt of new or corrected information.

**Suspended** - SSA is taking action to stop the payment of monthly benefits until certain conditions are met by the beneficiary, such as when continuing disability must be determined.

**Terminated** - SSA is taking action to terminate monthly benefits for various reasons, such as death or marriage of the beneficiary.

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VII. (CONT'D)

**Wage Earner** - A SSA term for the person who earned the income used as the basis for the Social Security account from which benefits are being paid. The person to whom the account number was originally assigned.

VIII. SSA SYSTEMS INTERFACE IDENTIFICATION CODES

A. SSI Only Claim Number Suffixes

- SA - Aged individual or spouse
- SB - Blind individual, spouse or child
- SD - Disabled individual, spouse or child
- SE - Essential person only
- SP - Ineligible parent
- SS - Ineligible spouse
- ST - Essential person only (ineligible parent or spouse)

B. State Codes

STATE	CODE	STATE	CODE
Alabama	010	Montana	270
Alaska	020	Nebraska	280
Arizona	030	Nevada	290
Arkansas	040	New Hampshire	300
California	050	New Jersey	310
Colorado	060	New Mexico	320
Connecticut	070	New York	330
Delaware	080	North Carolina	340
District of Columbia	090	North Dakota	350
Florida	100	Ohio	360
Georgia	110	Oklahoma	370
Guam	650	Oregon	380
Hawaii	120	Pennsylvania	390
Idaho	130	Puerto Rico	400
Illinois	140	Rhode Island	410
Indiana	150	American Samoa	640
Iowa	160	South Carolina	420
Kansas	170	South Dakota	430
Kentucky	180	Tennessee	440
Louisiana	190	Texas	450
Maine	200	Utah	460
Maryland	210	Vermont	470
Massachusetts	220	Virgin Islands	480
Michigan	230	Virginia	490
Minnesota	240	Washington	500
Mississippi	250	West Virginia	510
Missouri	260	Wisconsin	520
		Wyoming	530

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**VIII. (CONT'D)**

**C. SSA Suffix Codes**

SSA Award Letters may have an "H" in the claim number; however, "H" is not part of the claim symbol. Please disregard the "H". Following is a list of all valid SSA Suffix Codes (claim symbols) with a brief description:

- A - PRIMARY Beneficiary (wage earner)
- B - Wife, age 62 or older (1<sup>st</sup> claimant)
- B1 - Husband, age 62 or older (1<sup>st</sup> claimant)
- B2 - Wife, under age 62 (1<sup>st</sup> claimant)
- B3 - Wife, age 62 or older (2<sup>nd</sup> claimant)
- B4 - Husband, age 62 or older (2<sup>nd</sup> claimant)
- B5 - Wife under age 62 (2<sup>nd</sup> claimant)
- B6 - Divorced Wife (1<sup>st</sup> claimant)
- B7 - Wife under age 62 (3<sup>rd</sup> claimant)
- B8 - Wife age 62 or older (3<sup>rd</sup> claimant)
- B9 - Divorced wife (2<sup>nd</sup> claimant)
- BA - Wife age 62 or older (4<sup>th</sup> claimant)
- BD - Wife age 62 or older (5<sup>th</sup> claimant)
- BG - Husband age 62 or older (3<sup>rd</sup> claimant)
- BH - Husband age 62 or older (4<sup>th</sup> claimant)
- BJ - Husband age 62 or older (5<sup>th</sup> claimant)
- BK - Wife under age 62 (4<sup>th</sup> claimant)
- BL - Wife under age 62 (5<sup>th</sup> claimant)
- BN - Divorced wife (3<sup>rd</sup> claimant)
- BP - Divorced wife (4<sup>th</sup> claimant)
- BQ - Divorced Wife (5<sup>th</sup> claimant)
- BR - Divorced husband (1<sup>st</sup> claimant)
- BT - Divorced husband (2<sup>nd</sup> claimant)
- BW - Young husband (2<sup>nd</sup> claimant)
- BY - Young husband (1<sup>st</sup> claimant)
- C1-C9, CA-CE: Child (including disabled or student child).
  - The oldest child will have the highest suffix.
  - Suffixes will descend to C1 for the youngest child.
  - If there are more than nine children, there will be an alphabetic suffix beginning with CA for the 10<sup>th</sup> child.
- D - Widow, age 60 or older (1<sup>st</sup> claimant)
- D1 - Widower, age 60 or older (1<sup>st</sup> claimant)
- D2 - Widow, age 60 or older (2<sup>nd</sup> claimant)
- D3 - Widower, age 60 or older (2<sup>nd</sup> claimant)
- D4 - Widow, remarried after attaining age 60 (1<sup>st</sup> claimant)
- D5 - Widower, remarried (1<sup>st</sup> claimant)
- D6 - Surviving divorced wife (1<sup>st</sup> claimant)
- D7 - Surviving divorced wife (2<sup>nd</sup> claimant)
- D8 - Widow, age 60 or older (3<sup>rd</sup> claimant)

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**VIII. C. (CONT'D)**

D9 - Widow, remarried after age 60 (2nd claimant)  
DA - Widow, remarried after age 60 (3<sup>rd</sup> claimant)  
DC - Surviving divorced husband (1<sup>st</sup> claimant)  
DD - Widow, age 60 or older (4<sup>th</sup> claimant)  
DG - Widow, age 60 or older (5<sup>th</sup> claimant)  
DH - Widower, age 60 or older (3<sup>rd</sup> claimant)  
DJ - Widower, age 60 or older (4<sup>th</sup> claimant)  
DK - Widower, age 60 or older (5<sup>th</sup> claimant)  
DL - Widow remarried after age 60 (4<sup>th</sup> claimant)  
DM - Surviving divorced husband (2<sup>nd</sup> claimant)  
DN - Widow, remarried after age 60 (5<sup>th</sup> claimant)  
DP - Widower, remarried (2nd claimant)  
DQ - Widower, remarried (3<sup>rd</sup> claimant)  
DR - Widower, remarried (4TH claimant)  
DS - Surviving divorced husband (3rd claimant)  
DT - Widower, remarried (5th claimant)  
DV - Surviving divorced wife (3rd claimant)  
DW - Surviving divorced wife (4<sup>th</sup> claimant)  
DX - Surviving divorced husband (4th claimant)  
DY - Surviving divorced wife (5th claimant)  
DZ - Surviving divorced husband (5<sup>th</sup> claimant)  
E - Mother (1st claimant)  
E1 - Surviving divorced mother (1st claimant)  
E2 - Mother (2nd claimant)  
E3 - Surviving divorced mother (2nd claimant)  
E4 - Widowed father (1st claimant)  
E5 - Surviving divorced father (1st claimant)  
E6 - Widowed father (2nd claimant)  
E7 - Mother (3rd claimant)  
E8 - Mother (4th claimant)  
E9 - Surviving divorced father (2nd claimant)  
EA - Mother (5th claimant)  
EB - Surviving divorced mother (3rd claimant)  
EC - Surviving divorced mother (4th claimant)  
ED - Surviving divorced mother (5th claimant)  
EF - Widowed father (3rd claimant)  
EG - Widowed father (4th claimant)  
EH - Widowed father (5th claimant)  
EJ - Surviving divorced father (3rd claimant)  
EK - Surviving divorced father (4th claimant)  
EM - Surviving divorced father (5th claimant)  
F1 - Father (1st claimant)  
F2 - Mother (1st claimant)  
F3 - Stepfather  
F4 - Stepmother  
F5 - Adopting Father  
F6 - Adopting Mother  
F7 - Father (2nd claimant)  
F8 - Mother (2nd claimant)

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**VIII. C. (CONT'D)**

G1-G9 - Claimants of Lump-Sum Death Benefits  
J1 - Entitled to HIB (less than 3 quarters coverage)  
J2 - Entitled to HIB (3 quarters coverage or more)  
J3 - Not entitled to HIB (less than 3 quarters coverage)  
J4 - Not entitled to HIB (3 quarters coverage or more)  
K1 - Wife entitled to HIB (Less than 3 quarters coverage)(1st claimant)  
K2 - Wife entitled to HIB (3 quarters coverage or more)(1st claimant)  
K3 - Wife not entitled to HIB (less than 3 quarters coverage) (1st claimant)  
K4 - Wife not entitled to HIB (3 quarters coverage or more) (1st claimant)  
K5 - Wife entitled to HIB (less than 3 quarters coverage) (2nd claimant)  
K6 - Wife entitled to HIB (3 quarters coverage or more) (2nd claimant)  
K7 - Wife not entitled to HIB (less than 3 quarters coverage) (2nd claimant)  
K8 - Wife not entitled to HIB (3 quarters coverage) (2nd claimant)  
K9 - Wife entitled to HIB (less than 3 quarters coverage) (3rd claimant)  
KA - Wife entitled to HIB (3 quarters or more) (3rd claimant)  
KB - Wife not entitled to HIB (less than 3 quarters coverage) (3rd claimant)  
KC - Wife not entitled to HIB (3 quarters coverage or more) (3rd claimant)  
KD - Wife entitled to HIB (less than 3 quarters coverage) (4th claimant)  
KE - Wife entitled to HIB (3 quarters coverage or more) (4th claimant)  
KF - Wife not entitled to HIB (less than 3 quarters coverage) (4th claimant)  
KG - Wife not entitled to HIB (3 quarters coverage or more) (4th claimant)  
KH - Wife entitled to HIB (less than 3 quarters coverage) (5th claimant)  
KJ - Wife entitled to HIB (3 quarters coverage or more) (5th claimant)  
KL - Wife not entitled to HIB (less than 3 quarters coverage) (5th claimant)  
KM - Wife not entitled to HIB (3 quarters coverage or more) (5th claimant)

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**VIII. C. (CONT'D)**

M - Uninsured (not entitled to HIB, qualified for SMIB)  
M1 - Insured (qualified for HIB, but requested SMIB only)  
T - Uninsured (entitled to HIB under deemed insured provision)  
TA - Federal wage earner  
TB - End stage renal disease wife or husband (1st claimant)  
TC - Child (disabled/end stage renal disease)  
T2-T9 - Additional children (disabled/end stage renal disease)  
TD - Widow or widower (1st claimant)  
TE - End stage renal disease widow or widower (1st claimant)  
TF - Father (1st or 2nd claimant)  
TG - End stage renal disease wife or husband (2nd claimant)  
TH- -End stage renal disease wife or husband (3rd claimant)  
TJ - End stage renal disease wife or husband (4th claimant)  
TK - End stage renal disease wife or husband (5th claimant)  
TL - Widow or widower (2nd claimant)  
TM - Widow or widower (3rd claimant)  
TN - Widow or widower (4th claimant)  
TP - Widow or widower (5th claimant)  
TQ - Mother, stepmother, or adopting mother (1st or 2nd claimant)  
TR - End stage renal disease widow or widower (2nd claimant)  
TS - End stage renal disease widow or widower (3rd claimant)  
TT - End stage renal disease widow or widower (4th claimant)  
TU - End stage renal disease widow or widower (5th claimant)  
TV - Disabled widow or widower (5th claimant)  
TW - Disabled widow or widower (1st claimant)  
TX - Disabled widow or widower (2nd claimant)  
TY - Disabled widow or widower (3rd claimant)  
TZ - Disabled widow or widower (4th claimant)  
W - Disabled widow (1st claimant)  
W1 - Disabled widower (1st claimant)  
W2 - Disabled widow (2nd claimant)  
W3 - Disabled widower (2nd claimant)  
W4 - Disabled widow (3rd claimant)

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**VIII. C. (CONT'D)**

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)  
Z - An alien who does not meet five year residency requirement for Medicare B eligibility (Refer to Aged, Blind, and Disabled Policy Manual, MA-2410, VIII.)

**D. Railroad Retirement Prefix Codes**

Following is a list of all valid Railroad Retirement Prefix Codes (claim symbols) with a brief description:

A - Retirement - employee or annuitant  
CA - Disabled adult child of RR annuitant  
H - RR pensioner (age or disability)  
JA - Survivor joint annuitant - an annuitant who has taken a reduced amount to guarantee payments to a surviving spouse  
MA - Spouse of RR employee or annuitant (husband or wife)  
MH - Spouse of RR pensioner  
PA - Parent of RR annuitant  
PD - Parent of RR employee  
PH - Parent of pensioner  
WA - Widow or widower of an RR annuitant  
WCA - Child of RR annuitant, or widow of annuitant with a child in her care  
WCH - Widow of pensioner with a child in her care  
WD - Widow or widower of an RR employee  
WH - Widow or widower of an RR pensioner