

DEPARTMENT OF SOCIAL SERVICES

744 P Street, Sacramento, CA 95814  
(916) 322-5330



March 18, 1981

ALL-COUNTY INFORMATION NOTICE I-34-81

TO: ALL COUNTY WELFARE DIRECTORS

SUBJECT: NEW DISABILITY INSURANCE (DI) ABSTRACT

REFERENCE: DSS OPERATIONS MANUAL SECTION 29-007

County welfare departments currently obtain Disability Insurance Benefit payment verification by first using a Request for Information form (DE 8720) to obtain a Wage and Claim Abstract (DE 507) in order to identify the Employment Development Department (EDD) field office in which a DI claim was filed. The county then submits a self-addressed, stamped ABCD 351 form to the appropriate field office where an EDD employee manually enters the requested DI payment information on the form and mails it to the county. This process has been taking a month or more to complete.

In order to simplify and speed up the DI verification process for counties, the AFDC Program Systems Bureau has been working with EDD to centralize and automate access to DI payment information. Effective immediately, EDD will provide a Disability Insurance Abstract (DIB 100) and process requests for DI information centrally via Form DE 8720. This means that you will no longer have to submit a DE 8720 request for a DE 507 to determine the field office where the DI claim was made. You should obtain DI payment information directly with a DE 8720 request for a DIB 100. DIB 100 information essential to county welfare departments includes the SSN and the name of the recipient, the check date and number, and the amount of each DI payment.

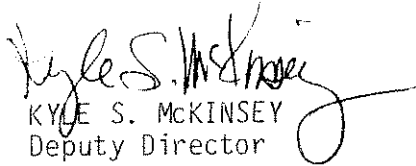
EDD began to accumulate DI payments on their computer files on January 1, 1979, and now they are able to provide payment information at least two years old on the DI Abstract. EDD will continue to accumulate DI payments so that, around December 31, 1981, the DI Abstract will include payment information up to 36 months old. At such time, EDD will begin deleting information older than 36 months from their files. In the meantime, if counties want payment information older than that provided by the DIB 100, but no older than 36 months from the claim date, they may obtain it by sending the ABCD 351 and a self-addressed, postage-paid return envelope to:

Disability Insurance Section, MIC-29  
Employment Development Department  
800 Capitol Mall  
Sacramento, CA 95814

The DI Abstract Instructions attached to this notice give the detail necessary for requesting and using the abstract. If desired, these instructions can be reproduced and distributed to eligibility workers. The same instructions will be incorporated in the next revision of the DSS Operations Manual - Division 29.

If you have any questions regarding the new DI verification system, you may contact your AFDC Program Management Consultant at (916) 445-4458.

Sincerely,

  
KYLE S. MCKINSEY  
Deputy Director

Attachment

cc: CWDA