Employees' Manual
Title 14, Chapter G
Appendix

Revised August 20, 2021

Exchange of Data With Other Agencies

Appendix

Application for a Social Security Card, Form SS-5 and SS-5-SP

Purpose

Each person who applies for Food Assistance, FIP, Medicaid, or State Supplementary Assistance must provide a social security number or proof of application. The Social Security Administration (SSA) uses form SS-5 or SS-5-SP (Spanish) to process an application for a number.

Supply

These forms may be accessed and downloaded from the Social Security Administration's Internet web site at: http://www.socialsecurity.gov/online/forms.html.

Completion

Inform the client of the necessity for contacting the Social Security Administration and applying for a number whenever a number is required for eligibility purposes. The IM worker initiates the form:

- Whenever a client needs to apply for a social security number.
- When the client had a social security number but cannot provide it.
- When client information (such as name) changes.
- To resolve a discrepancy between the client's record and the Social Security Administration's files.

Use the Spanish version of the form if the client is more fluent in Spanish than in English.

Complete the form using blue or black ink. Complete sections 1 and 6 and the box marked "NPN" in the section labeled "for SSA use only." These items are used in a computer match with SSA files.

The remainder of the form is completed by the client and by Social Security Administration staff.

If the only matching record at SSA has a social security number, the social security number from that record will be returned to the Department.

Otherwise, the Department information is used when SSA assigns the number. SSA then flags the record for return of the new number to the Department. The number that is returned is a verified number.

The social security number appears on the ABC system when it is returned to the Department. It is also part of the state ID record.

NOTE: People applying on their own without the partially completed form SS-5 or SS-5-SP must report the number when received so that the IM worker can enter it on the ABC system.

Distribution

Give the form to the client to take to the Social Security Administration office.

Data

Refer to the instructions on the form for applying for a number. The IM worker completes the following:

Section 1. Name To Be Shown On Card. Fill in the client's name exactly as it appears on Department records. ABC entries must match this section for enumeration to work.

Section 6. Date of Birth. Fill in the date exactly as it appears on Department records. ABC entries must match this section for enumeration to work.

Sections 10 and 11. If the client has a social security number, and is being referred to the SSA because of discrepancy, complete sections 10 and 11 and note in the space for section 10 that a change should be made to the SSA Master Beneficiary Record.

NPN. In the section marked "for SSA use only," complete the NPN field by entering the SSA state number for Iowa (16), and the client's eight-digit state ID number. Always use a slash on the numerical zero to distinguish it from the letter "O."
For example, "161234560A" is composed as follows:

16	SSA designation for Iowa
123456ØA	Client's state ID number

IRS Audit Guide, Form 470-3578

Purpose

The *IRS Audit Guide* addresses the issues for safeguarding federal tax data. Manual references are included in the document to assist field offices and institutions in meeting IRS requirements.

This form is also a guide for the service area. It records the service area's findings to assist in completing the *IRS Exit Summary*.

Supply

Any DHS employee may access and complete form 470-3578 on line using the template on Outlook located in the public state-approved forms, IRS folder.

Completion

A designated member of the service area completes the form while performing the inspection of the local office or institution. Enter the data on-line for transmission.

Distribution

The service area designee:

- E-mails one copy to the service area manager or institution superintendent.
- Maintains a copy in the county or institution folder, located in the IRS share.

IRS Corrective Action Plan, Form 470-3579

Purpose	Form 470-3579 documents the actions the local office or institution will take to remedy deficiencies in security for IRS data that are noted by the service area designee.
Supply	Complete form 470-3579 on line using the template located on Outlook, public state-approved forms, IRS folder.
Completion	The service area designee or superintendent: ♦ Completes this form on line within 30 days after the designated person has inspected the local office or institution and forwarded the *IRS Exit Summary*. ♦ Updates the document by August 15 of each year until the next IRS audit or internal inspection.
Distribution	The service area designee or superintendent forwards an electronic copy to the IRS share, for retention in the county or institution folder.
Data	Prioritize the findings addressed in the *IRS Exit Summary* form. List each finding on the form. Estimate the completion date for correcting each finding.

IRS Exit Summary, Form 470-3580

Purpose	The *IRS Exit Summary* is used to report the findings of the designee reviewing an office's security measures for IRS data.
Supply	Complete form 470-3580 on line using the template located on Outlook, public state-approved forms, IRS folder.
Completion	The designee completes this document on-line at the completion of the audit.
Distribution	The designee forwards this form electronically to: ♦ The service area manager for a local office or the superintendent for an institution. ♦ The county or institution folder on the IRS share.
Data	The document breaks out the findings by three areas: ♦ Handling and processing of federal tax data. ♦ Physical security at county office or institution. ♦ Employee training regarding security of federal tax data.

IRS Tracking Log, Form 470-3563

Purpose

The IRS log provides documentation for IRS regarding the federal tax data that is distributed to local offices and institutions. IRS regulations require a log be kept indicating when federal tax data is received or destroyed.

Federal tax data is contained on two IEVS reports, the *IRS Match*, S470X615-A, and the *SSA Earnings and Pension Report*, S470X425-A.

Supply

Print a supply of this form as needed from the form located on Outlook, public state-approved forms, IRS folder.

Completion

The local office or institution completes this form whenever federal tax data is received or destroyed.

Each local office or institution should designate a person to be responsible for the log. It may be appropriate for the person opening mail to record receipt of the forms.

Refer to 1-C, *Maintaining Security of IRS Data*, for proper destruction of federal tax data. Each office is responsible for ensuring that the destruction of these forms is recorded in the log.

Distribution

Keep the log for five years or until an IRS audit.

Data

Individual reports should not be entered separately on the log. The person responsible for the log must track whom the reports are given to, when they are returned, and when they are destroyed. It is important to ensure that all reports are accounted for.

IRS Transmittal, Form 470-3589

Purpose

The *IRS Transmittal* provides the required documentation that the Collection Services Center (CSC), local office, or institution received confidential IRS reports.

Supply

Complete form 470-3589 on line using the template located on Outlook, in the public state-approved forms IRS folder.

Completion

Complete the form when the office receives CSC IRS Reports*,* *IRS Match*, or *SSA Earnings and Pension* reports. The office receiving the report must complete and sign the form before electronically returning it to the Division of Data Management.

Distribution

The office receiving the report electronically returns the completed form to the Division of Data Management.

The Operations Unit in the Division of Data Management:

- ♦ Tracks the return of these forms,
- ♦ Documents the response, and
- ♦ Saves the information for three years or until an IRS audit.

Data

The receiving office completes:

- ♦ The CSC office name, the county number, or the name of the institution. For a county with multiple offices, include the local office name.
- ♦ The print date of the report.
- ♦ The envelope identifier on the sealed envelope. (The DDM Operations Unit places this identifier on the envelope.)
- ♦ Which IRS report was received (*CSC IRS Report*, *IRS Match*, or *SSA Earnings and Pension Report*).
- ♦ The date the office received the report.
- ♦ The signature of the person completing the form.