The Bendex Record

Data Element	Description
CAN/SSN	Recipient's own SSN when they are a primary beneficiary. In this situation, the CAN is equal to the BOAN/SSN plus the BIC. If the beneficiary is receiving benefits as an auxiliary or spouse on someone else's account, the CAN does not equal the BOAN/SSN
BIC	Identifies the type of benefit received.
BLN- Beneficiary Last Name	Last name, left justified if fewer than 20 positions.
BGN-Beneficiary Given Name	Given name, left justified if fewer than 15 positions.
BMN-Beneficiary Middle Name	Middle name, left justified if fewer than 15 positions.
BSN-Beneficiary Suffix Name	Suffix, left justified if fewer than 4 positions.
Sex	Matched records will display the SSA sex code of M-male or F-female.
Payee Name and Address line-1	22 Positions payee name and address data (variable field)
Payee Name and Address line-2	22 Positions payee name and address data (variable field)
Payee Name and Address line-3	22 Positions payee name and address data (variable field)
Payee Name and Address line-4	22 Positions payee name and address data (variable field)
Payee Name and Address line-5	22 Positions payee name and address data (variable field)
Payee Name and Address line-6	22 Positions payee name and address data (variable field)
ZIP Code	5 position address ZIP Code
State and County Code	A five-position code reflecting the residence of the beneficiary.
Direct Deposit Indicator (DAN)	Reflects the type of account to which payment is being deposited.
Agency Code	Three position State Agency Codes
Source Code	Request originated from State's attempt to buy-in for a disabled person who is in the 24-month SMI- waiting period.
Category of Assistance Code	The most recent code submitted by a State on the BENDATA input file.
DWI Code	Record submitted through SVES. Not applicable.
Earnings Request Indicator	E indicates earnings information was requested and will be released on the BEER record.
State Control Data	State identification or welfare case number entered on BENDATA record
IEVS Agency Sub code (This data element originates from the BENDATA record and is not maintained by SSA.)	Up to 4 codes assigned by the coordinating agency that identifies the requesting agency to which the data is to be released. This field is optional.
Old BIC	State input BIC is not furnished or is incorrect or differs from the MBR BIC or change in type of SSA benefit received.
SSN	The SSN furnished on the State's BENDATA record; the BOSSN, or the record was not acceptable.

Data Element	Description
Payment Status Code (LAF)	A one or two- position code reflecting the SSA payment status for this beneficiary. This payment status code and the effective date determine if entitlement is current and overrides any other entitlement factors.
DOEI-Date of Entitlement Initial	Initial entitlement date to SSA benefits. If different from DOEC, this may indicate that the beneficiary has more than one period of entitlement.
DOEC-Date of Entitlement Current	Current entitlement date to SSA benefits.
DDO- Date of Disability Onset	Date of disability onset. If no date is present then either disability is not involved or the onset was prior to 1975.
Date of Birth	Date of birth
Proof of Birth Indicator	Indicator for proof of birth.
Beneficiary Date of Death	Month, day, century and year of death.
Proof of Death Code	Indicator for proof of death.
Communication- Code	Codes derived by the BENDEX SYSTEM to help the state interpret the data received.
Effective Date	Payment History - current effective date of current payment
Monthly Benefit Payable (MBP)	The current net amount due after deductions. Note: Money amounts are still displayed where the beneficiary was previously entitled but is in a nonpayment status (check Payment Status Code).
Gross Amount Payable (MBA)	The monthly SSA benefit due before collection of SMI premium, overpayment, attorney fees or unpaid maritime tax.
Net Monthly Benefit Amount (MBC)	The actual money amount payable before SMI deductions after dollar rounding.
Verified BOAN	Beneficiary's own verified Account Number
MED STAT	Indicates the account from which Medicare premiums are being deducted.
Dual Entitlement SSN	The other SSN under which the beneficiary is entitled. Spaces if not available.
Dual Entitlement BIC	Indicates the type of benefit to which the beneficiary is dually or technically entitled.
Dual Entitlement Indicator	Denotes whether Dual Entitlement, Triple Entitlement, or no other entitlement exists
Triple Entitlement SSN	The third account on which the other entitlement exists for Title II benefits. Spaces if blank

Data Element	Description
Triple Entitlement BIC	Indicates the type of benefit to which the beneficiary is entitled.
Cross Reference SSN	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.
Cross Reference BIC	Indicates the type of other Title II benefit. If a dual entitlement BIC is provided and it is equal to the Cross Reference BIC, this field will be blank.
Record Processing Date	The date when BENDEX operations were processed.
Payment Cycling Indicator	Indicates when the benefit check was released
Retro 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.
Ending Date for OP DED	The month, century and year that overpayment recovery will cease. Benefits will be resumed at the full rate the following month.
SSI Ent/Term Date	The month of first payment or the month following the month of last payment.
SSI Status Code	Reflects the beneficiary's status in the SSI program.
RR Claim Number	RRB claim account number. This number is not valid for entering in BENDATA records.
RR Status Code	One letter code to indicate the status of Railroad Claim.
RRB Jurisdiction Start	Shows the date the number holder's Railroad Annuitant claim was effective.
RRB Jurisdiction Stop	Shows the date the number holder's Railroad Annuitant's benefits stopped.
Monthly OP Deduction Amt	Reflects the monthly amount withheld from the benefits to recover an overpayment.
SSI Overpayment Amt Withheld	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 withheld. This withholding amount is separate and in addition to the Monthly OP Deduction Amt above.
Garnishment Amount Withheld	The amount of money withheld from the monthly payment to satisfy a court ordered garnishment. This withholding amount is separate and in addition to any Monthly OP Deduction Amt above.
HI Continuous Period	Earliest continuous date of entitlement to HI regardless of basis type
*Number of HI Occurrences	Number of periods the number holder has for Hospital Insurance.
HI Premium Amount	The amount withheld for HI part A Medicare coverage, when Health Insurance is premium HI
*First HI Start Date	Start date for the basis type

Data Element	Description
First HI Term Date	Effective date for the first month of non-coverage of the previous period of HI. The termination date can be future dates. An example: A date of 052001 means that the last day of HI coverage was 04/30/01.
HI Basis	Basis for HI coverage
HI NON COVERED REASON	Reason for non-coverage
HI TYPE	F- Free or P- Premium HI
HI PERIOD	Reason for HI period.
*Second HI Start Date	Second HI Start Date for this Basis type.
Second HI Term Date	The second period when HI was terminated for this Basis type.
HI BASIS	Reason for HI
HI NON COVERED REASON	Reason for non-coverage
*Third HI Start Date	Third HI Start Date for this Basis type.
Third HI Term Date	The third period when HI was terminated for this Basis type.
HI BASIS	Reason for coverage
HI NON COVERED REASON	Reason for non-coverage
HI THIRD PARTY PREMIUM PAYER	HI Third party payer code
HI THIRD PARTY START DATE	The effective date of the HI third party premium payer
HI THIRD PARTY STOP DATE	The date the HI third party premium payment stopped.
HI THIRD PARTY CATEGORY	HI third party category.
*SMI CONTS PERIOD	Earliest continuous date of entitlement to SMI regardless of basis type
NUMBER OF SMI OCCURRENCES	Number of periods the number holder has for Supplemental Medical Insurance entitlement.
SMI PREMIUM AMOUNT	The SMI premium amount collectible which could include any additional penalty amount.
*First SMI Start Date	The effective date of the first period of Supplemental Medical Insurance for the current Basis type.
First SMI Term Date	The effective date for which a previous period of Part B coverage was terminated, that is, the first month of non-coverage. The term date can be future dates.
SMI BASIS	Basis for SMI coverage
SMI NON COVERED REASON	Reason for SMI non-coverage
SMI PERIOD	Reason for SMI period.
*Second SMI Start Date	The effective date of the second period of Supplemental Medical Insurance for this Basis type.
Second SMI Term Date	The date the number holder's second period of Supplemental Medical Insurance ended.
SMI BASIS	Basis for SMI coverage.
SMI NON COVERED REASON	Reason for SMI non-coverage
*Third SMI Start Date	The effective date of the third period of Supplemental Medical Insurance for this Basis type.
Third SMI Term Date	The date the number holder's third period of Supplemental Medical Insurance ended.
SMI BASIS	Basis for SMI coverage

Data Element	Description
SMI NON COVERED REASON	Reason for SMI non-coverage
SMI PREMIUM PAYER	The agency code for the State billed for SMI premium payments.
SMI THIRD PARTY START DATE	The date for which a third party accepted liability of first paid Part B premiums.
SMI THIRD PARTY STOP DATE	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.
SMI THIRD PARTY CATEGORY	Category of SMI third party
VARIABLE SMI PREMIUM	An amount lower than the regular amount of Supplemental Medical Insurance premium.
VARIABLE SMI START DATE	Variable Supplemental Medical Insurance start date.
VARIABLE SMI TERM DATE	Variable Supplemental Medical Insurance term date.
*CTZN-START DATE 1	The first month and year of a client's citizenship began to a particular country. *FIRST OCCURRENCE
CTZN-STOP DATE 1	The last month and year of a client's citizenship ended to a particular country. FIRST OCCURRENCE
CTZN-COUNTRY 1	2 Position country of citizenship FIRST OCCURRENCE
CTZN-US PROOF 1	This position is conditional, based on the country of citizenship being the United States (US).
*CTZN-START DATE 2	The first month and year of a client's citizenship began to a particular country. *SECOND OCCURRENCE
CTZN-STOP DATE 2	The last month and year of a client's citizenship ended to a particular country. SECOND OCCURRENCE
CTZN-COUNTRY 2	2 Position country of citizenship. SECOND OCCURRENCE
CTZN-US PROOF 2	This position is conditional, based on the country of citizenship being the United States (US).
*CTZN-START DATE 3	The first month and year of a client's citizenship began to a particular country. THIRD OCCURRENCE
CTZN-STOP DATE 3	The last month and year of a client's citizenship ended to a particular country. THIRD OCCURRENCE
CTZN-COUNTRY 3	2 Position country of citizenship. THIRD OCCURRENCE
CTZN-US PROOF 3	This position is conditional, based on the country of citizenship being the United States (US).