

**Unemployment Compensation
Claims Filed Under the
Interstate Benefit Payment Plan**

U.S. Department of Labor
Employment and Training Administration
Unemployment Insurance Service
ET Handbook No. 392, 2nd Edition

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DIRECTIVE : ET HANDBOOK NO. 392, 2nd Edition
TO : ALL STATE EMPLOYMENT SECURITY AGENCIES
FROM : ROBERT S. KENYON
 Acting Administrator
 for Regional Management
SUBJECT : Unemployment Compensation Claims Filed Under the
 Interstate Benefit Payment Plan



1. Content. Revised interstate claims procedures.
2. Background. Interstate claims procedures have been revised to accomodate remote initial claimstaking in the agent State and liable States. The significant changes are:
 - (a) the elimination of the agent State requirement to obtain the claimant's signature on the initial claims form and accompanying documents in cases where the claim is filed by telephone;
 - (b) the elimination of the Claim Record Card, Form IB-1A;
 - (c) the elimination of the agent State requirement to complete an ES 935 with respect to UCFE base period wages in cases where the claim is filed by telephone;
 - (d) implementing procedures to allow claimants to present documentation of alien status by reading required information from the documentation provided by the Immigration and Naturalization Service; and,
 - (e) the elimination of the Notice of Interstate Appeal, Form IB-101.
3. Effective Date. The procedures published in this Handbook edition supercede all previously issued interstate procedures and are effective immediately.
4. Action Required. State Administrators are requested to ensure that this Handbook is made available to all appropriate staff.

RESCISSIONS ET Handbook No. 392 and Changes 1-14	EXPIRATION DATE Continuing
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5. Attachment. ET Handbook No. 392, 2nd Edition.

RESCISSIONS ET Handbook No. 392 and Changes 1-14	EXPIRATION DATE Continuing
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1. **Introduction.** When the Social Security Act of 1935 was passed and State unemployment laws were enacted, the States formed an organization that is now incorporated as the Interstate Conference of Employment Security Agencies (ICESA), an organization of State Administrators. This was done to address mutual interests arising out of the establishment of State organizations and the implementation and operation of Federal-State employment security programs.

It immediately became apparent that some agreements between States were necessary to effectively provide adequate protection for all covered workers. The Interstate agreements and the suggested regulations that relate to the agreements are published in Appendix B of this handbook.

This first agreement was the Interstate Benefit Payment Plan, effective May 1938, to which all agencies subscribe. To attain the uniformity and consistency necessary to administer this agreement and sustain cooperation between the States, the plan called for the creation of a committee and detailed its power and functions. The plan also provided that each State, as signatory to the plan, agrees to cooperate with each other and with the committee and to adopt, if possible, the rules, regulations, instructions, procedural forms, and interpretive decisions of this committee.

Interstate claims procedures and forms in this handbook are approved by the Interstate Benefit Payment Committee of ICESA in cooperation with the U.S. Department of Labor.

The U.S. Department of Labor agreed to publish and keep current all interstate procedures and forms as approved.

2. **Purpose of the Interstate Benefit Payment Plan.** The Interstate Benefit Payment Plan and these procedures provide a method for payment of unemployment compensation benefits to those unemployed individuals who earned unused covered employment and wages or have valid claims on file and who otherwise may be deprived of benefits because of their absence from a State in which their benefit credits were accumulated.

3. **Commuter Exclusion from the Interstate Benefit Payment Program.** Because administering claims filed under the Interstate Benefit Payment Plan has historically been more difficult and costly than administering intrastate claims, commuters are excluded by the plan. Commuters are persons who travel regularly across a State line from home to work. No

fixed rule is applied to determine which person should be considered commuters, and adjoining States should enter into individual agreements concerning border areas in which commuters are of significant volume. The general principle to be applied should consider the main reason for excluding this group from the interstate benefit payment plan, i.e., individuals usually look for work in areas in which they have worked in the past. For this reason, their claims should be taken through intrastate procedures of the State in which they normally work. This has the effect of having claimants registered for work in the area in which they want to and usually do work. This general rule should not be used if its application would impose a hardship or cause excessive travel time or cost to a claimant.

Many States with significant commuter populations have defined commuter areas outside of which individuals are allowed to file interstate claims. These areas were defined to eliminate requiring claimants to travel unreasonable distances and incur unreasonable cost in filing for unemployment benefits. When a State implements remote initial claimstaking together with mail or remote continued claim certifications, the exclusion of commuter claimants from filing under the interstate plan should be fully implemented Statewide to insure that all commuters are filing intrastate claims and are registered for work in the State in which they are seeking employment.

When a claimant contacts the liable State to file a claim, claimstakers should question the claimant to determine if the claimant is filing as a commuter or has relocated and is filing as an interstate claimant. The distinction between these claims is important because of the effect of certain requirements on entitlement and eligibility.

4. Provisions of Interstate Benefit Payment Plan on State Adoption. These procedures are based on the Interstate Benefit Payment Plan which provides that "Each subscribing State agency shall adopt and put into force and effect each rule, regulation, instruction, procedural form and interpretative decision relating to this plan...except such as a State agency finds to be clearly inconsistent with the statutory provisions of its unemployment compensation law."

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1. Identification of Interstate Claimants

a. The claimstaker should first determine whether the claimant should file an interstate claim.

b. The first question that should be asked of all claimants is "have you filed a claim against any State in the past year?"

(1) If the answer is "yes", the claimstaker should ask the claimant to provide information from the monetary determination issued by the Liable State against which the claim was filed. From the monetary, the claimstaker will be able to identify the liable State, the date of the claim, the benefit-year ending date, and the weekly and maximum benefit amount of the claim. Once the liable State is identified, the status of the claim can be obtained by using the Interstate Benefit Inquiry (IBIQ).

(2) If the answer is "no", the claimstaker should ask the claimant about his/her work history for the past two years and explain all claims options **including whether or not separations during the base period or lag period can affect eligibility** (such as whether or not a State adjudicates all base period employers or the last 30-day employer, etc.).

c. One of the main factors which will determine the type of claim to be filed is the order of liability as described in Section I.3 of this handbook. The type of claim to be filed may be identified as an intrastate or interstate claim.

(1) If a benefit year exists in another State and benefits are exhausted, terminated, postponed for an indefinite period (any suspension/postponement that cannot be satisfied by the passage of time or last for the remainder of the benefit year), or are affected by the application of a seasonal restriction, the claimant has an option to file an initial claim against another State.

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(2) If a benefit year exists in another State and benefits are not exhausted, terminated, postponed indefinitely or for the remainder of the benefit year or affected by the application of a seasonal restriction, the claimstaker should determine and explain the options to the claimant and take a new intrastate or interstate (including additional or extended benefits) claim, as appropriate, or provide the claimant with the appropriate telephone number if the liable State takes interstate claims by telephone.

d. If the potential liable State has implemented telephone intrastate initial claims, the claimstaker should determine if the claimant has established a history of being a commuter and intends to continue to seek work in the liable State. If so, the claimant should be advised to file directly with the liable State under intrastate procedures (since the claims filing procedures no longer place an excessive travel or cost burden on the claimant).

2. Type of Interstate Claim to be Filed. When it is determined that an interstate claim should be filed, the claimstaker must determine the type (new, transitional, additional, or reopen) of claim needed.

If the Agent State erroneously takes the wrong type of claim, the liable State should not penalize the claimant. The liable State should make every effort to use the claim received as the claim required. For instance, if a new claim is required, but the Agent State submits a reopened claim, such claim should be processed, if possible, as a new claim. This should not be done indiscriminately and the claimant should be contacted (by telephone, if possible) to determine if a new claim against that Liable State is the claimant's choice. This is especially important when the claimant has employment in more than one State and may prefer to file against another State or a combined wage claim.

Claimstakers in Agent States should understand the definition and purpose of the types of claims in order to submit the proper type of claim to the Liable State.

Under the interstate system, the four types of initial interstate claims filed in the Agent State offices are:

a. New. A new claim is the first interstate claim filed by a claimant to establish a benefit year against a Liable State and

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it serves as a request for a determination of eligibility. An interstate claimant may have as many "new" claims as there are different States against which he/she claims benefits in succession. In this way, an interstate claimant differs from an intrastate claimant who may normally file only one new claim or establish only one benefit year under a single State's law within a one year period.

The interstate claimant can establish a benefit year in a State even though a benefit year exist in another State. However, when an interstate claimant's eligibility is determined or is pending with a given Liable State, claims can be filed only against that State (see Order of Liability, Section I (3)) until an ineligible determination is issued or benefits have been exhausted, terminated, or postponed for an indefinite period.

b. Transitional. A transitional interstate claim is a claim filed to request a determination of eligibility and establishment of a new benefit year having an effective date within the 7-day period immediately following the prior benefit year ending date and a week for which credit was claimed against the same Liable State. This type of claim is marked as "new" by the Agent State.

c. Additional. An additional interstate claim is a claim filed by an interstate claimant within the existing benefit year established by the Liable State after a break in the continued claims series due to intervening employment.

d. Reopen. A reopened interstate claim is a claim filed by an interstate claimant within the existing benefit year, established by the Liable State, after a break in the claims series that was not caused by intervening employment. This designation is also to identify the first claim filed in a new Agent State within the existing benefit year when there was no intervening employment.

3. Order of Liability of States. The order of liability of States is governed by Section 4 (revised effective July 5, 1953) of the draft regulations provided to all States in consultation with the Interstate Conference of Employment Security Agencies to implement the Interstate Benefit Payment Plan. Section 4(a) reads as follows:

"Benefit Rights of Interstate Claimants--

(a) If a claimant files a claim against any State, and

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it is determined by such State that the claimant has available benefit credits in such State, then claims shall be filed only against such State as long as benefit credits are available in that State. Thereafter, the claimant may file claims against any other State in which there are available benefit credits.

For purposes of this regulation, benefit credits shall be deemed to be unavailable whenever benefits have been exhausted, terminated, or postponed for an indefinite period or for the entire period in which benefits would otherwise be payable, or whenever benefits are affected by the application of a seasonal restriction."

A claimant can file against any State in which he/she has benefit credits available, provided he/she has not established a "current benefit year" previously through the filing of an intrastate or an interstate claim.

A claimant who establishes a current benefit year in the State where he/she is, or in another State, must continue to file against such State until benefit credits are exhausted, terminated, or postponed for an indefinite period or for the entire period in which benefits would otherwise be payable, or unless benefits are affected by the application of a seasonal restriction. Thereafter, if he/she has available benefit credits in one or more other States, the claimant may choose the State against which he/she will file a new claim.

A claimant must choose the Liable State at the time a new claim is filed. Continued claims should be filed only against such State until the claimant is eligible for a new choice by reason of one of the above situations. (See Section I Item 16 for the procedure to be followed if the chosen Liable State determines the claim to be invalid.)

When a claimant is interviewed on his/her choice of Liable State, the interviewer should consult the Handbook for Interstate Claimstaking to determine the current base periods in the potentially Liable State to compare the claimant's work history.

"Current base period" means the base period applicable in the potentially Liable State for claims filed with the effective or filing date of the new claim. The advantages and/or disadvantages of choosing certain types of claims or a particular Liable

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State should be fully explained, such as: all base period separations adjudicated in some States versus only last separation in others, etc.; in some States the base period changes every week (52-week period before effective date of claim), in others the change occurs when the effective date falls in a new quarter. There are a number of States that also have alternate base periods. These variables can affect eligibility; so, it is important that the claimstaker consider them when advising the claimant of the available options.

The second paragraph of the regulation quoted above describes the conditions, in addition to exhaustion of benefits and cancellation of wage credits, under which benefit credits become unavailable in a Liable State so as to entitle the claimant to select another Liable State. Among such conditions are seasonal restrictions and disqualifications for an indefinite period or for the entire period for which benefits would otherwise be payable.

Seasonal restrictions usually stipulate calendar dates between which individuals who have earned benefit credits in an industry classified as "seasonal" are not eligible to receive benefits. For example, some States bordering on the Great Lakes classify the lake-shipping industry as "seasonal." As a result, claimants who earned all, or substantially all, of their benefit credits in that industry in a Liable State having such seasonal provisions may be ineligible to receive benefits during a stipulated period during which the lake-shipping industry does not operate due to climatic conditions.

Seasonal provisions of State laws are in the Handbook for Interstate Claimstaking. If it seems probable that the claimant's benefit rights will be restricted by the seasonal provisions of the State against which he/she chooses to file, the Agent State should discuss seasonal provisions with the claimant, but should not predetermine their applicability to the claimant.

Some types of seasonal restrictions have the effect of reducing the claimant's weekly benefit amount during the off season. For example, some provisions limit the use of wage credits earned in a seasonal industry during the season to periods of unemployment in the season; such wage credits may not be included in the computation of a claimant's benefit amount in the off season. If a claimant's benefit rights are adversely "affected by" a seasonal provision, he/she should be allowed to choose a new Liable State.

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If a disqualification is imposed on a claimant, consideration must be given to the type of disqualification to determine if the claimant can exercise his/her right of free election again. If the disqualification is for a fixed period, claims may not be filed against another State. An example of this type of disqualification is one imposed "for the week in which the disqualifying act occurred and for the five weeks of unemployment immediately following." On the other hand, if the disqualification is for an indefinite period, such as "for the duration of unemployment" or "until the claimant has had earnings of at least ten times the weekly benefit amount," the claimant can file against another potentially Liable State if the requalifying requirements have not been met.

When a claim is filed against a State, after a denial or postponement by a previous State, all facts on actions by the first State should be reported to the State of the claimant's second choice.

4. Recording Order of Liability on Claim Record. If the claimant has already exhausted his/her benefits or has had benefits otherwise terminated by a State, it should be noted on the initial claim and Claim Record. Notations such as the following should be used:

"Claimant has exhausted benefits from _____,"

"Benefit year terminated on claim filed against _____,
copy of determination and full statement of facts attached."

"Future benefit rights canceled by State of _____,
copy of determination and full statement of facts attached."

"Benefit credits unavailable in the State of _____,
because of application of a seasonal restriction."

5. Claim Filing Methods. The following methods are used in filing new, transitional, additional, reopened, and continued claims:

a. New and Transitional Interstate Claims

(1) New interstate claims and transitional claims are filed on the Initial Interstate Claim, Form IB-1 (and Interstate Claim Record Card, Form IB-1A, if used by the Agent State). Many States maintain computer claim records instead of hardcopy

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records.

(2) Questions on the form, except items A-M and items 18-20, are designed for self-filing by the claimant.

(3) Instructions should be given to the claimant which explain the information desired and a large print poster of the form with instructions should be placed where the claimant can view it while filling out the form.

(4) Self-filing is recommended to allow the claimstaker to use the claimant contact time on more substantive phases of claimstaking, such as obtaining answers to special procedural questions requested in the Liable State's section of the Handbook for Interstate Claimstaking.

(5) Under the self-filing method, the claimstaker is just as responsible for the accuracy, reasonableness, completeness, and legibility of entries as if they were completed by the claimstaker.

(6) Answers to all questions should be carefully read and the claimant should be asked about inconsistencies.

(7) The claimstaker must ensure that all entries are legible and that no abbreviations are used in addresses or in the Liable State's name. Abbreviations that are commonly used in the Agent State have no meaning to Liable States, and abbreviation of the Liable State name may cause claims to be mailed to the wrong State.

(8) The claimant's initial claims filing interview can be conducted either at a desk or a counter. A desk interview is better because of the nature of some questions, i.e., questions concerning the detail reasons for separation and dependents' status are personal and the claimant should be allowed to discuss these in privacy.

(9) The claimstaker is required to consult various documents such as the Handbook, guide questions, and labor market compilations which might be more readily available at a desk than at a counter. However, desk interviews tend to be prolonged beyond the productive exchange of information, and the claimstaker must guard against this tendency through positive control of the content and duration of the interview.

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b. Additional Interstate Claims

(1) An additional interstate claim is filed by a claimant who already has an existing benefit year in the Liable State and is taken on the Initial Interstate Claim, Form IB-1.

(2) If the Agent State does not maintain an automated Agent State record and has no claim record on file, it should create a claim record for the State at the time of the additional claim.

(3) When the claim form is given to the claimant for completion he/she should be told that the only work history required is that relating to work performed since the last initial claim was filed.

c. Reopened Interstate Claims. A reopened interstate claim filed through the Agent State is taken using the same procedures used for other initial claims, except that there is no intervening employment or separation information to report in the work history portion of the form. This designation is used to advise the Liable State that a benefit year exists and the break in the claims series was not caused by intervening employment, or that there is a change in Agent State, or a transfer from the intrastate to the interstate program is necessary.

d. Continued Interstate Claims. Continued interstate claims forms are provided to claimants at the time of the initial claim in accordance with instructions from the Liable State. Claim forms are mailed by the claimant directly to the Liable State using the forms provided by the Agent State until forms or other claims filing procedures are provided by the Liable State. **Exception:** When a claim is backdated, the claimant is provided with claim forms for the weeks being claimed that ended prior to the date the claim is being taken. The completed claim forms are attached to the initial claim and mailed to the Liable State.

6. Type of Week Used in the Interstate Process

a. The type of week used by the Liable State will be used by claimants filing claims by direct mail to the Liable State.

b. Claims taken by the Agent State should be filed using the calendar week-ending date.

c. When the claimant has earnings during the week, full

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information should be furnished to the Liable State on all remunerations.

d. Proper allocation of earnings by days will enable the Liable State, if operating on other than a calendar week, to adjust the periods covered by several claims to fit its (the Liable State's) own type of week.

e. In taking a claim against a Liable State which operates on a different type of week than that of the Agent State, the claimant should be told why the period which may be credited by the Liable State as a week of unemployment may differ from the period covered by the continued claim form and that this difference may cause some delay.

7. Review and Transmittal of Interstate Claims. The following steps are needed to assure adequate review and prompt transmittal of interstate claims:

a. Review

(1) All interstate documents, including claims and subsidiary forms, should be reviewed by an experienced and knowledgeable interstate specialist, especially when procedures are new and personnel are unfamiliar with the processes. As personnel become familiar with procedures, the review may be relaxed to the extent found feasible and consistent with the required quality.

(2) As a minimum, supervisors of the various functions should review a sample of the work, with sample reviews so arranged that each employee's work will be periodically reviewed.

(3) Interstate documents should be reviewed not only for completeness of the document but also for the reasonableness of entries in light of the existing labor market and the claimant's past claim history.

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b. Time of Transmittal

(1) The Agent State should transmit the electronic TC-IB1 and mail all interstate claims forms and related documents to the Liable State on the day the claim is filed. Claims and documents taken at itinerant points, where the claimstaker does not return to the home office on the day the claims are taken, should be transmitted no later than the next day.

(2) Interstate claims materials, even from such itinerant points, should not be held over a week-end or a holiday, before transmittal. In such cases, the hard copy materials should be mailed immediately and the TC-IB1 transmitted the next business day.

(3) If the person performing itinerant services will not be returning to the local office by the following day, claim documents should be mailed directly from the itinerant point to the Liable States.

(4) The appropriate office identification stamp should be placed on all claim documents.

c. Mailing

(1) All interstate claims and related documents should be sent between States by First-Class mail.

(2) Agent State offices with a large volume of interstate claims should maintain various size envelopes pre-addressed to those Liable States to which claims are sent daily. All manila envelopes should have green diamond borders to indicate "First Class Mail". Mailing addresses of interstate processing units are found on Page A of each State's section of the Handbook.

8. Transfer of Agent Interstate Claim Records

No Agent State will transfer its claim record card to another Agent State, but such transfer is desirable between local offices in the same Agent State. When the agent record is established based on the receipt of electronically transferred data from the Liable State, the Agent State should identify the jurisdictional local office or call center in its record. The identification should be changed upon receipt of a new address, as appropriate.

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9. Transient Claimants. A transient claimant is an individual who is temporarily in the area, has a current benefit year in

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the Liable State and is in current claims status. If the claimant does not have an existing benefit year, an initial interstate claim should be filed (see Section II).

With States implementing electronic weeks claimed certifications, it is not likely that very many claimants will report to an Agent State requesting claims forms. However, if such a claimant reports to the Agent State, provide the claimant with Continued Interstate Claim, Form IB-2, annotated as "Transient Claim" in remarks, for a two-week period. If the claimant remains in the area for a longer period of time, an initial interstate claim should be filed.

a. Type of Information to be Provided on Transient Claim.
 Left regular reporting area on _____. Expects to return on _____. Arrived here on _____. Reported to this Office on _____. Will stay until _____. Will go to _____. Because _____. Reason for coming here _____.

b. Record of Transient Claim. No Agent State claim record is needed for a transient claimant. The Agent State local office should have a record of the transient claim by keeping a list which includes: the claimant's name; social security number; the date the claim was taken; and, identification of the Liable State office where the claim was sent, or a copy of the transient claim filed.

c. Mailing the Transient Claim. The transient claim should be mailed to the claimant's regular reporting office; that office may be a local office or the interstate Liable office.

10. Itinerant Service

a. Interstate claims for benefits should be accepted at all points where intrastate claims are accepted.

b. A claim accepted at an itinerant point should be predated to the first day the claimant would have reported if a full-time claims service were available at the location.

c. Such predating should be explained under "Remarks" on the claim form.

d. Special attention must be given to the item in which the

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local office identification stamp will be placed; for claims taken at itinerant points, the frequency of service to the itinerant point must be shown.

e. Special provision should be made to have itinerant-service claims electronically transmitted and documents mailed to the Liable State on the date the claim is taken.

f. The same procedures should be used on the registration for work of interstate claimants at itinerant points as those used for intrastate claimants filing at itinerant points.

11. Canadian Interstate Claims

a. The Handbook should be consulted for special procedural requirements when taking claims against Canada.

b. The interstate claimant's "Record of Employment" should be attached to any new claim filed.

c. The social insurance account number should also be shown on all claim documents.

d. If the "Record of Employment" is not available for attachment to the claim form, the reason should be entered on the claim form, or on a Fact Finding Report, Form IB-11.

12. Backdating Interstate Claims

a. Backdating an initial claim to a date before the first day of the week in which the claim is actually taken must be fully explained in the "Remarks" section and the code indicating that reason entered on the Form IB-1 and the TC-IB1.

b. If backdating is caused by an invalid claim due to an ineligible monetary determination and the claimant agrees with the determination, duplicate claims for weeks claimed must be sent with the backdated Form IB-1.

c. Week-ending dates on duplicate claims should be the same as those on original claims, but the date taken should be the date duplicates were prepared.

d. Regardless of the reason for the backdating, claims should be prepared for all weeks for which the claimant is claiming back credit and they should be attached to the initial

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claim form.

e. Enter the code identifying the reason for backdating on the Form IB-1 and TC-IB1 in the space provided.

13. Reporting Requirements for Interstate Claimants. The usual provision of State laws require claimants to report "as directed" or "in accordance with regulations adopted ____." The Liable State will consider the reporting requirements to have been met by the interstate claimant who reports as follows:

a. Continued Claims Filing. Interstate claimants are required to follow the reporting instructions issued by the Liable State and those issued by the Agent State at the request of the Liable State.

b. Job Service Registration and Placement Services. Interstate claimants are required to observe the same registration and reporting requirements prescribed by the Agent State for intrastate claimants. The Agent State will inform interstate claimants of registration requirements, and the reporting requirements to keep the registration active.

The Job Service should notify the Agent State claims office of failures to register or report of which it is aware. The Agent claims office should notify the Liable State of any potentially disqualifying information it receives from Job Service.

14. Registration for Work by Interstate Claimants. Agent States should be guided by the following:

a. A registration for work is required by most State employment security laws as a condition of eligibility. Some laws are not specific as to the exact definition of "registration for work," and States meet this requirement in various ways. Some States consider a claimant to have registered for work when he/she files a claim. In other States, this requirement is met only if the claimant has filed a full application for work with the placement service of the agency.

b. All States agree, however, that interstate claimants should receive the same placement services as intrastate claimants in the Agent State.

c. All States (as Liable States) also agree that an interstate claimant will be considered as registered for work if

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he/she is registered for work in the Agent State in the same way and to the same extent as the Agent State's intrastate claimants. So an interstate claimant should receive the same treatment with respect to registration for work as he/she would receive as an intrastate claimant.

d. If the Agent State has special registration requirements for certain categories of intrastate claimants, the same special requirements should apply to interstate claimants in the same categories.

SECTION I - GENERAL PROCEDURES

e. If the claim has been taken by the Liable State by telephone, the Agent State should use the claim data provided by the Liable State to create an Agent State record and refer the claimant for Job Service registration, as appropriate.

f. If self-filed or skeleton applications are accepted for certain categories of intrastate claimants, the same type of application should be taken for interstate claimants in the same categories.

g. If intrastate claimants are required to renew their applications for work every 30 days, interstate claimants should be required to do the same.

h. For the purposes of the registration for work requirement, interstate claimants should not be considered to be in a special category.

i. In the placement process, no special consideration should be given to claimants because of their status as interstate claimants.

j. The State agency should not adopt any procedural barriers to the claimant's placement even though placement possibilities may be reduced by the claimant's recent arrival in the community. This does not mean that employer specifications on residence requirements should be ignored, but rather that the Agent State should not adopt any procedure or policy which react against the placement possibilities of interstate claimants.

15. Interstate Active Search for Work Policy

a. Most States require claimants to make an "active search for work."

b. Some States base their requirement on statutory language, while others interpret this requirement into the "able and available" provisions of the law.

c. In either case, the Liable State's interpretation of its requirements is available in its section of the electronic Handbook for Interstate Claimstaking.

d. Most State agencies adopted the following uniform policy statement as their interpretation of this provision as it applies to interstate claimants:

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POLICY STATEMENT ON ACTIVE SEARCH FOR WORK

All interstate benefit claimants shall make such personal efforts to find work as are customarily made by persons in the same occupation who are genuinely interested in obtaining employment.

The phrase "efforts to find work" does not mean a haphazard application for work with a fixed number of employers. It means that the claimant shall use the facilities and methods which are normally used by persons in his occupation when seeking work. Information concerning the facilities and methods that are available to the individual claimant and the claimant's use of such facilities shall be transmitted to the Liable State. Appropriate specific action by the claimant, including action supplementing the efforts of the Employment Service to find work for him, will be required if any one of the following conditions exist.

- A. The area in which he resides is not within the service radius of a full-time employment office, or
- B. He is seeking suitable work in an occupation in which jobs are normally filled through channels other than the State Employment Service, such as jobs which are usually filled through trade unions or professional societies, or
- C. The employment prospects in the claimant's occupation in the area where he is claiming are sufficiently favorable to justify an opinion by the Agent State local office that personal efforts by the claimant to find work have reasonable probability of success. As a claimant's length of unemployment increases and he has been unable to find work in his customary occupation, he may be required to seek work in some other occupation in which job openings exist, or, if that does not seem likely to result in employment, he may be required to accept counseling for possible retraining or a change in occupation.

16. Application of the Policy Statement

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a. Claimstakers will inform claimants of their rights and responsibilities in claiming unemployment insurance. Since an active search for work is one of the claimants responsibilities, the claimant must be told how to meet this requirement.

A claimant does not meet this requirement through a "haphazard application for work with a fixed number of employers." In many instances this would waste the time of the claimant and employers, and not test the claimant's attachment to the labor market.

b. The Agent State must not instruct the claimant to engage in an unreasonable work search when there is no basis for believing that such actions would result in probable employment. A claimant should not be asked to pursue a given course of actions merely to "test" a claimant's willingness to follow instructions. Therefore, the Agent State should:

(1) Know the composition of the local labor market, the hiring practices of the employers, and methods usually followed by persons trying to obtain employment in that labor market area;

(2) Instruct the claimant how to make an "active search for work,"

(3) Upon request, evaluate and report to the Liable State on the claimant's actions to fulfill this requirement.

17. Advising Claimants of their Responsibilities

a. When a claimant files an initial claim for benefits in the Agent State, the claimstaker should review the Liable State's section of the electronic Handbook and advise the claimant of the work search requirements to establish and maintain eligibility for benefits.

b. Claimants should be told to keep a personal record of work search contacts for future reference, even if the contact was listed on the weekly certification form. Claimants should be told that they will need this information to complete Eligibility Review forms that may be sent to them by the Liable State.

The claimant's record should include: date of contact; type of contact (new or follow-up); method of contact (in person, phone, etc.); type of work sought; name of firm; address of firm; name

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and position of person talked to; phone number; and results of the contact.

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

1. Initial Interstate Claims. The Initial Interstate Claim, Form IB-1, should be printed in the exact format as prescribed. If the Form IB-1 is computer generated by the Agent State as a result of data entry, the resulting form should be in the same format as prescribed here for preprinted forms.

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

2. Initial Interstate Claim, Form IB-1 (8 1/2" X 11" White)

a. Face of Form

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

b. Reverse of Form

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c. Purpose and Use. This form is used to file an interstate initial claim (new, additional, re-open). It is used by the Agent State to document all necessary information from the claimant and provide data to the Liable State. It is used by the Liable State to continue the necessary actions to establish, activate, or transfer a claim.

d. Preparation

Item 1, Name. Enter the claimant's name as it should appear on the benefit check. If a claimant used any other name or social security number while working for employers during the base or lag period of the claim, enter that information on the second line.

Item 2, Social Security Number. Enter the claimant's number as provided by the claimant. If the Agent or Liable State is Canada, the claimant's Social Insurance Number must be entered in the "Remarks" section of the form. If the claimant worked under another number during the base period, enter the other number in the space provided on the second line of item 1. If the claimant worked under more than two numbers during the base period of the claim, record all other numbers under "Remarks" on the back of Form IB-1. When the claimant has worked under more than one social security number, complete a Fact Finding Report, Form IB-11, and attach to the initial claim. If the claimant worked without reporting a social security number to the employer, complete a Fact-Finding Report, Form IB-11, and attach to the initial claim and advise the claimant to provide proof of employment directly to the Liable State.

Item 3, Local Mailing Address. Enter the claimant's local mailing address, including zip code, and advise the claimant that communications from the Agent State and the Liable State will be sent to that address. If a claimant uses a post office box number or general delivery address, record the claimant's actual residence address in the "remarks" section and advise the Liable State of any possible effect on the claimant's availability for work. If there is a possible negative effect, complete a Fact Finding Report, Form IB-11.

Item 4, Telephone Number. Enter the claimant's telephone number, including the area code. If a claimant does not have a telephone, but can receive messages at a number, write "no phone" in space provided and enter the message number in remarks section

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

with an explanation.

Item 5, Date of Birth. Enter the claimant's month, day, and year of birth.

Item 6, Sex. Indicate the claimant's sex by entering "F" for female or "M" for male.

Item 7, Highest Grade Completed. Enter the highest grade or level of education completed by the claimant. The entries will be translated as follows for telecommunication of TC-IB1:

- 01 - 12 = Grammar school thru high school - enter corresponding number 01-12 for grade completed;
- 13 = 1 year of college;
- 14 = 2 years of college or Associate degree;
- 15 = 3 years of college;
- 16 = 4 years of college or Bachelor's degree;
- 17 = 1 year of post graduate study;
- 18 = 2 years of post graduate study or Master's degree;
- 19 = Doctorate.

Item 8, Occupation. Enter the claimant's customary occupation.

Item 9, Recall Date (Date to Return to Work). Enter the date that the employer has advised the claimant to return to work. If the claimant does not have a definite recall date, leave blank.

Item 10, Have you claimed, received, or applied for unemployment benefits in the past 12 months? If the answer is "yes," enter date of last claim and Liable State in space provided.

Item 11, I am a citizen or a national of the U.S. I am in a satisfactory immigration status. If the claimant answers

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

"yes" to this question, check the "yes" box to statement 11(a) and 11(b), as appropriate. A check of "yes" to statement 11(a) should suffice to determine the claimant's status as exempt from denial of benefits by reason of nationality and no entry is required for statement 11(b).

If the answer is "no" to statement 11(a) or "yes" to statement 11(b), enter the claimant's alien registration number, if applicable. If the claimant does not have an alien registration number, provide sufficient information to allow the Liable State to complete the systematic alien verification requirements and determine if the claimant was legally employed during the base period, and is currently legally employable. From whatever documentation the claimant has, obtain the date, name of document, date of entry, expiration date of the document, and a description of restrictions that may affect the claimant's employability. If the claim is being taken by telephone, ask the claimant to read the information from the Immigration and Naturalization documents that were issued.

If the claimant answers "no" to the second statement, prepare a Fact Finding Report, Form IB-11, addressing the claimant's immigration status.

Item 12, Is there any reason you cannot accept work now? If the answer is "yes" explain in detail in the "Remarks" section or on a Fact Finding Report, Form IB-11. Obtain sufficient information to allow the Liable State to determine if the claimant has able, available and/or work search issues.

Item 13, Are you a member in good standing of a Union and get work through a union hiring hall? If the answer is "yes", record claimant's union affiliation, local number and geographical location in the "Remarks" section.

Item 14, Did you receive, are you receiving, or will you receive any vacation pay, severance pay, or wages in lieu of notice? If the answer is "yes", provide the type, amount and source of payment, and the period covered in the "Remarks" section of this form.

Item 15, Are you farming, attending school, self-employed, a corporate officer, related to anyone for whom you worked, or employed on a commission basis? If the answer is "yes", explain in detail on a Form IB-11.

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

Item 16, Do you have dependents? If the answer is "yes" to this question, the Agent State will take no action. Upon receipt, the Liable State will initiate the appropriate questionnaire to the claimant.

Item 17, Did you receive, will you receive, or are you receiving payment under any type of retirement plan, pension, social security, IRA, KEOGH, etc., based upon previous employment? If the claimant answers "yes" to this question, obtain and provide the necessary information pertaining to the payment(s) on a Form IB-11 or in the "remarks" section.

Item 18, Do you make or owe child support payments? If "yes", complete the following. If the claimant is required to pay or owes child support payments which are being enforced by a State or local child support enforcement agency, he/she should answer "yes" and enter the City, County, and State of enforcement, as appropriate.

Item 19, Do you elect to have Federal Income Tax withheld from your benefit payments? Unemployment compensation is taxable income. If the claimant answers "yes" to this question, advise the claimant that the Federal income tax deduction is 15 percent of the benefit payment issued. Also advise the claimant that if their State has a State withholding provision, the Liable State will contact them upon receipt of their claim.

Item 20, Work Record. Enter the employer's name, address and telephone number of the actual worksite, and the address and telephone number where the employer's payroll records are kept, if different. If Maritime, identify the vessel. If work was performed outside the United States, the country should be identified. Enter the beginning and ending dates of employment with each employer, the type of work performed, and check the appropriate box to show reason for separation.

If there are any incomplete addresses or approximate dates of employment shown in this section, explain in the "Remarks" section.

Item 21, Remarks. Use this section for detailed answers. Indicate item numbers to which the answers apply. If more space is required, use Forms IB-11 or IB-11S, as appropriate.

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

Item 22, Certification/Authorization. The claimstaker should read this statement to the claimant and have the claimant sign. If the claim is being taken by telephone, enter "By Telephone" on the signature line. If the claimant cannot agree to any part of the statement, explain fully in the "Remarks" section.

Item 23, Claimant elects to file under the wage combining arrangement and does not qualify under this State's law. If the claimant has employment in more than one State and elects to file a combined wage claim, the claimstaker must answer "yes" only if the claimant has been found to be monetarily ineligible under the filing State's law on a combined wage claim. When this question is answered "yes", "CWC" must be checked in Item K on face of Form IB-1.

Item 24, UCFE Service Data. If the initial claim being filed is a "new" or "transitional" claim and the claimant has Federal civilian service in the base period, follow instructions in ET Handbook No. 391, UNEMPLOYMENT COMPENSATION FOR FORMER FEDERAL CIVILIAN EMPLOYEES, CHAPTER III, and answer the questions in Items 24 A-E as instructed below:

Item 24(A), Covered Employment in Agent State. When the answer to this question is "yes", the Liable State must ensure that the claimant's Federal wages are not assignable to the Agent State. Covered employment (in the claimant's State of residence) subsequent to separation from Federal Civilian Service changes the wage assignment for unassigned wages. If UCFE wages have been previously assigned based on a prior initial claim, subsequent employment in the agent State does not change the State of assignment.

Item 24(D), Form ETA 935. Make no entry in this item. The agent State will no longer complete an ETA 935 at the time of the initial claim. The Liable State will obtain ETA 935 information directly from the claimant, if necessary.

Item 25, Claimstaker's Certification. When all of the entries on the claim form have been completed, the claimstaker should read the certification in Item 25, strike out "witness the signature of this claimant" and sign the form.

Ensure that the Agent office number, address, telephone number and FAX number are affixed to the form in the space provided and

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that a copy of each supporting document pertaining to the claim is attached to the Liable State's copy of the Form IB-1.

Item A, Today's Date. Enter the date this form is completed.

Item B, Effective Date. This entry is required on all claims. Refer to the electronic Handbook for Interstate Claimstaking to determine the correct effective date for the Liable State. In most cases, it will be the Sunday preceding the date of filing. If the claimant requests backdating, enter the precise date to which the claimant is requesting backdating.

Item C, Liable State. Enter the two digit FIPS Code, in the boxes, and the full name of the State against which the claim is filed on the line to the right of the boxes. Unless the claimant has been previously questioned, do not complete this item until Item 20, Work Record, has been completed by the claimant and reviewed.

Item D, Backdate Code. If the effective date shown in Item B precedes the beginning of the week in which the claim is being taken, enter the coded reason for backdating in this box. If the claim is not being backdated, enter "0" on the TC-IB1. Backdating codes are as follows:

- 1 - Filed invalid Interstate claim.
- 2 - Filed invalid Intrastate claim
- 3 - Backdated due to workload scheduling in the Agent State.
- 4 - Backdated due to failure to file transitional claim - nonclaimant error.
- 5 - Backdated due to cancelled Combined Wage Claim (CWC).
- 6 - Other, explain using a Fact Finding Report, Form IB-11.

In addition to entering one of the above codes, explain the backdating in the "Remarks" section or on an accompanying Fact Finding Report, Form IB-11. If backdating reason is Code 5, show

SECTION II - TAKING AND PROCESSING INITIAL INTERSTATE CLAIMS

the date that transferred wages were/are being returned in the "Remarks" Section of the Form IB-1.

Item E, FIPS Code (Residence). Enter the two digit State, three digit County, and the four digit City (labor market area, SMSA) FIPS Code for the claimant's actual place of residence. This may not coincide with the claimant's mailing address or Agent State.

Item F, Ethnic (E) Code. Enter the claimant's identification by racial/ethnic characteristics. This entry is not mandatory. The claimstaker should advise the claimant that the information is requested for statistical purposes and enter the claimant's ethnic and minority group as advised by the claimant. The claimstaker should use INA when the claimant does not wish to provide the information.

Show the racial/ethnic group with which the claimant is identified as follows:

- Code 1 - White, not Hispanic
- Code 2 - Black, not Hispanic
- Code 3 - Hispanic
- Code 4 - American Indian and Alaskan Native

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- Code 5 - Asian and Pacific Islander
- Code 6 - Information not available.

Item G, DOT Code. Enter the first three digits of the DOT code corresponding to the occupation shown in Item 8.

Item H, Agent State Data. Enter the two digit FIPS Code for the Agent State and the four digit number of the local office. If the number is less than four or more than four, follow instructions from central office for creating a four digit number. The local office number should not exceed four digits under any circumstances.

Item I, Issue. If there is any type of "issue" on the claim, enter "X" for yes, and be sure to attach the appropriate Claimant/Employer Separation Statement, Form IB-3; a Fact Finding Report, Form IB-11; or a Separation Fact Finding Report, Form IB-11S to the initial claim assembly.

Item J, Claim Status. Check the box for the type of initial claim being filed.

New - An initial claim filed to establish a benefit year.

Additional - An initial claim is being filed and the claimant has an existing benefit year in the Liable State and there has been a break in the claim series attributable to employment since the last claim was filed.

Reopen - Same as for "additional" except that there has been no employment since the last claim was filed. Also check this box when the initial claim is the first claim filed in a new Agent State, and it is not a "new" or "additional" claim.

Item K, Program/Type of Wages. At the time the claim-taker reviews the Work Record, Item 20, and determines the Liable State, he/she should check the appropriate box(es) in this item to show the program and the type of wages involved in the claim, as follows:

UI - If there are any regular State covered wages shown in the base period.

UCFE - If there are any Federal civilian wages shown in

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the base period.

UCX - If there are any Military wages shown in the base period.

EB - If the Initial Claim is being taken to establish an Extended Benefits Claim.

CWC - If the claim is being filed under the Interstate Arrangement for Combining Employment and Wages and Item 23 is checked "yes." (Claimant must be ineligible for CWC against filing State before an Interstate CWC can be filed.)

Other - Check and enter the name of the program, such as TRA, Additional Benefits, etc.

Item L, Last Employer Data.

Ownership Code. Enter the ownership code of the last employer, last base period employer, or major base period employer, as appropriate.

SIC Code. Enter the first two digits of the last employer's Standard Industrial Code.

Item M, SS# Verified. Check "yes" if the claimant's social security number has been verified against sources of identification and verification as approved by the Agent State. Check "no" if the SSN has not been so verified.

e. Continuation Sheet of Form IB-1. Since Item 20 of the Initial Interstate Claim, Form IB-1 has only enough space for the entry of three (3) employers, there may be a need for continuation sheets to permit claimants to report all employers for whom they worked in the base and lag periods. To create the continuation sheet, item 20 of the Form IB-1 is replicated.

3. Agent State Claim Record. The Agent State should maintain a hard copy or computer record of the initial claim sent to the Liable State. When the initial claim is taken by the Liable State, the Agent State should create an Agent State record from the initial claims data provided by the Liable State.

4. Liable State Responsibilities. The Liable State is responsi-

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ble for obtaining any claimant signatures required and/or additional information needed to process the claim. (Refer to Section VIII, Liable State Functions.)

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

1. Claimant/Employer Separation Statement Form IB-3

a. Page 1 of Form.

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b. Page 2 of Form.

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SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

c. Number of Copies and Distribution. The Claimant/-Employer Separation Statement, Form IB-3, should be prepared as a letter sized (8 1/2" X 11") three part snap-out carbon assembly for manual preparation. However, it may also be electronically produced with copies sent to the employer and the Liable State, and a copy maintained for the Agent State record.

d. Purpose and use of Form IB-3. The Form IB-3 is designed to obtain separation information from the claimant and the last employing unit. This form is used at the Liable State's option. The Liable State's choice is shown on the Summary Page electronic Handbook for Interstate Claimstaking. The options are as follows:

Option 1 - Complete an IB-3 for the last employing unit, regardless of the reason given for separation or the location of the employer.

Option 2 - Complete an IB-3 for the last employing unit, regardless of the reason given for separation, if not located in the Liable State. If the last employing unit is located in the Liable State, use an IB-11S for separation issues.

Option 3 - Do not use the IB-3. Prepare an IB-11S for appropriate separation issues. Consult the Handbook to determine the separations for which the Liable State needs Fact Finding Report.

e. Form IB-3 Returned as Undeliverable. If the postal service returns this form as undeliverable and the employer is located in the Agent State, the Agent State should immediately try to obtain the employer's correct address and remail the form showing the new mailing date in the appropriate space. When the employer is located in a State other than the Agent State, and Agent State cannot obtain a correct address, the Agent State should immediately send the returned form together with the envelope to the Liable State as notification that the form did not reach the employer.

f. Preparation of Form IB-3. The claimstaker should insert the name of the Liable State and ask the claimant to complete Part I. Claimstakers accepting initial claims in a remote claimstaking environment must complete all sections of the form.

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

If additional space is needed to explain details of a separation, a Fact Finding Report, Form IB-11, should be used and attached to the Form IB-3. Agent State staff should ensure that the claimant's statement is clear, legible, and complete. If necessary, the Agent State staff member should provide an additional statement on the Form IB-11.

If the Liable State elects Option 1, this form is always completed with reference to the last employing unit. If the Liable State elects Option 2, this form is completed only if the last employing unit is not located in the Liable State. This form is never used under Option 3.

The original or an electronically created copy is mailed directly to the employer showing the address of the Liable State to which it must be returned within the number of days indicated by that Liable State in the Handbook.

If the Liable State indicates that it requires separation information from other employers in addition to the last employing unit, complete a SeparatioEn Fact Finding Report, Form IB-11S for those employers where the reason for separation is other than "lack of work".

Part I of the Form IB-3 should be completed as follows:

(1) Item 1, Name. The claimant's full name should be entered. If another name was used when working for the employer, that name should be entered in the space provided.

(2) Item 2, Other Names Worked Under. The name by which the claimant is known to the employer should be entered.

(3) Item 3, Social Security Number. The claimant's number as shown on the social security card should be entered.

(4) Item 4, Employer Name and Address. The name and address of the last employer for whom the claimant did any type of work should be entered.

(5) Item 5, Type of Work. The type of work performed for the employer shown should be entered.

(6) Item 6, Last Period of Employment. The beginning and ending dates of the claimant's most recent period of

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

employment before the effective date of the initial claim should be entered.

(7) Item 7, Hours of Work. The hours of the claimant's regular work shift, including the indicator of a.m. or p.m., as appropriate, should be entered.

(8) Item 8, Rate of Pay. The claimant's most recent rate of pay and a check of the appropriate box to show whether the amount shown was per hour, week, or month should be entered.

(9) Item 9, Number of Days Worked Per Week. The number of regular work days per week normally worked by the claimant should be entered.

(10) Item 10, Total Earnings. The claimant's total gross earnings during the period of employment shown in item 6 should be entered.

(11) Item 11, Name and Title of Supervisor. The name and title of the claimant's immediate supervisor should be entered.

(12) Item 12, Support of Household. The appropriate box to indicate whether the claimant is or is not the major support of the household should be checked.

(13) Item 13, Reason for Separation. The appropriate box to indicate why the claimant is no longer working for the employer shown in Item 3 should be checked. If a claimant was discharged, the name of the person who told the claimant should be entered.

(14) Item 14, Details of Separation. If a claimant quit or was discharged, the appropriate box should be checked and complete details of the reason(s) entered. If additional space is needed, a Fact Finding Report, Form IB-11 should be used for continuation.

(15) Item 15, Claimant Actions to Avoid the Quit or Discharge. The actions taken by the claimant to avoid quitting or being discharged should be explained.

(16) Item 16, Certification; Claimant's Signature; and Date. Ask the claimants to read the certification and enter

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

their signature or enter "telephone claim" and the date the statement was given, as appropriate.

(17) Item 17, Mailing Date. Enter the date on which this form is mailed to the employer.

(18) Item 18, Agent State Representative. The name of the Agent State staff member who accepts this completed statement from the claimant as being legible and adequate for transmittal should complete Items 17, 19, 20 and the "Notice to Employer" should be entered.

(19) Item 19, Agent State FIPS Code. Enter the two digit Agent State FIPS Code.

(20) Item 20, Agent State Local Office Number. Enter a four digit local office or claims center identifying number. If the assigned number is less than four digits, enter "0" in front of the number to fill the four boxes (example: local office number 538 = 0538).

(21) Notice to Employer. Enter the number of days that the employer has to respond and check the appropriate language of the instruction. To determine the appropriate response time and language, refer to the Liable State's section of Handbook. (Example: If the Liable State indicates, "postmarked - 10 - Work" or is coded "P 10 W", the sentence must read "Your reply must be [] received [] mailed [X] postmarked within 10 [] calendar [X] work days of the mailing date shown in Item 17, above, to the address indicated below.")

(22) Mail Reply To. The Agent State staffmember accepting or completing this form should enter the mailing address of the Liable State in this space. Agent States may elect to preprint labels for most frequently used Liable State addresses.

(23) Part II, Employer Statement. Self-explanatory. Completed by the employer.

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

2. Separation Fact Finding Report, Form IB-11S (8" X 10 1/2")

a. Face of Form

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

b. Back of Form

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

c. Purpose. Form IB-11S is used to record the claimant's and the Interviewer's statements during a separation factfinding interview. A separation factfinding interview should be conducted for any separation which may be disqualifying under the Liable State's law and the use of Form IB-3 is not appropriate. The report to the Liable State should include a statement from any local employer if one can be obtained by telephone on the day of the interview.

This form is not to be used when requesting reconsideration or redetermination of a nonmonetary determination (see Section III (3)(b)).

d. Number of Copies and Distribution. Form IB-11S is prepared in triplicate. The original is sent to the Liable State, together with the initial claim and other related forms. The duplicate is kept in the Agent State local office and the triplicate is given to the claimant. If the claim is taken under remote claimstaking procedures, prepare the Form IB-11S in duplicate and attach a copy of the initial claim and maintain a copy in the Agent State record.

e. Preparation of Form IB-11S. All entries must be legible, and should be printed if legible writing cannot be obtained. This form is intended to be self-filed by the claimant except for the interviewer's comments. Under remote claimstaking procedures, this form is completed by the claimstaker.

Instructions are given below for only those items which may not be self-explanatory.

(1) Claimant's Statement. When possible, the claimant should complete this portion (Items 1 through 9). If the claimant cannot do so, the interviewer should complete these items. Write in the first person and enter only information pertinent to the issue involved. If additional space is needed, use the space in Item 8. Under remote claimstaking procedures, the claimstaker will solicit information from the claimant and complete this form.

(2) Additional Claimant Statement. Use this space to add any pertinent details regarding the issue which the claimant may have omitted, or if there is not enough space under Items 6 or 7.

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

(3) Claimant's Signature. Ask the claimant to read any portion of the statement which was not completed by him/her. If a claimant has any difficulty reading the statement, read it to him/her. Make any changes, additions or deletions which the claimant requests. Have the claimant date and sign the form. If a claimant cannot or will not sign the statement, explain the reason in Item 10, Interviewer's Statement. When the claim is taken under remote claimstaking procedures, read the statement to the claimant, make any changes, additions or deletions which the claimant requests and enter "telephone claim" in space for claimant's signature.

(4) Interviewer's Statement. The interviewer should contact the employer listed in Item 1 if that employer is located in the area. Record information gathered and properly identify the source. If necessary, document labor market data and include an evaluation of the credibility of the statements made by the claimant. Enter any additional information pertinent to the issue and not contained in the claimant's statement.

(5) Interviewer's Signature. The interviewer should sign his/her name, not the name of the supervisor or manager of the office.

(6) Date of Interview. Enter the date of the claimant interview. If more than one interview is being reported on the same form, show in the Claimant's Statement the dates when the different information was obtained.

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

3. Fact Finding Report, Form IB-11 (8" X 10 1/2")

a. Face of Form

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

b. Purpose. This form is used as follows:

(1) as a continuation sheet when the space provided on the forms IB-3 and IB-11S is insufficient to record the claimant's statement or the interviewer's factfinding;

(2) to record nonseparation factfinding interviews; and,

(3) when a claimant requests reconsideration or redetermination of a nonmonetary determination prior to filing a formal request for a hearing as required by some States (consult the Handbook, Page B.). See Section VII (3)(B) for use of Form IB-14 when a claimant requests reconsideration of a monetary determination.

c. Number of Copies and Distribution. Complete form in triplicate. When it is being used as a continuation sheet to a Form IB-3 or IB-11S, attach corresponding copies to each copy of the Form IB-3 or IB-11S. When it is used to record a nonseparation factfinding interview or, to request reconsideration or a redetermination of a nonmonetary determination prior to appeal, send the original to the Liable State, the duplicate is kept by the Agent State and the triplicate is given to the claimant. When the claim is taken under remote claimstaking procedures, no copy for the claimant is required.

d. Preparation of Form IB-11. All entries must be legible, and should be printed if legible written entries cannot be obtained. Instructions below are for those items which may not be self-explanatory.

(1) Issue. Enter the key eligibility or disqualification issue. If the IB-11 is being prepared as a request for reconsideration or redetermination, enter "Request Reconsideration" or "Request Redetermination."

(2) Claimant's Statement. Write in the first person and enter only pertinent information on the issue involved. Do not repeat information previously furnished to the Liable State. It should be remembered that this is the claimant's statement and is being written for the claimant's benefit. If additional space is needed, use the back of the form.

(3) Claimant's Signature, Date Signed and Telephone Number. The claimant should sign, date and enter his/her telephone number on the form. If the form was completed by an

SECTION III - SEPARATION STATEMENTS AND FACT FINDING INTERVIEWS

Agent State staffmember, ask the claimant to read the statement and make changes, additions, or deletions which he/she believes proper. If the claimant has difficulty reading the statement, read it to him/her. If the claimant cannot, or will not sign the statement, the interviewer should explain the reason.

(4) Interviewer's Statement. Enter additional information which is pertinent to the case but not contained in the claimant's statement. This information should include labor market data, and the interviewer's evaluation of the credibility of the claimant's statements and other such information as the interviewer would need to determine the issue. Include any properly identified information reported by persons other than the claimant, e.g., an employer's statement concerning the claimant. If additional space is needed, use the back of this form.

(5) Interviewer's Signature. Claims interviewer should sign his/her name, not the name of the supervisor or manager of the local office.

(6) Interview Date. Enter the date of the claimant interview.

(7) Agent State Local Office Address and Number. Print, type, or rubber stamp the Agent State local office address and number in this space.

SECTION IV - BENEFIT RIGHTS INFORMATION

1. **Purpose.** An interstate claimant almost always faces the problem of competing against local job applicants for available work. The problem is often aggravated by the claimant's unfamiliarity with the local labor market and hiring customs of local employers. When a claim is filed under the Interstate Benefit Payment Plan, the claimant is required to comply with the requirements of the Liable State and some of the Agent State.

Under the interstate by-pass filing system, the Agent State's weeks claimed reporting requirements do not apply. However, Employment Service reporting and registration requirements and the active search for work requirement in the interstate Policy Statement on Active Search for Work (Section I, Item 15) still apply.

2. **Agent State Responsibilities.** At the time of the initial claim, the Agent State should:

a. Inform the claimant of the relationship between the Agent and Liable State;

b. Explain the services available to the claimant through the Agent State;

c. Advise the claimant of services furnished by the Employment Service and explain registration requirements;

d. Emphasize the need to comply with reporting instructions of the agent UI and Job Service offices.

3. **Liable State Responsibilities.** The Liable State should include written Benefit Rights information in its informational and claims packet to the claimant. The information provided should include, but is not limited to the:

a. Weeks claimed filing procedures.

b. Effect of Liable State's monetary determination;

c. Effect of Federal, civilian, and/or military wages on monetary eligibility;

d. Effect of wage combining on monetary eligibility;

e. Effect of waiting period;

SECTION IV - BENEFIT RIGHTS INFORMATION

- f. Effect of earnings on the weekly benefit amount;
- g. Liable State's responsibility for adjudicating eligibility issues;
- h. Methods available to the interstate claimant to protest a determination.
- i. Claimant's rights, employer's rights, and agency's rights with respect to appeals procedures;
- j. The need to continue filing for weeks claimed while an appeal is pending.
- k. The Liable State takes the initial claims under remote claimstaking procedures, it should also include:
 - (1) Information concerning the claimants responsibility to register with the Agent State Job Service agency and report as instructed by the Agent State.
 - (2) Information concerning filing future initial claims with the Liable State.

SECTION V - ELIGIBILITY REVIEW/REEMPLOYMENT ASSISTANCE

1. Eligibility Review (ER). The goal of the ER process is to ensure proper administration of the Liable State's "able, available and actively seeking work" provisions. This is to ensure that benefits are paid only to claimants who meet the Liable State's eligibility requirements. It is the responsibility of the Liable State to administer the ER program with respect to interstate claimants.

a. Obtaining Information and Reviewing Work Search Efforts. The Liable State should contact the claimant directly and follow-up, as appropriate. To do so, it is suggested that the Liable State use existing intrastate forms or develop a specific form for use in monitoring interstate claimant's continuing ability and availability. The State may wish to include the following on such form:

(1) Types of Work Sought. Such information would enable the Liable State to determine if the type of work sought is consistent with the claimant's occupational classification, prior work experience, education and/or training. This information could also potentially assist the Liable State in determining if the claimant can realistically expect to find such work in the local Agent State labor market.

(2) Methods of Contact. Such information would enable the State to determine if the claimant's methods for contacting employers are appropriate to industry practices.

(3) Names, Addresses, and Phone Numbers of the Individuals and Firms Contacted. The information recorded on each contact should enable the Liable State to determine if the claimant's work search is thoroughly and thoughtfully planned, and that pertinent information is maintained by the claimant to facilitate follow-up. It also provides the information needed for work search verification (see item 6 below).

(4) Results of Contacts. This information may indicate there are possibilities of immediate employment for the claimant.

(5) New and Follow-up Contacts. This information should indicate if the claimant's follow-up contact(s) are made for specific reasons, e.g., based upon an employer's request to check back later, or if the number of follow-up contacts appear to be excessive for the reporting period.

SECTION V - ELIGIBILITY REVIEW/REEMPLOYMENT ASSISTANCE

(6) Names and Positions of People Contacted. This information should enable the Liable State to determine if it is customary for persons holding the position or organizational title of those contacted by the claimant to know of openings and/or have the authority to hire.

(7) Applications Left with Employers. This information should enable the Liable State to determine if the type of firms that the claimant is contacting take and maintain applications from walk-in job seekers or from other sources.

The information provided by the claimant should be evaluated in relation to information available from other documents in the record and available information pertaining to the Agent State local labor market.

b. Verification of Employer Contacts

(1) This step may be an integral component of the Liable State's ER process. Verification provides information about the claimant's job search from the employer's prospective.

(2) If the claimant shows positive results with an employer (such as a hire or possible future hire), that employer contact probably should not be verified, as it may jeopardize the claimant's chances for the job.

(3) To produce satisfactory results, verification should be done as soon as possible after the work search contact. Verification may be by phone or mail.

(4) The Liable State should use discretion when verifying reported work search contacts. For example, if a claimant asks that a reported contact with a specific employer not be verified, the request should be honored as some employers may have a negative bias against individuals that are receiving unemployment compensation.

2. Agent State Responsibilities. The Agent State is not responsible for conducting ER interviews of interstate claimants. However, it is responsible for assessing the claimant's skills, employability, and needs for reemployment assistance and/or supportive services, for making necessary Job Service referrals and for notifying the Liable State of any issues detected.

SECTION V - ELIGIBILITY REVIEW/REEMPLOYMENT ASSISTANCE

The Agent State is also encouraged to assist the Liable State by providing local labor market information when necessary for the determination of eligibility.

SECTION VI - CONTINUED INTERSTATE CLAIMS

1. Continued Interstate Claims

a. Agent State Responsibilities. At the time of an initial claim, the Agent State should give the claimant two interstate continued claim forms, or a lesser number as requested by the Liable State, and pre-addressed envelopes. Where possible, the claimstaker should enter the name of the Liable State and the week ending dates on the forms. The claimant should be provided verbal/written completion and filing instructions and instructed to complete and mail the form on the Sunday or Monday following the date shown.

The claimstaker should also advise the claimant that the Liable State will provide additional information and claim forms which may be different from those being issued. The claimant should be instructed to use the forms and follow the instructions provided by the Liable State if they are received before weeks are claimed. The claimant should also be told that if a certification form for the same week(s) is received from the Liable State after the week has been claimed, do not claim the week twice.

If the Liable State has implemented electronic weeks claimed certifications, the claimant should be advised that he/she will receive filing instructions from the Liable State.

The claimant should be advised to follow the Liable State's weeks claimed filing instructions and to contact the Liable State directly if a problem arises. However, it is the Agent State's duty to provide assistance to any claimant who requests it.

b. Liable State Responsibilities.

(1) Initial Information Packet. The Liable State should provide an informational packet to each interstate claimant upon receiving an initial claim. The Liable State decides on the content of the packet. However, at a minimum, it should contain information on filing weeks claimed; appealing a determination with which they disagree; any policy or legal considerations which the claimant should know; benefit information; any special requirements of the Liable State; and a telephone contact number.

(2) Continued Claims Forms. The Liable State should establish a method to systematically provide continued claim forms to the claimant which ensures that the claimant has the necessary forms whether the claim is in payment, pending, or

SECTION VI - CONTINUED INTERSTATE CLAIMS

disqualification status. Such system should initiate forms to the claimant upon the receipt of the initial claim.

(3) Claimant Information and Assistance. The Liable State should provide experienced and knowledgeable staff members to handle claimant inquiries in a prompt and businesslike manner. Claimants who make telephone inquiries should not be kept holding on the line while prolonged searches for records are made, nor should claimants' calls be transferred more than once before reaching the appropriate staff member who can answer the questions being raised. When a claimant cannot be immediately helped, a message should be taken and the claimant should be told when the call will be returned (i.e., this afternoon, tomorrow morning).

(4) Monitoring Work Search. The Liable State is responsible for monitoring the claimant's continuing eligibility. If the Liable State's continued claim form does not provide space for claimants to list their work search, the Liable State should devise a scheme to fulfill this need.

(5) Change of Address. When, during the claims series, the claimant reports an address change, the Liable State should advise the claimant to report the change to the Agent State local office/claim center if the address change has not been reported on an initial claim or Form I-16.

SECTION VI - CONTINUED INTERSTATE CLAIMS

2. Continued Interstate Claim, Form IB-2, (8 1/2" X 11")

a. Face of Form

SECTION VI - CONTINUED INTERSTATE CLAIMS

b. Back of Form

SECTION VI - CONTINUED INTERSTATE CLAIMS

c. Purpose. Two or fewer Form IB-2s will be issued to each claimant by the Agent State at the time of an initial claim, in accordance with instructions from the Liable State. The claimant will be instructed to use the form(s) until the Liable State provides the claimant with certification forms and instructions. This form will be used anytime a claimant requests a certification form from the Agent State.

d. Preparation of Form IB-2. The Form IB-2 is designed for self-filing by the claimant. However, the claimstaker should complete the claimant's social security account number, the Liable State's name, program type, and the week ending date for the claimant. The claimant should be issued an IB-7 and advised to follow the form completion instructions when completing the Form IB-2.

When a Form IB-2 is being filed through the Agent State, all entries must be legible, preferably printed, and the form should be completed as follows:

(1) Claimant's Name. The claimant's name should be printed exactly as it appears on the claim records. If the claimant's name has changed, the new name should be entered and a written explanation should accompany the claim form.

(2) Social Security Number. Self-explanatory.

(3) Mailing Address. The claimant's local mailing address should be entered.

(4) Liable State. Self-explanatory.

(5) Regular, E, Other. This section is used to indicate whether the claimant is claiming under regular, extended, additional, or other special programs.

(6) Telephone Number. Self-explanatory.

(7) Have You Moved Since Last Claim Filed? This question is asked to prompt a change of the claimant's address of record and to indicate a need for the claimant to report to the Agent State local office for availability and Job Service purposes.

When the claimant answers "yes" to this question, it is not sufficient for the Liable State to just change the claimant's address of record, the claimant should be informed to report to

SECTION VI - CONTINUED INTERSTATE CLAIMS

his/her Agent State local office to update Agent State records.

(8) Claim for Week Ending. The date of the Saturday at the end of the week claimed is entered in this space.

(9) Employment During the Week Claimed. The claimant must answer this question and provide appropriate information for every week claimed to enable the Liable State to determine continuing eligibility.

(10) Reasons for Separation. When the claimant indicates employment during the week claimed, this question must be answered. When the reason is other than "lack of work" or "still working", the claimstaker must complete an IB-11S when the claim is filed through the local office. Advise claimant to provide details of the separation in the "Remarks" section or a letter if claim is mailed under by-pass procedures.

(11 and 12) Deductible Income. These questions must be answered for each week claimed. If either question is answered "yes", the amount received must be entered.

(13) Availability, Job Refusal, Attending School, Self-Employment, and Duplicate Claims. Each of these questions must be answered for the week claimed. If a "yes" or "no" answer appears in any asterisked box, further factfinding or explanation must accompany the claim.

(14) Local Office Identifying Information. Self-explanatory.

(15) For Use of Liable Office. Self-explanatory.

(16) Work Search. The claimant must list in this section independent efforts made to find work.

(17) If no work search efforts are shown in item 16, an explanation must be provided in this section.

(18) Returned to Work. If the claimant returns to work during a week claimed or prior to completing the claim form, this information must be provided concerning the employment.

(19) Remarks. This section can be used by the claimant or the claimstaker to provide additional information.

SECTION VI - CONTINUED INTERSTATE CLAIMS

(20) Certification. This certification must be signed by the claimant for each week claimed.

(21) Eligibility Review Interview. If this form is used by the Agent State local office when the claimant has reported in person, this question must be answered.

(22) Claimstaker's Remarks. If the claimstaker has additional information that is pertinent to the claim, it should be provided to the Liable State in this section.

(23) Claimstaker's Signature. When this form is used by the Agent State local office to accept a week claimed certification, the claimstaker should sign and date the form in this section.

SECTION VI - CONTINUED INTERSTATE CLAIMS

3. Interstate Claim Information Sheet and IB-2 Completion Instructions, Form IB-7 (8 1/2 X 11" - White)
 - a. Face of Form

SECTION VI - CONTINUED INTERSTATE CLAIMS

b. Reverse of Form

SECTION VI - CONTINUED INTERSTATE CLAIMS

c. Purpose. The Form IB-7 is given to interstate claimants who file an interstate initial claim to inform them of the general procedures for filing interstate claims and to provide completion instructions for the Form IB-2. It is given to all claimants together with the Form IB-2s when new, additional, or reopened claims are filed. All claimants should be instructed to keep this form for reference, as it contains the Liable State's address and telephone number.

The Liable State will send the claimant more procedures and specific instructions when it receives the initial claim.

d. Completion Instructions. The Agent State must enter the name, address, and telephone number of the Liable State in the space provided on page 1. The Agent State may wish to pre-print forms with the identity of the most frequently used Liable States.

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

1. Seldom Used Forms. Forms described in this section should be seldom used under interstate procedures because most claimants contact the Liable State directly and vice-versa. However, these forms should be used when the claimant requests assistance from the Agent State local office.

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

2. Interstate Request for Reconsideration of Monetary Determination/Wage Credits, Form IB-14 (8 1/2" X 11" --white)
 - a. Face of Form

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

b. Purpose. The Form IB-14 should be used by the claimant to request reconsideration of a monetary determination or wage credit transfer on a combined wage claim. This form should be used to provide information which the claimant believes was omitted or incorrectly stated in the monetary determination or wage transfer. When the claimant wants to appeal a monetary determination, Form IB-11 should be used.

c. Number of copies and distribution. The Form IB-14 will be prepared in quadruplicate. The original and one copy will be sent to the Liable State/transferring State, addressed to the State's Liable interstate unit or combined wage units, as appropriate, not to the Appeals Section. One copy will be given to the claimant and one copy is for the Agent State's record.

d. Preparation. All entries on the form must be legible; entries should be printed, if entries cannot be legibly written. Instructions below are for items which are not self-explanatory:

(1) Item 1, Name. Print full name as it appears on the initial claim. If the claimant uses any other name (including nicknames), enter this name(s) on second line.

(2) Item 2, Social Security Number. Enter the social security number reported on the Form IB-1 (or IB-4) to permit the Liable State to immediately locate the claim. If such number is incorrect, enter the correct number on the second line. Enter in Item 8 any other social security numbers used by the claimant during the base period.

(3) Item 4, Liable State. Enter the full name of the Liable State (do not abbreviate). If the claim is an interstate combined wage claim, enter the name of the paying State.

(4) Item 5, Transferring State. Enter the name of the transferring State (do not abbreviate) where wages are in dispute on a combined wage claim. If the filing State is not the paying State, complete both Items 5 and 6 and send this form to the paying State.

(5) Item 7, Request for reconsideration of monetary determination/wage credits. Enter the claimant's reason(s) for request.

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

(6) Item 8, Employer wages. If the claimant does not agree with the amount of base period wages/weeks shown on the determination, enter the employer's name(s), total base period wages by quarter as asserted by the claimant, number of weeks employed, and dates of employment within the base period. Total wages should include those shown on the monetary determination or combined wage transfer.

(7) Item 9, Base period employment not listed on the determination or transfer. Enter the omitted employer's name(s), address(s) where claimant worked, payroll address(s) if different, dates of employment, and reason(s) for separation.

e. Information to claimant. The claimant should be informed that:

(1) The Liable State will issue a revised or amended monetary determination, an appealable nonmonetary determination, or process the IB-14 as an appeal.

(2) If the request for reconsideration is from a wage transfer, the transferring State will amend the wage transfer, issue an appealable determination, or process the IB-14 as an appeal.

(3) Original documents attached to Form IB-14 will be mailed to the claimant after examination by the Liable State, if a specific request is made on Form IB-14.

f. Action by Liable State. If no change is made in the monetary determination or wage transfer, the Form IB-14 should be processed as an appeal, if the Liable State's law and regulations permit such action; if they do not, the Liable State should promptly issue an appealable redetermination to the claimant.

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

3. Interstate Change of Address, Form IB-16 (4 1/2" X 8 " - White)
 - a. Face of Form

SECTION VII - SUBSIDIARY FORMS AND PROCEDURES

b. Purpose. The Form IB-16 is completed by the Agent State to report an interstate claimant's change of address and changes of Agent local office numbers and FIPS Codes. This form need not be completed with an initial claim.

c. Number of Copies. One copy is prepared and sent to the Liable State.

d. Preparation. The Agent State completes claimant's name, address, SSA number, zip code, date prepared, name of Liable State, local office number, Agent State FIPS Code and use local office address stamp in space provided. Items for State, County, and City of Residence should be completed if there is a change in the information previously submitted.

SECTION VIII - LIABLE STATE FUNCTIONS

1. **Standard Procedures**. Most of the methods used in processing interstate claims depend on the Liable State's intrastate procedures. To ensure quality service, certain standardized procedures and policies should be followed by all Liable States.

2. **Informational Packets for Interstate Claimants**. Each Liable State office should provide an informational packet to each interstate claimant upon receiving an initial claim that establishes a new benefit year or is the first claim filed from an Agent State. The Liable State decides on the content of the packet; at a minimum, it should contain: information on weeks claimed filing procedures; any special requirements of the Liable State; any policy or legal considerations which the claimant should know; Benefit Rights information; a telephone contact number; and, a copy of the continued claims form with completion instructions.

Another point which should be covered is the claimant's appeal rights. To assure that appeal hearings will not be denied on the grounds that an appeal was not filed timely, all claimants should be instructed on how to file an appeal by mail to the Liable office.

3. **Contacting Agent State Offices**. The Liable State should consult the electronic interstate office directory and use the information provided to contact the Agent State office by telephone, FAX or ICON.

4. **Liable State's Determinations**. When the Liable State issues an eligible monetary determination, a notice on the monetary determination should clearly advise claimants with pending issues that the receipt of benefits may be affected by the nonmonetary determination.

When a monetary determination (eligible or ineligible) is issued on a claim where all base period wages are not yet on file, a notice on the monetary determination should clearly advise the claimant that a redetermination is pending the receipt of requested wages.

a. **Determination Standards**. Monetary and Nonmonetary determinations must conform to claim determination standards in the ES Manual, Part V, Section 6010 - 6019.

SECTION VIII - LIABLE STATE FUNCTIONS

b. Pre-Exhaustion and Pre-Benefit Year End Notices. The Liable State should notify the claimant whose maximum benefit amount is approaching exhaustion when the balance is only twice the weekly benefit amount. The Liable State should notify the claimant when the benefit year ending is approaching when only two weeks are left before the benefit year ends. This gives ample notice to the claimant of when to file an initial claim to establish another benefit year, or to file for Extended Benefits or additional benefits, as appropriate, and should reduce the number of backdated claims.

c. Eligibility Requirements for Extended Benefits. A State in an Extended Benefit Period must give advance notice to claimants of additional eligibility requirements. This can best be done as an attachment to the Pre-exhaustion and Pre-Benefit Year Ending Notices.

SECTION IX - INTERSTATE BENEFIT PAYMENT CONTROL

1. Organization and Responsibility. Interstate benefit payment control is: the prevention, detection and recovery of overpayments to individuals filing under the Interstate Benefit Payment Plan (IB Program) and the Interstate Arrangement for the Combining of Employment and Wages (CWC) Program; locating individuals with outstanding overpayments who have relocate to another State; and the recovery of overpayments from individuals who have relocated to another State.

For a SESA's interstate benefit payment control program to operate efficiently and effectively, it may be necessary for the activities to be assigned to a specific individual(s) in the agency's benefit payment control unit.

2. Interstate Cooperation. Cooperation among States is necessary to aid in recovering overpayments when the claimant is located out-of-State. Without the assistance of other States, a SESA has limited ability to recover overpayments from out-of-State residents. Generally, most overpayments are recovered by using benefits payable to offset the overpayment. This recovery tool is not available when the individual's subsequent entitlement is under another State's law, unless there is a system of interstate cooperation. The increase in the number of interstate overpayments being detected as a result of the implementation of the Interstate Crossmatch and Claimant Locator System lend support to the need for interstate cooperation in recovering overpayments.

When a debtor resides out-of-State and reasonable efforts to recover the overpayment have not been successful, it is suggested that the State consider requesting assistance from the State in which the claimant is located or with which the claimant has a benefit claim on file. In making such a request, the procedures, as outlined in the Handbook for Interstate Overpayment Recovery, must be followed.

States which lack the authority to recover an overpayment for another State should review their law or policy, and if necessary, seek a change in the law to provide such authority. Suggested language has been provided in UIPL 50-86.

3. Handbook for Interstate Overpayment Recovery. This Handbook is an alphabetical compilation of pages prepared by each State to provide a reference directory when assistance with benefit payment control is needed from another State.

SECTION IX - INTERSTATE BENEFIT PAYMENT CONTROL

4. Interstate Crossmatch and Claimant Locator. The Crossmatch is used to match benefit claims in the Liable State against wage and benefit files in the Agent/Residence State. The Claimant Locator is used to locate claimants with outstanding overpayments who cannot be located through the normal intrastate procedures. Normally these claimants no longer reside in the record holding State.

5. Preparation of Crossmatch Request. Liable States should extract lists of interstate claimants from benefit files to be matched to the Agent State's wage record/benefit files and prepare the transmission record in the prescribed data format.

If the claimant filed from two or more Agent States, during the audited quarter, repeat the record for each Agent State. States may consider matching interstate claimants with the records of a State bordering the Agent State when the labor market area for the claimant's residence includes the border State. Liable States should not broadcast crossmatch records, nor should a request be directed to each State for the same claimant.

6. Preparation of Claimant Locator Request. It is suggested that this list include only those claimants with outstanding overpayments who cannot be located through the normal intrastate locating procedures.

7. Transmission of Crossmatch/Locator Request. Send the Crossmatch and/or Claimant Locator listing to the designated HUB via ICON or by tape. Requests must be received at the crossmatch host HUB before the close of business (based on time zone of the responsible HUB) of the last business day of the third week ending in the fourth month following the end of the quarter being matched. SESAs may begin transmission of requests ten (10) days prior to the deadline date. Requests received after the due date will not be processed.

8. Using Locator Responses to Contact Claimant. Positive responses to Claimant Locator inquiries should be used by the Benefit Payment Control Collection Unit for contacting claimants. When the response indicates that the claimant is filing in another State, the claim holding State should be contacted for assistance under the Interstate Reciprocal Overpayment Recovery Arrangement, as appropriate. When the response indicates that the claimant is employed, the employer should be contacted to obtain the claimant's current address.

SECTION IX - INTERSTATE BENEFIT PAYMENT CONTROL

9. Selecting Interstate Cases for Follow-up. When a "hit" response is received as a result of a wage crossmatch request, cases should be selected for follow-up by applying the State probability index or other selection criteria. After cases are selected, prepare Form IB-8605 for each employer to request a breakdown of earnings. Completion instructions are printed on the form. States may wish to request prior or lag quarter earnings in order to match the entire period in which benefits were claimed.

A second request should be sent if the employer does not respond to the initial request. When an employer fails to respond to the second request, the employer should be contacted by telephone and encouraged to cooperate. If the employer still refuses to cooperate, and the amounts involved are significant, contact the responding State's Benefit Payment Control Unit for assistance in obtaining the information from the employer.

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- a. Interstate Unemployment Insurance Benefit Payment
Audit, Form IB-8605, (8 1/2 X 11)

(1) Face of Form

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(2) Reverse of Form

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(3) Purpose and Use. The Form IB-8605 is used to obtain information from the employer pertaining to the specific number of hours, the dates and the weeks worked, and the earnings during the audit quarter.

(4) Number of Copies and Distribution. This form should be printed as a three copy letter sized (8 1/2 X 11) assembly. Different color stock may be used. The request should be prepared in triplicate and distributed as follows: original - to the employer; duplicate - second request to the employer; triplicate - file copy. Computer generated forms should follow the same format as prescribed for pre-printed forms.

If Form IB-8605 is computer generated and mailed, procedures should provide for generating a second request and maintaining a record of the original request.

10. Interstate Crossmatch/Locator Results. SESAs are encouraged to maintain a record of the number of overpayments established and the number of claimants located for internal management purposes.

11. Preparation of Crossmatch/Claimant Locator Response. All requests, whether coded "1" or "3", should be matched with wage record and benefit history files to determine if the claimant has wages or a claim on file.

(a) If a code "1" or "3" request has a "hit" in the wage file, the requesting State should be provided with the employer's name and address.

(b) If a code "1" request has a "hit" in the benefit file, the requesting State should be notified by entry in position 407.

(c) If a code "3" has a hit in the benefit file, the requesting state should be provided with the claimant's name of record and the most recent address of record.

12. Transmitting Crossmatch and Claimant Locator Responses to the HUB. Responses to all inquiries must be received via transmission or tape by the close of business of the last business day of the first week ending in the fifth month following the quarter matched (Exception: When fifth month begins on Saturday, responses are due the following Friday). The

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response should list "hits" only, i.e., crossmatch claimants with earnings reported; and, locator claimants with employers' names and addresses or claimant addresses provided.

13. Providing Assistance to Other States. States are encouraged to provide assistance to other States in obtaining information from local employers and claimants, and with overpayment recovery and/or prosecutions.

14. HUB Responsibilities.

a. Sorting and Forwarding Requests. The HUB will sort and forward all requests received for the match quarter by the last business day of the third week of the fourth month following the end of the match quarter. Requests received after the deadline will not be processed.

b. Sorting and Forwarding Responses. All responses received by the due date will be sorted and forwarded to the appropriate State by the 12th day of the month. (Exception: when the 12th falls on a weekend, records will be forwarded on the prior Friday.) When responses are received after the due date, whether or not they will be sorted and forwarded will be decided on a case by case basis depending on volume.

15. Arrangement with the Office of the Inspector General (OIG).

a. Referral of Interstate Federal Program Cases to the OIG. Claimant fraud cases resulting from claims filed under all Federal programs (i.e., UCFE, UCX, TAA, REPP, DUA, EUC) must be reviewed for referral to the Regional OIG. All claims that meet the established criteria must be referred to the Regional Inspector General for Investigations (RIGI) in accordance with the established procedures. See the appropriate Federal program handbook for referral criteria and procedures.

b. Referral of Interstate State Program Cases to the OIG. Each SESA is encouraged to formulate an arrangement with the Regional OIG regarding the referral criteria for fraudulent interstate claims filed under the regular State UI program. Based on the arrangement, the SESA would refer all fraudulent interstate claims meeting the established criteria to the RIGI.

16. Establishment of Overpayment. Whether the claim involves

SECTION IX - INTERSTATE BENEFIT PAYMENT CONTROL

State or Federal programs, the SESA will establish an overpayment in accordance with the provisions of the State law.

17. Collection of Overpayments. The SESA should seek to recover all overpayments through a comprehensive and uniformly applied collection program that is at least equal to its collection program under the intrastate program. The program for collection of interstate overpayments should include all debt collection procedures reasonably available to the SESA, including interstate assistance.

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18. Interstate Request For Overpayment Recovery, Form IB-8606,
(8 1/2 X 11)

a. Face of Form

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b. Purpose and Use. The Form IB-8606 is used to request another State to recover an overpayment and provide notice of such request to the claimant.

c. Number of Copies and Distribution. This form should be printed as a three copy letter sized (8 1/2 X 11) assembly. Different color stock may be used. The request should be prepared in triplicate and distributed as follows: original -to the Agent State; duplicate - to the claimant; triplicate -file copy.

If Form IB-8606 is computer generated, procedures should provide for maintaining a record of the request. Computer generated form should follow the same format as prescribed for the pre-printed form.

19. Issuance of an Interstate Request For Overpayment Recovery.

Prior to a request for overpayment recovery, a determination must have been issued, in accordance with the Secretary of Labor's Standard for Claim Determinations, Part V, Employment Security Manual, and must be final. All determinations pertaining to waiver or postponement of recovery must also be final. This does not apply when a claim is being cancelled or withdrawn, resulting in an overpayment, and a substitute claim is being filed. In such case, notice of the overpayment should accompany the initial claim and the appropriate documents forwarded immediately.

20. Interstate Overpayment Offset. The Social Security Act, Section 303(g)(1), requires that any interstate offset of an overpayment "...shall be made only in accordance with the same procedures relating to notice and opportunity for a hearing as apply to the recovery of regular unemployment compensation paid by such State." Therefore, the State receiving the Interstate Request For Overpayment Recovery must follow procedures relating to a notice to the claimant and opportunity for a hearing as apply under the recovering State's law.

The recovering State should offset the weekly benefit amount to the same extent as for the same type (fraud or nonfraud) intrastate overpayment.

a. Interstate Cross-program Offset. The recovering State will use Federally funded benefits to offset a State program overpayment for another State only when both recovering and requesting States have a signed reciprocal agreement in effect

SECTION IX - INTERSTATE BENEFIT PAYMENT CONTROL

with the U. S. Secretary of Labor pursuant to Section 303(g)(2) of the Social Security Act. Special provisions for the use of offset from Federal program payments such as a specified amount of the weekly benefit payment and period of time that offset may be used shall be applicable under this program.

b. Notice of Determination to Recover Overpayment. Each State should develop a notice and issue a determination that includes, at a minimum, the following information:

- (1) the statutory authority under which the determination to recover the overpayment is issued;
- (2) the name of the State requesting recoupment;
- (3) the amount of outstanding overpayment balance as certified by the requesting State;
- (4) the date of the original notice of determination of overpayment;
- (5) type of overpayment (fraud or nonfraud as reflected in the original determination);
- (6) program type (UI, UCFE, UCX, TRA, etc.);
- (7) the amount to be offset weekly; and,
- (8) the right of appeal.

These determinations must be in accord with the Claim Determinations Standard. (E.S. Manual, Part V, Section 6000)

The recovering State will determine the amounts that will be offset under its law. However, the original overpayment determination of the requesting State is not subject to redetermination by the recovering State. Any issues raised concerning the overpayment determination or the outstanding balance to be recovered should be addressed to the requesting State rather than the recovering State.

21. Priorities of Overpayment Offset.

(a) Recovery of Interstate Overpayments. When a SESA receives a request for recoupment from more than one State, after

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any intrastate overpayment has been satisfied, the oldest overpayment determination will be given priority except as in (b) and (c) below.

(b) Recovery of Outstanding Overpayment in a Combined Wage Claim Transferring State. The paying State shall offset any overpayment outstanding in a transferring State(s) prior to honoring a request from any other State, except as described in (c) below. If there is an overpayment in more than one transferring State, a pro-rated portion of the offset should be applied to each participating State's overpayment by the paying State. The paying State shall credit the deductions against the Statement of Benefits Paid to Combined Wage Claimants, Form IB-6, or immediately forward a check to the transferring State.

(c) Recovery of Overpayments that Result from the Withdrawal or Cancellation of a Combined Wage Claim. When a combined claim is cancelled or withdrawn and the condition for withdrawal is that the claimant repays the benefits paid in full or authorizes the State against which a substitute claim is filed to offset the overpayment, the State accepting the substitute or subsequent claim under such conditions will offset the overpayment prior to the release of any payments to the claimant.

22. Recordkeeping and Disbursement of Recovered Monies. The recovering State will:

(a) provide the claimant with a receipt for the amount of the benefits offset;

(b) at the time of the offset or no less than monthly, prepare and forward a check representing the amount recovered made payable to the requesting State (except as provided in Section 21 b.); and,

(c) retain a record of the overpayment balance in its files until the exhaustion of regular, additional, supplemental, extended, or any other benefit extension or the end of the benefit year of the claim on file, whichever is the later.

SECTION X - INTERSTATE APPEALS

1. Introduction. This section contains procedural instructions for processing interstate appeals from monetary and nonmonetary determinations. All interstate appeals will be processed for hearings to be conducted by telephone from the Liable State. With few exceptions, telephone hearings will be conducted on all interstate appeals.

All interstate appeals from monetary and nonmonetary determinations are the responsibility of the Liable State. If the Liable State determines that an interstate hearing cannot be conducted by telephone, the Liable State's appeal unit will assemble the claim documents and send them to the Agent State appeals section with the request to conduct an in-person hearing on their behalf.

2. Agent State Assistance

a. Appeals - Nonmonetary determinations. When a claimant disagrees with a nonmonetary determination and contacts the Agent State for assistance, the Agent State should review the determination with the claimant to ensure that he/she understands it. If after the review the claimant wants to file an appeal, the State should assist the claimant in preparing the appeal. This may be done by completing a Fact Finding Report, Form IB-11 or advising the claimant that the following information should be included in a letter to the Liable State:

- o Claimant's name, address and telephone number, Social security number, Claimant's signature and date; and
- o Identification of the determination being appealed and a statement with reasons for disagreeing with the determination.

b. Appeals - Monetary Determinations/Wage Transfers. When a claimant disagrees with a monetary determination or results of a wage transfer request, the Agent State should review all available information to determine the course of action to follow.

(1) Appeal of Monetary Determination. If the claimant contends the determination was based on incorrect earnings or weeks of work, the Agent State should assist the claimant in preparing an Interstate Request for Reconsideration of a Monetary Determination/Wage Transfer, Form IB-14 and attach all available proof of earnings, unless the Liable State has acknowledged the

SECTION X - INTERSTATE APPEALS

wages and denied their use.

When wages are not included in the monetary determination or a wage transfer because a determination was previously issued denying their use, and the claimant still wants to appeal, assist the claimant in preparing an appeal, using a Fact Finding Report, Form IB-11, or advise the claimant to prepare a letter of appeal and mail it to the Liable State.

When the claimant disagrees with employment and wages used on a combined wage claim or a response to a Request for Transfer of Wages, TC-IB4, of "no wages available", the paying State should prepare a request for reconsideration, including any proof of wages to the transferring State, using an IB-14. When the paying State is operating in a remote claimstaking environment, it may have the proof of wages mailed to it for attachment to IB-14 or it may advise the claimant of how to request reconsideration directly with the transferring State, ensuring the transferring State recognizes that request pertains to a TC-IB4 response and not an appealable determination.

c. Request for Redetermination of Nonmonetary Determination. Some States do not accept appeals from determinations. Instead, they require claimants to request a redetermination. To determine if the Liable State requires this procedure, consult the Handbook for Interstate Claims Taking. In such cases, assist the claimant in preparing a request or advise the claimant to write a letter to the Liable State being sure to include the information as stated in (a) above.

d. Appeals Filed by Mail through the Agent-State Claims Office. Upon receiving a mailed appeal from a claimant, the Agent State should make a note of the appeal on the claimant's Agent State record and forward the appeal letter to the Liable State. The date the Agent State received the request should be shown on the letter.

e. Appeals by Employers. The Liable State appeals section will schedule hearings which may be needed in connection with an appeal filed by an employer from a determination on an interstate claim. If an employer files an appeal of a Liable State determination with the Agent-State, that office should send the appeal to the Liable State and inform the employer that his/her appeal was sent to the Liable State for consideration. If an employer asks an Agent State for procedures on filing an appeal from the determination or redetermination made by another State

SECTION X - INTERSTATE APPEALS

on an interstate claim, the Agent State should advise the employer to mail the appeal to the Liable State and supply the address.

3. Liabile State Procedures

a. Receipt of an Appeal. When the Liable State receives an appeal, it should assemble the records involved in the claimant's appeal. The materials normally include the record of payments to the claimant; the claimant's Forms IB-1 and 2, separation information received from the employer; all Fact Finding Reports (Forms IB-3, IB-11, IB-11S); a copy of the appealed determination; and any related correspondence or forms.

b. Review for Reconsideration. The Liable State should always review records for possible reconsideration of an appealed determination. If an internal review of the record shows that the appealed determination should be reconsidered and benefits should be allowed or denied, a redetermination should be issued to all interested parties.

If the Liable State law requires a formal withdrawal of the appellant's appeal, the Interstate Claims Unit should ask the appellant to file such withdrawal.

If the internal review shows that the appealed determination should not be reconsidered, the Liable State will then follow its procedures for sending cases to its appeals unit.

c. Appeals Filed by Mail Directly with the Liable State. When a claimant mails an appeal to the Liable State, the Liable State should acknowledge receipt and advise the claimant that notification will be sent of the date, time, and place of the hearing on the appeal.

When a claimant appeals a determination to a Liable State which only accepts appeals from redeterminations, that State should notify the claimant that the determination will be reconsidered, and that the claimant should file an appeal after receiving the redetermination if he/she still disagrees.

d. Scheduling the Liable State Hearing. Any hearing within the Liable State, or outside the Liable State, which is necessary in order to obtain the parties' testimony and evidence must be scheduled in the same order as intrastate appeals received at the same time.

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e. Notice of the Liable State Hearing. Notices of hearing must be sent to all interested parties.

f. Issuing the Decision. The Liable State appeals section will mail simultaneously its decision to the claimant, the employer, and other interested parties.

SECTION XI - DISASTER UNEMPLOYMENT ASSISTANCE

1. **Authority.** The program of disaster unemployment assistance (DUA), for individuals whose unemployment is the direct result of a major disaster declared by the President of the United States, is established by Section 410 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended. Operational and administrative guidelines for the DUA program are published in ET Handbook 356. The Federal Regulations governing the program are published at 20 CFR Part 625.

2. **Interstate Claims.** When an initial claim is being filed as a result of a major disaster in a State other than the State in which or from which the claim is filed, the claim will be filed under the Interstate Benefit Payment Plan (IBPP) through the Agent State or under remote initial claimstaking procedures, as appropriate. Refer to Section II of this Handbook for general procedures for filing initial interstate claims. This chapter provides additional procedures for handling interstate claims for individuals affected by a disaster.

Note: DUA claims are payable only if the individual is not eligible for unemployment compensation (UC) benefits under any State or Federal law or if the individual is ineligible for UC as a direct result of the disaster (refer to 20 CFR 625.4(i)).

a. **Initial Interstate Claim - UI, UCFE, or UCX.** When a claimant has potential UI, UCFE or UCX entitlement under one State's law and a potential DUA claim against another State, handle claim as follows--

(1) When the **Agent State** accepts initial claims in person or under remote filing procedures, it will:

(A) complete and mail an Initial Interstate Claim, Form IB-1, and transmit a TC-IB1 via ICON to the appropriate Liable State for UI, UCFE, or UCX entitlement following the regular interstate procedures;

(B) identify the claim as UI, UCFE, UCX and CWC, as appropriate, in Item K of Form IB-1. The Agent State **will not** indicate DUA in "Other";

(C) indicate "Claim resulted from disaster____
(name)____" in the "Remarks" section of the Form IB-1. (Officially, disasters are identified by numbers; however, since the Agent State will not know the number, it will use the commonly

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used name that identifies the disaster, such as "Hurricane Eloy in Dallas, Texas");

(D) advise claimant of weeks claimed procedures and handle the issuance of Form IB-2s under regular procedures; and

(E) advise the claimant to return to the Agent State local office or telephone the appropriate Agent State claim center to file a DUA claim if an ineligible determination is received from the Liable State.

(2) The **Liable State** will:

(A) process the initial claim under its regular procedures and issue a UI, UCFE, or UCX monetary determination;

(B) issue appropriate continued claim form(s) and filing instructions under the regular procedures; and

(C) handle availability/work search requirements in accordance with the DUA requirements.

b. Initial Interstate Claim - UI/UCFE/UCX and DUA. When a claimant has potential UI, UCFE, or UCX entitlement and a potential DUA claim against the same Liable State--

(1) The **Agent State** will:

(A) complete and mail an Initial Interstate Claim, Form IB-1, and transmit a TC-IB1 via ICON to the appropriate Liable State for a monetary determination following the regular procedures;

(B) identify the claim as UI, UCFE or UCX, as appropriate, in Item K of Form IB-1 and DUA in "Other". (This will allow the Liable State to identify and process the claim as DUA in the event that there is no entitlement under any other State or Federal unemployment compensation program);

(C) complete an affidavit of the individual's DUA base period employment and earnings, including self-employment. The **DUA base period is the most recent tax year** for the individual that has ended prior to the disaster;

(D) indicate "Claim resulted from disaster____
(name)_____" in the "Remarks" section of the Form IB-1. (Offi-

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cially, disasters are identified by numbers; however, since the Agent State will not know the number, it will use the commonly used name that identifies the disaster, such as "Hurricane Eloy in Dallas, Texas");

(E) issue appropriate continued claim form(s) and filing instructions under the regular procedures; and

(F) advise the claimant that he/she will receive a DUA monetary determination based on the affidavit if it determined that no entitlement exists under any other State or Federal program.

(2) The **Liable State** will:

(A) process the initial claim and issue a UI, UCFE, UCX monetary determination under its regular procedures;

(B) if the claimant is monetarily ineligible on a regular claim, process the claim as a DUA claim and issue a DUA monetary determination, in accordance with the instructions published in ET Handbook No. 356; and,

(C) issue appropriate continued claim form(s) and reporting instructions.

(D) handle availability/work search requirements in accordance with the DUA requirements.

c. Initial Interstate Claim - DUA. When an interstate DUA only claim is filed:

(1) The Agent State will:

(A) complete and mail an Initial Interstate Claim, Form IB-1, identified in Item K under "Other" as "DUA" and transmit a TC-IB1 to the Liable State;

(B) complete an affidavit of the individual's DUA base period employment and earnings, including self-employment and attach it to the Form IB-1. The DUA base period is the **most recent tax year for the individual** that ended prior to the disaster;

(C) indicate "Claim resulted from disaster ____"

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(name)_____ " in the "Remarks" section of the Form IB-1. (Officially, disasters are identified by numbers; however, since the Agent State will not know the number, it will use the commonly used name that identifies the disaster, such as "Hurricane Eloy in Dallas, Texas");

(D) issue the Interstate Claim Information Sheet, Form IB-7, together with **two** Continued Interstate Claim, Form IB-2s clearly marked "DUA" in Item 5 to the DUA claimant;

(E) advise the claimant to follow the weeks claimed filing instructions received from the Liable State; and

(F) cooperate with the Liable State to ensure the accuracy of the DUA payment.

Note: Liable State instructions concerning the number of IB-2s to be issued to interstate claimants **do not** apply to DUA claims.

(2) The **Liable State** will:

(A) issue a DUA monetary determination, in accordance with the instructions in ET Handbook No. 356;

(B) issue continued claims forms and reporting instructions;

(C) contact the SESA in another State for verification of employment and earnings identified on the Form IB-1 as covered in the other State, when appropriate; and

(D) **not use** a Request for Transfer of Wages, Form IB-4, or TC-IB4 to identify or verify wages in another State for purposes of determining DUA claims (liable States may obtain this information using the Interstate Inquiry (IBIQ) or a TC-IB13).

3. Interstate Continued Claims. Continued DUA claims will be handled by the Agent and Liable State in the same manner as UI, UCFE, or UCX continued claims filed under the IBPP. At the time of the initial claim, the Agent State will issue to the DUA claimant two (2) Form IB-2s, clearly marked "DUA" in Item 5 and advise the claimant to complete one for each week claimed and forward directly to the Liable State. (Refer to Section VI of this Handbook.)

When a Form IB-2 "DUA" is received, the Liable State must ensure

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that a DUA payment is issued only if the individual is not eligible for UI in any State and issue reporting instructions and continued claim forms under the Liable States procedures.

APPENDIX A

RESERVED FOR INSTRUCTIONS FOR FORMATING AND UPDATING ELECTRONIC HANDBOOKS. To be issued later.

APPENDIX B - INTERSTATE AGREEMENTS

1. Interstate Benefit Payment Plan -- Effective May 1938

a. Article I - Purpose of Plan. This Plan shall operate as to those administrative State agencies adopting the Plan. The purpose of this Plan shall be to initiate and further a method for the payment of unemployment compensation benefits to those unemployed individuals who have earned uncharged wage credits or who have accumulated uncharged credit weeks under the unemployment compensation laws of one or more States (the administrative agencies of which have subscribed to the Plan), and who otherwise might be deprived of benefits because of their absence from a State (or States) in which their benefit credits had been accumulated.

To effectuate this purpose, the unemployment compensation administrative agencies (hereinafter referred to as State agencies) subscribing hereto shall act as agents for each other in a procedure contemplated by this Plan, to the end that no such individual shall be deprived of said benefit credits by reason of his absence from that State in which such credits were accumulated.

b. Article II - Committee -- Creation, Powers and Functions.

Item A - To instrument this Plan there shall be a committee the functions of which are as follows:

(1) To encourage and assist cooperation between the State agencies subscribing to the Plan in furtherance of its purpose.

(2) To issue rules, regulations, instructions, procedural forms, and interpretative decisions relating to this Plan to be utilized by the State agencies.

(3) To aid in adjusting differences between the State agencies.

(4) To do any and all things necessary, consistent with purposes of this Plan, provided that nothing expressed or implied in this Plan shall be construed as affording the committee authority to exercise the powers of the several State agencies or of the Bureau of Employment Security (subsequently renamed - Employment and Training Administration).

Item B - The Committee shall consist of a representative

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from each region of the National Interstate Conference of Employment Security Agencies (subsequently incorporated as - Interstate Conference of Employment Security Agencies), appointed pursuant to its constitution.

Two technical advisors of the Bureau of Employment Security (currently Employment and Training Administration) may assist the committee in the performance of its duties.

c. Article III - State Agencies - Duties and Privileges.

(1) Each subscribing State agency shall cooperate with each other and with the committee.

(2) Each subscribing State agency shall adopt and put into force and effect each rule, regulation, instruction, procedural form and interpretative decision relating to this plan suggested by said committee except such as a State agency finds to be clearly inconsistent with the statutory provisions of its unemployment compensation law.

(3) Each subscribing State agency shall, insofar as possible, accede to jurisdiction of the committee in adjusting differences between such State agencies.

(4) Each subscribing State agency may call upon the Committee for assistance in any matter relating to the purpose of the Plan.

(5) Nothing in this Plan shall be construed as a prohibition upon the State agencies in modification of such procedure as may be instituted by the committee and otherwise adopting such special arrangements as may appear desirable to further the purpose of this Plan as determined by the Committee. The terms of all modifications and special arrangements shall be filed with the chairman of the committee prior to any action being taken thereon by any subscribing State agency.

d. Article IV - Plan - Commencement and Duration. A State Agency may later subscribe to this Plan by filing a notice of acceptance with the chairman of the committee provided for in this Plan.

Two-thirds of the State agencies subscribing to this Plan may amend any of its provisions.

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Any subscribing State agency may cease to participate in this Plan by filing a notice of its intention with the chairman of the committee created under this Plan. In such event, its participation shall cease at the expiration of 6 months from the date of filing such notice.

For purpose of this Plan the term "State agency" shall include the District of Columbia.

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e. NOTICE OF ACCEPTANCE OF INTERSTATE BENEFIT PAYMENT PLAN

The _____ agency administering unemployment compensation in and for _____ hereby gives notice that it accepts the Interstate Benefit Payment Plan approved by the Interstate Conference of Unemployment Compensation Agencies on October 22, 1937.

Signed _____ (Name of State Administrative Agency)

by _____ Name Title is duly authorized to sign this instrument on behalf of said agency.

Date _____

f. Suggested Regulation for Interstate Benefits to be Adopted by Each State.

(1) The following regulations shall govern the (name of State agency), in its administrative cooperation with other States adopting a similar regulation for the payment of benefits to interstate claimants.

(2) Definitions

As used in this regulation, unless the context clearly requires otherwise:

(a) "Interstate Benefit Payment Plan" means the Plan approved by the Interstate Conference of Employment Security Agencies under which benefits shall be payable to unemployed individuals absent from the State (or States) in which benefit credits have been accumulated.

(b) "Interstate claimant" means an individual who claims benefits under the unemployment insurance law of one or more liable States through the facilities of an agent State. The term "interstate claimant" shall not include any individual who customarily commutes from a residence in an agent State to work in a liable state unless the (name of State agency) finds that this exclusion would create undue hardship on such claimants in

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specified areas.

(c) "State" includes the District of Columbia, Puerto Rico and the Virgin Islands.

(d) "Agent State" means any State in which an individual files a claim for benefits from another State.

(e) "Liable State" means any State against which an individual files, through another State, a claim for benefits.

(f) "Benefits" means the compensation payable to an individual, with respect to his unemployment, under the unemployment insurance law of any State.

(g) "Week of Unemployment" includes any week of unemployment as defined in the law of the liable State from which benefits with respect to such week are claimed.

(3) Registration for Work.

(a) Each interstate claimant shall be registered for work, through any public employment office in the agent State when and as required by the law, regulations, and procedures of the agent State. Such registration shall be accepted as meeting the registration requirements of the liable State.

(b) Each agent State shall duly report, to the liable State in question, whether each interstate claimant meets the registration requirements of the agent State.

(4) Benefit Rights of Interstate Claimant.

(a) If a claimant files a claim against any State, and it is determined by such State that the claimant has available benefit credits in such State, the claims shall be filed only against such State as long as benefit credits are available in that State. Thereafter, the claimant may file claims against any other State in which there are available benefit credits.

For the purposes of this regulation, benefit credits shall be deemed to be unavailable whenever benefits have been exhausted, terminated, or postponed for an indefinite period or for the entire period in which benefits would otherwise be payable, or whenever benefits are affected by the application of a seasonal

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restriction.

(b) The benefit rights of interstate claimants established by this regulation shall apply only with respect to new claims (notices of unemployment) filed on or after July 5, 1953.

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(5) Claims for Benefits.

(a) Claims for benefits or waiting period shall be filed by interstate claimants on uniform interstate claim forms and in accordance with uniform procedures developed pursuant to the Interstate Benefit Payment Plan. Claims shall be filed in accordance with the type of week in use in the agent State. Any adjustments required to fit the type of week used by the liable State shall be made by the liable State on the basis of consecutive claims filed.

(b) Claims shall be filed in accordance with the agent-State regulations for intrastate claims in local employment offices, or itinerant point, or by mail:

(i) With respect to claims for weeks of unemployment in which the individual was not working for his regular employer, the liable State shall, under circumstances which it considers good cause, accept a continued claim filed up to 1 week, or one reporting period, late. If a claimant files more than one reporting period late, an initial claim must be used to begin a claim series and no continued claim for a past period shall be accepted.

(ii) With respect to weeks of unemployment during which an individual is attached to his regular employer, the liable State shall accept any claim which is filed within the time limit applicable to such claims under the law of the agent State.

(6) Determination of Claims.

(a) The agent-State shall, in connection with each claim filed by an interstate claimant, ascertain and report to the liable State in question such facts relating to the claimant's availability for work and eligibility for benefits as are readily determinable in and by the agent-State.

(b) The agent-State's responsibility and authority in connection with the determination of interstate claims shall be limited to investigation and reporting of relevant facts. The agent-State shall not refuse to take an interstate claim.

(7) Appellate Procedure.

(a) The agent-State shall afford all reasonable

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cooperation in the taking of evidence and the holding of hearings in connection with appealed interstate benefit claims.

(b) With respect to the time limits imposed by the law of a liable State upon the filing of an appeal in connection with a disputed benefit claim, an appeal made by an interstate claimant shall be deemed to have been made and communicated to the liable State on the date when it is received by any qualified officer of the agent-State.

(8) Extension of Interstate Benefit Payment Plan to Include Claims Taken in and for Canada.

This regulation shall apply in all its provisions to claims taken in and for Canada.

2. Interstate Reciprocal Coverage Arrangement - Effective January, 1944.

I. Purpose of Plan

This plan shall operate as to those administrative State agencies which adopt the plan. The purpose of this plan shall be to provide for coverage under the unemployment compensation law of one State of services performed by an individual for a single employing unit for whom such services are customarily performed by such individual in more than one jurisdiction, to the end that duplication of contributions with respect to the same services be avoided and continuity of coverage of services customarily performed in more than one jurisdiction be assured.

To effectuate this purpose, each subscribing unemployment compensation administrative agency enters into this Arrangement with each other agency subscribing thereto.

II. Interstate Benefit Payment Committee - Functions

A. To instrument this plan, the Interstate Benefit Payments Committee (hereafter referred to as the committee) shall:

1. Encourage and assist cooperation between the State agencies subscribing to this plan in furtherance of its purpose.

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2. Recommend rules, regulations, instructions, procedural forms, and interpretative decisions relating to this plan be utilized by the State agencies.

3. Aid in adjusting differences between the State agencies.

4. To do any and all things necessary, consistent with purposes of this plan, provided that nothing herein shall be construed as affording the committee authority to exercise the powers of the several State agencies or of the Bureau of Employment Security.

III. State Agencies - Duties and Privileges

A. Each subscribing State agency shall cooperate with each other and the committee.

B. Each subscribing State agency shall, so far as it deems practicable, adopt and put into force and effect each rule, regulation, instruction, procedural form and interpretative decision relating to this plan, as suggested by the Committee, except such as a State agency finds to be clearly inconsistent with its State law,

C. Nothing in this plan shall be construed as a prohibition upon the State agencies against modification of such procedures as may be instituted by the committee and otherwise adopting such special arrangements as may appear desirable. The terms of such modifications and special arrangements shall be filed with the committee prior to their being put into effect.

IV. Plan - Commencement and Duration

A. The Plan shall be operative, solely as to those State agencies subscribing thereto, upon adoption by the Interstate Conference and upon the subscription thereto of two agencies, and may be amended by the action of two-thirds of the agencies subscribing to this plan.

B. Any subscribing State agency may cease to participate in this plan by filing notice of its intention with the committee and its participation shall cease at the close of the next calendar quarter, which starts after the date of filing such notice.

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C. For the purpose of this plan, the term "State agency" shall include the District of Columbia.

V. Suggested Regulation For Reciprocal Coverage To Be Adopted By Each State

1. The following regulation shall govern the (State) employment security agency in its administrative cooperation with other States subscribing to the Interstate Reciprocal Coverage Arrangement, hereinafter referred to as "the Arrangement".

2. As used in this regulation, unless the context clearly indicates otherwise:

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(a) "Jurisdiction" means any State of the United States, the District of Columbia, Canada (The inclusion of Canada is optional but recommended) or, with respect to the Federal government, the coverage of any Federal Unemployment Insurance Law;

(b) "Participating jurisdiction" means a jurisdiction whose administrative agency has subscribed to the arrangement and whose adherence thereto has not terminated;

(c) "Agency" means any officer, board, commission, or other authority charged with the administration of the unemployment compensation law of a participating jurisdiction;

(d) "Interested jurisdiction" means any participating jurisdiction to which an election submitted under this regulation is sent for its approval; and "interested agency" means the agency of such jurisdiction;

(e) "Services" 'customarily performed' by an individual in more than one jurisdiction means services performed in more than one jurisdiction during a reasonable period, if the nature of the services gives reasonable assurance that they will continue to be performed in more than one jurisdiction or if such services are required or are expected to be performed in more than one jurisdiction under the election.

3. Submittal and approval of coverage elections under the Interstate reciprocal coverage arrangement

(a) Any employing unit may file an election, on Form _____, to cover under the law of a single participating jurisdiction all of the services performed for him by any individual who customarily works for him in more than one participating jurisdiction.

Such an election may be filed, with respect to an individual, with any participating jurisdiction in which (1) any part of the individual's services are performed; (2) the individual has his residence; or (3) the employing unit maintains a place of business to which the individual's services bear a reasonable relation.

(b) The agency of the elected jurisdiction (thus selected and determined) shall initially approve or disapprove the election.

If such agency approves the election, it shall forward a copy

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thereof to the agency of each other participating jurisdiction specified thereon, under whose unemployment compensation law the

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individual or individuals in question might, in the absence of such election, be covered. Each such interested agency shall approve or disapprove the election, as promptly as practicable, and shall notify the agency of the elected jurisdiction accordingly.

In case its law so required, any such interested agency may, before taking such action, require from the electing employing unit satisfactory evidence that the affected employees have been notified of, and have acquiesced in, the election.

(c) If the agency of the elected jurisdiction, or the agency of any interested jurisdiction, disapproves the election, the disapproving agency shall notify the elected jurisdiction and the electing employing unit of its action and of its reasons therefor.

(d) Such an election shall take effect as to the elected jurisdiction only if approved by its agency and by one or more interested agencies.

(e) An election thus approved shall take effect, as to any interested agency, only if it is approved by such agency.

(f) In case any such election is approved only in part or is disapproved by some of such agencies, the electing employing unit may withdraw its election within ten days after being notified of such action.

4. Effective Period of Elections

(a) Commencement. An election duly approved under this regulation shall become effective at the beginning of the calendar quarter in which the election was submitted, unless the election, as approved, specifies the beginning of a different calendar quarter.

If the electing unit requests an earlier effective date than the beginning of the calendar quarter in which the election is submitted, such earlier date may be approved solely as to those **interested jurisdictions** in which the employer had no liability to pay contributions for the earlier period in question.

(b) Termination

(1) The application of an election to any individual under this regulation shall terminate if the agency

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of the elected jurisdiction finds that the nature of the services customarily performed by the individual for the electing unit has changed, so that they are no longer customarily performed in more than one participating jurisdiction. Such termination shall be effective as of the close of the calendar quarter in which notice of such findings is mailed to all parties affected.

(2) Except as provided in subparagraph (1), each election approved hereunder shall remain in effect through the close of the calendar year in which it is submitted, and thereafter until the close of the calendar quarter in which the electing unit gives written notice of its termination to all affected agencies.

(3) Whenever an election under this regulation ceases to apply to any individual, under subparagraph (1) or (2), the electing unit shall notify the affected individual accordingly.

5. Reports and Notices by the Electing Unit

(a) The electing unit shall promptly notify each individual affected by its approved election, on Form _____, supplied by the elected jurisdiction, and shall furnish the elected agency a copy of such notice.

(b) Whenever an individual covered by an election under this regulation is separated from his employment, the electing unit shall again notify him, forthwith, as to the jurisdiction **under whose** unemployment compensation law his/her services have been covered. If at the time of termination the individual is not located in the elected jurisdiction, the electing unit shall notify him as to the procedure for filing interstate benefit claims.

(c) The electing unit shall immediately report to the elected jurisdiction any change which occurs in the conditions of employment pertinent to its election, such as cases where an individual's services for the employer cease to be customarily performed in more than one participating jurisdiction or where a change in the work assigned to an individual requires him to perform services in a new participating jurisdiction.

6. Approval of Reciprocal Coverage Elections

The (name of State agency) hereby delegates to its (title of

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officer selected) authority to approve or disapprove reciprocal coverage elections in accordance with this regulation.

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**3. INTERSTATE MARITIME RECIPROCAL ARRANGEMENT -- Effective
July 1, 1946**

WHEREAS, the unemployment compensation laws of some of the participating jurisdictions provide for the coverage of maritime service on a compulsory basis while the laws of participating jurisdictions permit the coverage of such services on a voluntary basis; and

WHEREAS, it is desirable that such coverage be coordinated and integrated as between the jurisdictions so that the coverage of persons engaged in maritime services be as extensive as possible, and the duplication of contributions, with respect to such services, be avoided and continuity of coverage of services of individuals engaged in maritime service be assured, each subscribing jurisdiction hereby enters into the Arrangement herein below set forth with each other jurisdiction subscribing hereto.

Section 1

This agreement shall be known and may be cited as the Interstate Maritime Reciprocal Arrangement.

Section 2

As used in this Arrangement, unless the context clearly requires otherwise:

(a) "Jurisdiction" means any State of the United States and the District of Columbia;

(b) "Participating Jurisdiction" means a jurisdiction which has subscribed to this Arrangement and has not terminated its adherence thereto in accordance with the provisions hereof:

(c) "Agency" means any officer, board, commission or other authority charged with the administration of the unemployment compensation law of a participating jurisdiction;

(d) "American Vessel" means any vessel documented or numbered under the laws of the United States; and includes any vessel which is neither documented nor numbered under the laws of the United States nor documented under the laws of any foreign country, if its crew is employed solely by one or more citizens or residents of the United States or corporations organized under the laws of the United States or of any State.

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(e) "Maritime Service" means service rendered on or in connection with any American vessel engaged in interstate foreign operations by an officer or member of its crew entirely performed within the United States, or performed under a contract of service which is entered into within the United States or during the performance of which the vessel touches at a port in the United States, if the employee is employed on and in connection with such vessel outside the United States, except services performed by any person on vessels in the categories set forth below:

1. Vessels plying and operating wholly within the territorial limits of a single jurisdiction.

2. Vessels which enter or traverse waters outside the territorial limits of a single jurisdiction only as an incident to navigation within such jurisdiction.

3. Vessels which do not provide full subsistence facilities, including sleeping quarters for the entire crew and which traverse or travel on waters both within and without a single jurisdiction provided they dock nightly or regularly at dock or piers of such single jurisdiction.

4. Fishing vessels starting from and returning to a port within a single jurisdiction without touching ports of another jurisdiction or touching such ports solely to dispose of catch or for emergency purposes.

5. Yachts not used for commercial purposes.

(f) "Jurisdiction of coverage" with respect to a vessel operated by an employing unit means that participating jurisdiction in regard to which it is determined, in accordance with the provisions of this Arrangement, that maritime service rendered on or in connection with such vessel by persons for such employing unit is deemed performed entirely within such participating jurisdiction.

Section 3

(a) The jurisdiction of coverage in regard to maritime services rendered on a vessel operated by an employing unit shall be that participating jurisdiction in which the employing unit maintains the operating office from which the operations of the vessel are ordinarily and regularly supervised, managed and

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controlled.

(b) The maritime services of all persons for an employing unit under the conditions set forth under (a) above shall be deemed performed entirely within the jurisdiction of coverage, including services which are performed wholly or partially without that jurisdiction, but excluding services

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covered on a compulsory basis in a nonparticipating jurisdiction.

Section 4

Whenever an employing unit changes the operating office for a vessel with the result that a jurisdiction other than the existing jurisdiction of coverage becomes the jurisdiction of coverage under the terms of Section 3 of this Arrangement in regard to maritime services on such vessel, such employing unit shall notify the agencies of both jurisdictions not later than six weeks after such change occurs. Maritime services on such vessel shall be deemed performed in the jurisdiction of coverage for the new operating office beginning with the first voyage commencing after such transfer took place.

Section 5

(a) Each employing unit shall notify the agency of each participating jurisdiction of the names of those of its vessels regarding services on which, in its opinion, such participating jurisdiction has become the jurisdiction of coverage under this Arrangement. The agency of each such jurisdiction shall make a proper investigation in order to ascertain whether it has been correctly designated as the jurisdiction of coverage and shall give prompt notice of its findings to the agencies of all other participating jurisdictions. If it finds that the designation was correct and if none of the agencies of the other jurisdictions takes exceptions thereto within 20 days after notice, such agency shall give final notice of its findings to the employing unit and to the agencies of all other jurisdictions.

(b) If the agency of any participating jurisdiction raises objections against such findings within the specified time, or if the agency of that jurisdiction which was designated by the employing unit as the jurisdiction of coverage holds that such designation was erroneous, an Umpire shall be selected by the agencies of the jurisdictions involved who shall ascertain the facts and establish the identity of the jurisdiction of coverage.

Section 6

(a) If the unemployment compensation law of any participating jurisdictions excludes maritime service from compulsory coverage but allows voluntary coverage thereof by election, the agency of such jurisdiction will cooperate by approving any election filed with it for this purpose by an employing unit in the event that such jurisdiction would be a

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jurisdiction of coverage under the terms of this Arrangement. The agency of any participating jurisdiction shall refrain from approving any such election in the event that it would not be a jurisdiction of coverage under this Arrangement.

(b) The provisions of this Arrangement shall apply to maritime services performed for any employing unit to the extent that it would not be liable for contributions under the unemployment compensation law of a jurisdiction of coverage by not employing the required number of individuals, including those in maritime service, rendering it liable therefor under the provisions of such law, unless an application by such employing unit for voluntary coverage has been approved by the agency of such jurisdiction.

Section 7

The terms of this Arrangement shall apply to employing units beginning with the date on which liability in regard to maritime service commences under the Federal Unemployment Tax Act to the extent that the jurisdiction or jurisdictions of coverage subscribe to this Arrangement before or during the year in which such liability commences. The terms of this Arrangement shall apply beginning with the first day of the calendar year in which a jurisdiction subscribes to this Arrangement to the extent that such subscription occurred in a calendar year beginning after such liability commenced.

Section 8

Each jurisdiction shall indicate its subscription to this Arrangement by filing with the Chairman of the Subcommittee on Maritime Coverage of the Interstate Conference of Employment Security Agencies its duly adopted acceptance thereof, and shall indicate the termination of its subscription thereto by filing with such Chairman 90 days prior to the effective date of such subscription.

Section 9

This Arrangement may be amended by the action of two-thirds of the participating jurisdictions.

Accepted: Date _____

Name of State _____

Name of State Agency _____

Signature of Officer
authorized to enter

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into this Arrangement _____
Title of Officer _____

4. INTERSTATE GREAT LAKES RECIPROCAL ARRANGEMENT -- Effective 1946

The States subscribing to this document under the authority granted to each of them by the laws of their respective States hereby enter into this Arrangement and mutually agree as follows:

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Section 1

It is desirable that coverage of maritime employment on or in connection with vessels operating upon the Great Lakes and connected inland waterways which otherwise may be subject to the unemployment compensation law of more than one State be coordinated and integrated as between the States. Persons engaged in such employment should be assured of continuity of coverage and employers engaging such persons should be relieved insofar as possible of duplication and multiplicity in reporting wages and paying contributions. Maritime employment on the Great Lakes and on inland waterways in connection with operations on the Great Lakes differs from that found in other maritime operations, particularly those in coastwise and foreign commerce. The application of this Arrangement, which shall be known and may be cited as the Interstate Great Lakes Reciprocal Arrangement is therefore intended to be limited to operations on the Great Lakes and on connected inland waterways which are incidental to or connected with such operations.

Section 2

As used in this Arrangement, unless the context clearly requires otherwise:

(a) "Jurisdiction" means any State of the United States which borders the Great Lakes or inland waterways connected therewith and any State in which there are employers who have vessels in maritime operations on or in connection with the Great Lakes.

(b) "Participating jurisdiction" means a jurisdiction which has subscribed to this Arrangement and has not terminated its adherence thereto in accordance with the provisions thereof.

(c) "Agency" means any officer, board, commission or other authority charged with the administration of the unemployment compensation law of a participating jurisdiction.

(d) "Vessel" means any American vessel operating on the Great Lakes, or operating on other inland waterways in connection with operations on the Great Lakes; and "American vessel" means any vessel documented or numbered under the laws of the United States; and includes any vessel which is neither documented nor numbered under the laws of the United States nor documented under the laws of any foreign country, if its crew is employed solely by one or more citizens or residents of the United States or corporations organized under the laws of the United States or of any State.

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(e) "Maritime service" means service rendered on or in connection with any vessel by an officer or a member of its crew, or other seamen, which is performed on the Great Lakes or on inland waterways connected therewith, excepting service performed by any

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person on or in connection with vessels in the categories set forth below:

1. Vessels plying and operating wholly within the territorial limits of a single jurisdiction.

2. Vessels which enter or traverse waters outside the territorial limits of a single jurisdiction only as an incident to navigation within such jurisdiction.

3. **Vessels which do not** provide full subsistence facilities, including sleeping quarters for the entire crew, and which traverse or travel on waters both within and without a single jurisdiction provided they dock nightly or regularly at docks or piers of such single jurisdiction.

4. Fishing vessels starting from and returning to a port within a single jurisdiction without touching ports of another jurisdiction or touching such ports solely to dispose of catch or for emergency purposes.

5. Yachts not used for commercial purposes.

(f) "Jurisdiction of coverage" with respect to a vessel operated by an employing unit on the Great Lakes or in connection with operations on the Great Lakes means that participating jurisdiction in regard to which it is determined, in accordance with the provisions of this Arrangement, that maritime service rendered on or in connection with such vessel by persons for such employing unit is deemed performed **entirely within such** participating jurisdiction.

Section 3

(a) The jurisdiction of coverage in regard to maritime services rendered on or in connection with a vessel operated by an employing unit on the Great Lakes or on inland waterways in connection with operations on the Great Lakes shall be that participating jurisdiction in which the employing unit maintains the operating office from which the operations of the vessel are ordinarily and regularly supervised, managed and controlled.

(b) The maritime services of all persons for an employing unit under the conditions set forth under (a) above shall be deemed performed entirely within the jurisdiction of coverage, including services which are performed wholly or partially without that jurisdiction, but excluding services covered on a compulsory basis in a nonparticipating jurisdiction.

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Section 4

Whenever an employing unit changes the operating office for a vessel operated on the Great Lakes or on the inland waterways in connection with operations on the Great Lakes with the result that jurisdiction other than the existing jurisdiction of coverage becomes the jurisdiction of coverage under the terms of Section 3 of this Arrangement in regard to maritime services on such vessel, the jurisdiction of coverage will require such employing unit to notify the agencies of both jurisdictions not later than 6 weeks after such change occurs. Maritime services on such vessel shall be deemed performed in the jurisdiction of coverage for the new operating office beginning with the first voyage commencing after such transfer took place.

Section 5

(a) Each participating jurisdiction shall require notice from employing units of the names of those of their vessels regarding services on which, in their opinion, such participating jurisdiction has become the jurisdiction of coverage under this Arrangement. The agency of the jurisdiction which receives such notice shall make a proper investigation in order to ascertain whether it has been correctly designated as the jurisdiction of coverage and shall give prompt notice of its findings to the agencies of all **other participating jurisdictions**. If it finds that the designation was correct and if none of the agencies of the other jurisdictions takes exceptions thereto within 20 days after notice, such agency shall give final notice of its findings to the employing unit and to the agencies of the other jurisdictions and such findings shall, in the absence of fraud or misrepresentation, be effective until modified by new findings made pursuant to this section.

(b) If the agency of any participating jurisdiction raises objections against such findings within the specified time, or if the agency of that jurisdiction which was designated by the employing unit as the jurisdiction of coverage holds that such designation was erroneous and thereafter there is not mutual agreement as to the proper **jurisdiction of coverage, an Umpire** shall be promptly selected by the agencies of the jurisdictions involved who shall ascertain the facts and establish the identity of the jurisdiction of coverage.

Section 6

(a) If the unemployment compensation law of any participating jurisdiction excludes maritime service from compulsory coverage but allows voluntary coverage thereof by

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election, the agency of such jurisdiction shall cooperate by approving any election filed with it **for this purpose by an employing** unit in the event that such jurisdiction would be a jurisdiction of coverage under the term of this Arrangement. The agency of any participating jurisdiction shall refrain from approving any such election in the event that it would not be a jurisdiction of cover under this Arrangement.

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(b) The provisions of this **Arrangement shall not be** applicable to maritime services performed for any employing unit as to a jurisdiction of coverage under the following conditions:

(1) If such employing unit in respect to the jurisdiction coverage would not, under the unemployment compensation law of that jurisdiction, become a subject employer by reason of its failure to employ the required **number of persons, including** those in maritime service, and

(2) No application by such employing unit for voluntary coverage has been approved by the agency of such jurisdiction.

Section 7

Each participating jurisdiction shall, as far as it deems practicable, adopt all regulations, procedures, instructions and forms relating to this Arrangement and proposed for uniform application, except such as or to the extent that the participating jurisdiction finds to be clearly inconsistent with its unemployment compensation law.

Section 8

The terms of this Arrangement shall become operative in respect to a participating jurisdiction beginning with the date of its acceptance, unless otherwise specified in such jurisdiction's subscription to this Arrangement.

Section 9

Each jurisdiction shall indicate its subscription to this Arrangement by filing with the Chairman of the Subcommittee on Maritime Coverage of the Interstate Conference of Employment Security Agencies its duly adopted acceptance thereof, and shall indicate the termination of its subscription thereto as of the close of a calendar quarter by filing with such Chairman prior to the beginning of such quarter its duly adopted termination of such subscription.

Section 10

Each participating jurisdiction shall require all employing units with **respect to which it is** a jurisdiction of coverage:

(a) To notify their employees performing maritime service, at the time of hiring, of the name of the State which is the jurisdiction of coverage with respect to such service, and

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(b) To post in a conspicuous place or places on each vessel operated by them on the Great Lakes or on the inland waterways connected therewith, notices informing their employees of

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the State under whose unemployment compensation law contributions based on wages for services on such vessels are paid.

Section 11

This Arrangement may be amended by the action of two-thirds of the participating jurisdictions.

Accepted: Date _____

Name of State _____

Name of State Agency _____

Signature of officer
authorized to enter
into this Arrangement _____

Title of Officer _____

**5. INTERSTATE RECIPROCAL OVERPAYMENT RECOVERY ARRANGEMENT - -
Effective September 1987**

I. Purpose of Arrangement

This Arrangement governs State agencies which adopt the Arrangement. The purpose of this Arrangement shall be to provide methods for the recovery of improper payments of State and Federal unemployment compensation benefits from individuals filing under the Interstate Benefit Payment Plan, the Interstate Arrangement for the Combining of Employment and Wages, or Intrastate under any State's law.

To effectuate this purpose, the unemployment compensation administrative agencies (hereinafter referred to as State agencies) subscribing hereto shall act as agents for each other in a reciprocal Arrangement for recovery of overpayments of benefits.

II. Interstate Benefit Payment Committee -- Powers and Functions

A. To implement this Arrangement, the Interstate Benefit Payment Committee (hereinafter referred to as the Committee) shall:

1. Encourage cooperation between and assist the State agencies subscribing to this Arrangement in the furtherance of its

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purpose.

2. Recommend rules, regulations, instructions, procedural forms, and interpretative decisions relating to this Arrangement to be utilized by the State agencies.

3. Aid in adjusting differences between the State agencies.

4. Do **any and all things necessary**, consistent with purposes of this Arrangement, provided that nothing expressed or implied in this Arrangement shall be construed as affording the Committee authority to exercise the powers of the State agencies or of the Employment and Training Administration.

B. The Employment and Training Administration may provide technical assistance to the Committee in the performance of its duties.

III. State Agencies - Duties and Privileges

A. Each participating State **agency** shall cooperate with each other and with the Committee.

B. **Each participating State agency** shall adopt and put into effect rules, regulations, instructions, procedural forms and interpretative decisions relating to this Arrangement suggested by said Committee except where **found by the State agency** to be clearly inconsistent with the statutory provisions of its unemployment compensation law.

C. Each participating State agency shall, insofar as possible, accede to the jurisdiction of the Committee in adjusting differences between such State agencies.

D. Each participating State agency may call upon the Committee for assistance in any matter relating to the **purpose of the Arrangement**.

E. Nothing in this Arrangement shall be construed as a **prohibition upon the** State agencies adopting such **special arrangements as may** appear desirable.

IV. Arrangement - Commencement and Duration

A State agency may later subscribe to this Arrangement by filing a notice of acceptance with the chairperson of the Committee provided for in this Arrangement.

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Any subscribing State agency may cease to participate in this Arrangement by filing notice of its intention with the chairperson of the committee. In such event, its participation shall cease at the expiration of six (6) months from the date of filing such notice.

For the purpose of this Arrangement the term "State agency" shall include the District of Columbia, Puerto Rico, and the Virgin Islands.

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VI. NOTICE OF ACCEPTANCE OF INTERSTATE RECIPROCAL OVERPAYMENT RECOVERY ARRANGEMENT

The _____ agency administering unemployment compensation to and for _____ hereby gives notice that it accepts the Interstate Reciprocal Overpayment Recovery Arrangement approved by the Interstate Conference of Employment Security Agencies on _____

Signed _____ (Name of State Administrative Agency)

By _____ (Name) _____ (Title) _____ is duly authorized to sign this instrument on behalf of said agency.

Date _____

VII. SUGGESTED REGULATIONS FOR INTERSTATE OVERPAYMENT RECOVERY TO BE ADOPTED BY EACH STATE

(1) The following regulation shall govern the (name of State agency), in its administrative cooperation with other States adopting a similar regulation for the recovery of overpayments.

(2) Definitions. As used in this arrangement unless the context clearly requires otherwise:

(a) "State" includes the District of Columbia, Puerto Rico, and the Virgin Islands.

(b) "Offset" means the withholding of the overpaid amount against benefits which would otherwise be payable for a compensable week of unemployment.

(c) "Overpayment" means an improper payment of benefits, from a State or Federal unemployment compensation fund, that has been determined recoverable under the Requesting State's law.

(d) "Participating State" means a State which has subscribed to the Interstate Reciprocal Overpayment Recovery Arrangement.

(e) "Paying State" means the State under whose law a claim **for unemployment benefits** has been established on the basis of combining wages and employment covered in more than one State.

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(f) "Recovering State" means the State that has received a request for assistance from a Requesting State.

(g) "Requesting State" means the State that has issued a final determination of overpayment and is requesting another State to assist it in recovering the outstanding balance from the overpaid individual.

(h) "Transferring State" means a State in which a Combined Wage claimant had covered employment and wages in the base period of a paying State, and which transfers such employment and wages to the paying State for its use in determining the benefit rights of such claimant under its law.

(i) "Liable State" means any State against which an individual files, through another State, a claim for benefits.

(3) Recovery of State or Federal Benefit Overpayments

(a) Duties of Requesting State. The requesting State shall -

1. Send the recovering State a written request for overpayment recovery assistance which includes:

(A) certification that the overpayment is legally collectable under the requesting State's law;

(B) certification that the determination is final and that any rights to postponement of recoupment have been exhausted or have expired;

(C) a statement as to whether the State is participating in cross-program offset by agreement with the U. S. Secretary of Labor; and,

(D) a copy of the initial overpayment determination and a statement of the outstanding balance.

2. Send notice of this request to the claimant; and,

3. Send to the recovering State a new outstanding overpayment balance whenever the requesting State receives any amount of repayment from a source other than the recovering State (e.g., interception of tax refund, etc.).

(b) Duties of Recovering State. The Recovering State shall:

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(1) Issue an overpayment recovery determination to the **claimant which includes** at a minimum:

offset;

(A) the statutory authority for the

recoupment;

(B) the name of the State requesting

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determination;

(C) the date of the original overpayment

nonfraud);

(D) type of overpayment (fraud or

(E) program type (UI, UCFE, UCX, TRA, etc.)

(F) total amount to be offset;

(G) the **amount** to be offset weekly;

(H) the right to request redetermination and appeal of the determination to recover the overpayment by offset.

(2) Offset benefits payable for each week claimed in the amount determined under State law; and,

(3) Provide the claimant with a notice of the amount offset; and,

(4) Prepare and forward, no less than once a month, a check representing the amount recovered made payable to the requesting State, except as provided in section (c) below.

(5) Retain a record of the overpayment balance in its files no later than the exhaustion of benefits, end of the benefit year, exhaustion or end of an additional or extended benefits period, or other extensions of benefits, whichever is later.

(6) The recovering State shall not redetermine the original overpayment determination.

(c) Combined Wage Claims

(1) Recovery of Outstanding Overpayment in Transferring State. The paying State shall:

(A) Offset any outstanding overpayment in a transferring State(s) prior to honoring a request **from any other** "participating State" under this arrangement.

(B) Credit the deductions against the Statement Of Benefits Paid To Combined Wage Claimants, Form IB-6, or forward a check to the transferring State as described in

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(b)(4).

(2) Withdrawal of Combined Wage Claim After Benefits Have Been Paid. Withdrawal of a combined wage claim after benefits have been paid shall be honored only if the combined wage claimant has repaid any benefits paid or authorizes the new liable State to offset of the overpayment.

(A) The Paying State shall issue an overpayment determination and forward a copy, together with an overpayment recovery request and an authorization to offset, with the initial claim to the liable State.

(B) The Recovering State shall:

(1) Offset the total amount of any overpayment, resulting from the withdrawal of a Combined Wage Claim, prior to the release of any payments to the claimant;

(2) Offset the total amount of any overpayment, resulting from the withdrawal of a Combined Wage **Claim prior** to honoring a request from any other participating State under this arrangement;

(3) Provide the claimant with a notice for the amount offset; and,

(4) Prepare and forward a check representing the amount recovered to the requesting State as described in (b)(4).

(d) Cross-program Offset. The Recovering State shall offset benefits payable under a State unemployment compensation program to recover any benefits overpaid under a Federal unemployment compensation program (as described in the Recovering State's Agreement with the Secretary of Labor) and vice versa, in the same manner as required under subsection 3(b) and (c), as appropriate, when both the Recovering State and Requesting State have entered into an Agreement with the U. S. Secretary of Labor to implement Section 303(a) of the Social Security Act.

6. Interstate Information Exchange Agreement

Section I: Purpose of Agreement and Definitions

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When individuals file claims for unemployment benefits from a State other than the one(s) where their base period wages were earned, immediate access to information about their wages and prior claims in other States can reduce delays and errors in benefit determinations.

In order to provide prompt and accurate claims services to these individuals, State agencies which accept the terms and conditions of the agreement may participate in an electronic exchange of wage and claim information through a telecommunications network designated by the Interstate Benefits Committee of the Interstate Conference of Employment Security Agencies in cooperation with the U.S. Department of Labor.

For purposes of this agreement: "State" includes the District of Columbia, Puerto Rico, and the Virgin Islands; "State Agency" means the agency charged with administration of the State unemployment compensation law; Interstate Conference of Employment Security Agencies is the national organization of State agencies; "Interstate Benefits Committee" is the committee created by the Interstate Benefit Payment Plan effective May 1938.

Section II: Information To Be Released

Each participating State shall make available upon request to all other participating States information contained in its files about the wages and unemployment claims of individuals and shall use the record formats for requests and replies prescribed by the Interstate Benefits Committee. Each participating State agrees to abide by the conditions and procedures for participation set by the Interstate Benefits Committee.

Section III: Confidentiality Of Information

Each participating State agrees that 1) information obtained pursuant to Section II shall be used solely for administration of State and Federal unemployment compensation laws; and 2) access to such information shall be limited to authorized employees of the State agency.

Information obtained pursuant to Section II is not subject to disclosure provisions of the law of the Requesting State.

Section IV: Security Of Information

Each participating State agrees to 1) safeguard information

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obtained pursuant to Section II from unauthorized access or disclosure in the same manner and to the same extent as each State safeguards its own wage and claim information; and 2) to apply the same penalties that apply to unauthorized use of its own wage and claim information to unauthorized use of information obtained pursuant to Section II.

Section V: Agreement

A State agency may participate in this agreement by filing a Notice of Acceptance with the Interstate Conference of Employment Security Agencies.

Any participating State may withdraw from participation by notifying the Interstate Conference of Employment Security

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Agencies of its intention to cease to participate. In such event, its participation shall cease 14 days from the date of such notification.

NOTICE OF ACCEPTANCE
OF
INTERSTATE INFORMATION EXCHANGE AGREEMENT

The State of _____ hereby gives notice that it accepts and will abide by the terms and conditions of the Interstate Information Exchange Agreement approved by the Interstate Conference of Employment Security Agencies Board of Directors effective June 1, 1994.

Signed: _____
Signature

Name: _____
Name of Official Signing for State (Print or Type)

Title: _____

Agency: _____
Name of Agency

Date: _____

This Notice should be filed with the Interstate Conference of Employment Security Agencies, Inc., 444 North Capitol Street, N.W., Washington, D.C. 20001.

APPENDIX C - EXECUTIVE AGREEMENTS

1. Agreement Between The Government Of Canada And The Government Of The United States Of America - Effective 1947, Amended 1983

ARTICLE I

(a) In this Agreement, unless the context otherwise requires:

(i) "Agency" means any officer, board, commission or other authority designated by an unemployment insurance law in force in any State or in Canada to administer the Unemployment Insurance Fund for which provision is made by such unemployment insurance law;

(ii) "State" means any State of the United States of America, the District of Columbia, Puerto Rico and the Virgin Islands.

(iii) "Federal agency" means the agency authorized to administer those provisions of the laws of the United States of America which relate to the Federal-State unemployment insurance program;

(iv) "Jurisdiction" means any State or Canada.

(b) Services performed by an individual for an employer shall be deemed to be localized within a jurisdiction if-

(i) such services are performed entirely within such jurisdiction, or

(ii) such services are performed both within and without such jurisdiction, but the services performed without such jurisdiction are incidental to the individual's services performed within such jurisdiction, for example -- are temporary or transitory in nature or consist of isolated transactions.

ARTICLE II

This Agreement shall not be applicable to employment with respect to which contributions are payable under the Railroad Unemployment Insurance Act of the United States of America or to periods of unemployment with respect to which benefits are payable under the Act.

ARTICLE III

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The Government of the United States of America agrees that the Federal agency will recommend to each of the States that it carry out the provisions herein contained and Canada agrees to carry

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out such provisions: Provided that, if any State does not substantially carry out any such provisions, the Unemployment Insurance Commission of Canada may suspend the operation of such provision with reference to such State.

ARTICLE IV

(a) An individual's entire services for an employer in insurable employment, as defined in the unemployment law of a jurisdiction, will be insured under the unemployment insurance law of such jurisdiction in respect to services performed by him within, or both within and without such jurisdiction if-

(1) his services are localized in such jurisdiction, or

(2) his services are not localized in any jurisdiction but some of his services are performed in such jurisdiction, and

(i) his base of operations, or, if he has no base of operations, the place from which his services are directed or controlled, is in such jurisdiction, or

(ii) his base of operations, or the place from which his services are directed or controlled, is not in any jurisdiction in which some of his services are performed but his residence is in such jurisdiction.

(b) If clauses 1 and 2 of paragraph (a) of this article do not apply with respect to an individual's services, the agency of any jurisdiction may approve, subject to such conditions as it may prescribe or as may be prescribed by its unemployment insurance law, an election by such individual's employer pursuant to which such individual's entire services for that employer shall be deemed to be insured employment under the unemployment insurance law of such jurisdiction.

ARTICLE V

The agency of any jurisdiction may perform services for the agency of any other jurisdiction in the taking and development of any claim for benefits by an individual absent from such latter jurisdiction and desirous of claiming benefits under the unemployment insurance law of such jurisdiction.

ARTICLE VI

To avoid duplication of unemployment insurance payments with

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respect to the same period of unemployment, the order in which an individual who has benefit rights under the unemployment insurance laws of two or more jurisdictions shall exhaust or

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otherwise terminate his rights to benefits shall be determined jointly by the federal agency of the United States of America and the Unemployment Insurance Commission of Canada in such manner as to be reasonable and just as between all affected interests.

ARTICLE VII

This agreement may be amended by mutual agreement evidenced by an exchange of notes between the two governments and may be terminated by either government after 60 days notice to the other government.

ACCEPTANCE

The Executive Agreement - Series 244, permits Canada to participate in the Interstate Benefit Payment Plan only on a reciprocal basis. Since the States cannot enter into agreements with a foreign government under the provisions of the United States Constitution, it is necessary for any State which wishes to include Canada in its interstate claims operation to notify the headquarters office of the Bureau of Employment Security (currently the Employment and Training Administration) through its regional office. The Bureau will in turn notify the Canadian Unemployment Insurance Commission and advise the State.

2. Agreement of Protocol Covering Dependents of Diplomatic, Military and Other Government Personnel Between The Government Of Canada And The Government Of The United States Of America - Effective June 12, 1980

Dependents of employees of the Government of Canada assigned to official duty in the United States of America and of employees of the Government of the United States of America assigned to official duty in Canada are authorized to accept employment in the receiving State without restriction as to type of employment.

For the purposes of this arrangement, "dependents" shall include:

- i) Spouses
- ii) unmarried dependent children under 21 years of age
- iii) unmarried dependent children under 25 years of age who are in full-time attendance as students at a post-secondary educational institution, and
- iv) unmarried children who are physically or mentally disabled.

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In case of dependents of employees of the Government of Canada assigned to official duty in the United States of America and who hold an offer of employment in the United States, an official

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request will be made by the Embassy of Canada in Washington to the Office of the Chief of Protocol in the Department of State. Upon verification that the person is a dependent of an official employee, the Embassy of Canada will be informed by the Office of the Chief of Protocol that the dependent has permission to accept employment.

In the case of dependents of career and support staff members of United States diplomatic and consular missions in Canada who seek employment in Canada, the request shall be made by the United States Embassy in Ottawa to the Department of External Affairs, which, after verification, shall indicate approval in principle and the means by which such dependents may be provided with the necessary Employment Authorizations.

In the case of dependents of other employees of the Government of the United States of America assigned to official duty in Canada, the dependent will seek an Employment Authorization from the nearest Canada Immigration Centre. An Employment Authorization may be issued upon presentation of the offer of employment and upon verification of the official assignment in Canada of the employee of the Government of the United States of America and proof of the relationship between the dependent and the employee.

As to dependents who obtain employment under this agreement and who have immunity from the jurisdiction of the receiving country in accordance with Article 37 of the Vienna Convention on Diplomatic Relations, or any other applicable international agreement, immunity from civil and administrative jurisdiction with respect to all matters arising out of such employment is hereby waived by the sending State concerned. Such dependents are also responsible for payment of income tax and social security contributions on any remuneration received as a result of employment in the receiving State.

Note: This arrangement became effective June 12, 1980 and remains in effect until terminated by either Government on ninety days written notice to the other.

3. Understanding Between The Unemployment Insurance Service (UIS) and The Interstate Benefit (IB) Committee - May 1992

The Employment and Training Administration, UIS, as a partner in the Federal-State employment security programs, has a continuing interest in the effective administration and operation of the interstate benefit (IB) program. Consistent with Federal

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requirements, the UIS carries out the U.S. Department of Labor's oversight responsibility for the IB program.

The UIS is supportive of the States in maintaining the IB Payment

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Plan and the IB Committee in its activities with respect to the IB Payment Plan. The UIS will meet annually with the IB Committee to discuss priorities and other items of interest for the current and budget year.

In addition to carrying out it's Federal oversight role, the UIS will provide policy guidance and technical assistance for the IB Program and Interstate Telecommunications Network (INTERNET) (subsequently renamed Interstate Connections (ICON)) through:

1. Attendance and participation in IB Committee meetings and Regional or National meetings regarding the IB program operations.

2. Maintenance and issuance of all IB Directives, Handbooks, Manuals, Technical Assistance and Review Guides and training materials developed by and in cooperation with the IB Committee.

3. Development and testing of new methods of interstate operation, in accordance with mutually agreed upon goals, and keeping the IB Committee advised of all findings and results. Informing the IB Committee of and discussing with it any suggestions to revise IB procedures or IB automated procedures/applications of which the UIS becomes aware.

4. Promoting States' adherence to all prescribed interstate procedures. Keeping the IB Committee informed of IB problems or potential IB difficulties of which UIS becomes aware.

5. Providing guidance with regard to questions concerning established or new policies and/or discussing undecided policies with the IB Committee.

6. Keeping the Committee informed of Federal policy decisions that affect the operation of the IB program.

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