UI BENEFITS

DATA VALIDATION HANDBOOK

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INTRODUCTION

A. OBJECTIVES

States report to the U.S. Department of Labor (DOL) on a monthly and quarterly basis under the Unemployment Insurance Required Reports (UIRR) system. The comprehensive data validation program described in this handbook is necessary to ensure the accuracy of the UIRR data. UIRR data are used for economic statistics, to allocate UI administrative funding based on state workload, to measure state claimant eligibility criteria and performance in providing benefits, and to account for fund utilization. Because performance and workload data are used in state comparisons, it is essential that states report accurately and uniformly.

Two principles underlie a comprehensive approach to benefits data validation:

- If data are collected, they should be valid and usable.
- Given the high degree of automation of UI systems, it is feasible and cost-effective to validate most report cells.

States themselves perform the validation and report the results to the Employment Training Administration (ETA). This handbook provides detailed validation instructions for each state, ensuring that state and federal staff understand all relevant aspects of the state's benefits system. Accompanying the handbook is a software application that processes state extract files to validate required state UI reports.

Table A (next page) shows the general types of transaction data to be validated, the federal ETA reports on which the data appear, and uses of the data.

TABLE A

GENERAL TYPES OF DATA TO BE VALIDATED

Data Type	ETA Report(s)	Economic Statistics	Funding Allocation/ Workload	Performance	Claimant Eligibility	Monitor Trust Fund Activity
Weeks Claimed	5159	X	X			
Final Payments	5159 218	X				
Claims and Claims Status[1]	5159 218 586	X	X		X	X
Payments	5159 586 9050 9051			X		X
Nonmonetary Determinations/ Redeterminations	207 9052 9053		X	X	X	
Appeals	5130 9054 9055		X	X	X	
Overpayments	227			X		X
Tax	581	X	X	X		

[1]The ETA 539, Weekly Claims Activity Report, is not included for validation. However, states are strongly encouraged to compare the total claims reported on the 539 to the 5159 report for the same period to determine if the counts reported are the same or within ±2%. If the counts vary significantly, then the state should investigate and advise its federal regional office of its findings and what it is doing to reconcile the differences.

B. DATA ERRORS IDENTIFIED THROUGH VALIDATION

Systematic errors and random errors are the two major types of data error in federal UIRR reports. Systematic errors involve faulty design or execution of reporting programs. Random errors involve judgment and input errors. Their major causes include reporting systems errors and human error. Reporting systems errors are always systematic, while errors stemming from human judgment can be either systematic or random.

Both systematic and random errors must be addressed in the validation design.

- **Systematic errors** are addressed through validation of the reporting programs that states use to create federal reports. Systematic errors tend to be constant and fall into one of three categories: *1) too many transactions (overcounts), 2) too few transactions (undercounts), or 3) transactions which are misclassified.* Systematic human errors occur when staff are using incorrect definitions or procedures. For example, a reporting unit may establish its own definition for a data element that conflicts with the federal definition (this can happen deliberately or inadvertently). Systematic errors are the most serious because they occur repeatedly. They are also the easiest to detect and correct. Systematic errors do not need to be assessed very frequently, and each system error only needs to be corrected once. A one-time adjustment in a retrieval code or calculation specification or staff retraining on a corrected definition or procedure will usually correct systematic errors.

- **Random errors** are addressed through validation by evaluating the accuracy of data elements stored in the database for a random sample of transactions. Random errors tend to be variable, and are always caused by human judgment. They fall into one of three categories: *1) input errors, 2) judgment errors (as in nonmonetary determinations, status determinations, and appeals), or 3) improper state definitions or procedures.*

Consistent and accurate reporting requires both good systems and good data--if either element does not pass validation, then the validation objective has not been achieved.

C. DATA SOURCES FOR FEDERAL REPORTING AND VALIDATION

Although states use different methods to prepare federal reports, the validation approach is the same in all cases: states support their reported figures by reconstructing the reported transactions. They do so regardless of whether the federal reports are produced directly from the benefits database, from a database extract or statistical file, or from a combination of these sources.

The validation methodology is flexible in accommodating the different systems that states use. However, validation is most effective when validation data are produced directly from the benefits database. For cost reasons and for minimizing changes in data over time, some states prefer to use daily, weekly, or monthly statistical extract files instead.

D. BASIC VALIDATION APPROACH

The comprehensive validation methodology outlined in this handbook is necessary to ensure the accuracy of UIRR data. It meets the objective described earlier by validating most items on the UI required reports through processes that minimize validator time and ongoing state burden. The data validation methodology is highly automated and complements existing quality components (such as nonmonetary quality review). States themselves perform the validation and report the results to ETA. Data validation software provided by ETA processes state data extract files and generates all required validation worksheets and reports. This handbook provides detailed validation instructions for each state, ensuring that state staff understand all relevant aspects of the state's system and the data validation software.

This validation methodology reconstructs the count of transactions reported during a specific period for each federal report item to be validated. In specifying how to reconstruct reported transactions, the methodology provides a blueprint of the criteria that states should use in their federal reporting. This handbook therefore has two uses:

1. To provide technical assistance with federal reporting requirements

2. To guide states through the validation process

The reconstruction provides an audit trail to support the counts and classifications of these reported transactions. Validation of counts (referred to as report validation) is best accomplished when all the transactions reported in a federal report item have been reconstructed. For example, if a state reports 5,000 first payments during a month, then the state must produce a file containing the 5,000 first payments, including relevant characteristics of the transaction such as the Social Security Number (SSN), the program type code, and the mail date. The validation software then sorts the payments into groups that are used to reconstruct the counts in the appropriate items of the ETA 5159 and 9050 reports. Report validation is discussed in detail in Module 1.

After the entire count has been reconstructed, the software produces validation worksheets containing samples of the transactions. Sampled transactions are subjected to a series of "logic rules" that validate them using their most definitive source documentation (such as database screens) to test programming accuracy. This validation of the characteristics of reported transactions is known as data element validation. Data element validation is addressed in detail in Module 2.

E. RECONSTRUCTING FEDERAL REPORT ITEMS

Given that there are 13 ETA reports to validate, with a total of 1,275 report items, this reconstruction could be a laborious process in terms of both design and implementation. Therefore, this handbook and the accompanying software streamline the validation process for state staff. A single UI benefits transaction (for example, a payment, a nonmonetary determination, or an appeal) can be reported in numerous federal report items. As an example, a first payment for a week of total unemployment, for an interstate claim with both UI and Unemployment Compensation for Federal Employees (UCFE) wages, is reported in eight items of the ETA 5159 report as well as in one item of the ETA 9050 report.

A general principle of the validation design is to analyze transactions only once, even if they appear in multiple items. This procedure is accomplished by classifying the transactions into mutually exclusive groups, which match to one or more items on the federal reports. Specifically, fifteen types of benefits transactions and five types of tax transactions and statuses (referred to as populations), which are composed of 395 mutually exclusive groups (subpopulations), are validated. Each subpopulation represents a unique set of data elements or characteristics.

ETA has developed two software applications which perform the validation processing for benefits and tax. The software applications process state extract files for each of the fifteen benefits and five tax populations.

The first column of Table B (see next page) lists each transaction population, which is the type of reportable UI activity being validated. The second column identifies the ETA reports on which the transaction populations are reported.

The Reconstruction Period (third column) describes the time parameters that the programmer uses to select the transactions to be extracted. When the reports are monthly, the reconstruction can be for a single month, to match the reported counts. When the reports are quarterly, or both monthly and quarterly reports are produced for the same type of transaction (for example, claims are reported on both the ETA 5159, a monthly report, and the ETA 218, a quarterly report), *the reconstruction is for a quarter*. For the validation of the ETA 581 report, all populations are reconstructed for a quarter.

The Number of Report Items (fourth column) indicates the total number of items on each ETA report that is validated by each transaction population. The Number of Subpopulations (fifth column) refers to the number of subgroups into which the population is divided for validation purposes.

TABLE B

ETA REPORTS, BY TRANSACTION POPULATION

Transaction Population		ETA Report	Reconstruction Period	Number of Report Items	Number of Subpopulations
Benefits Populations					
1	Weeks Claimed	5159	Month	9 1	10
2	Final Payments	5159 218	Quarter (Month for UCFE and UCX)	3 1 14	5
3/3a	Claims and Claims Status, and Monetary Determinations	5159 218 586	Quarter (Month for UCFE, UCX, Filed from Agent State, Taken as Agent State, and Additional Claims)	19 2 20 4	54
4	Payments	5159 9050 9051	Month	14 2 204 204	53
		586	Quarter	32	
5	Nonmonetary Determinations and Redeterminations	207 9052 9053	Quarter	36 228 228	70
6	Appeals Filed, Lower Authority	5130	Month	2	2
7	Appeals Filed, Higher Authority	5130	Month	2	2
8	Appeals Decisions, Lower Authority	5130 9054	Month	17 24	55
9	Appeals Decisions, Higher Authority	5130 9054	Month	10 45	23
10	Appeals Case Aging, Lower Authority	9055	Month	8	7
11	Appeals Case Aging, Higher Authority	9055	Month	7	6
12	Overpayments Established	227	Quarter	39	16
13	Overpayment Reconciliation Activities	227	Quarter	38	34
14	Age of Overpayments	227	Quarter	16	16

TABLE B *(continued)*

Transaction Population	ETA Report	Reconstruction Period	Number of Report Items	Number of Subpopulations
Tax Populations				
1 Active Employers	581	Quarter	3	2
2 Report Filing	581	Quarter	6	16
3 Status Determinations	581	Quarter	7	8
4 Accounts Receivable	581	Quarter	22	16
5 Field Audits	581	Quarter	11	4
Wage Items	581	Quarter	1	NA
TOTAL			**1,275**	**395**

Notes: When populations relate to both monthly and quarterly reports (benefits populations 2, 3, 4), it is preferable to reconstruct all the counts for a quarter. It is easier and more accurate to add three monthly counts to create a quarterly total for monthly reports, than to rerun the quarterly reports to obtain a month of data.

The software is not designed to validate nor is it a federal requirement to validate extended benefits and disaster unemployment.

F. VALIDATION TECHNIQUES AND SOURCES

Validating the counts of specific types of transactions, rather than validating report items, eliminates duplication of effort when the identical transaction is reported in more than one report item. In addition, the ETA validation software processes validation files and generates all validation worksheets and reports. The state validation burden has been minimized in other ways as well. For certain transaction types and for data obtained directly from the database (as opposed to a statistical file), states are able to reduce the need to retrieve and review source documentation (benefits history screens) to validate random samples of transactions.

Table C (see next page) summarizes the data element validation techniques used for each population of transactions to be validated. The Review Worksheets Only column indicates transaction types for which the most automated level of validation is feasible. The Review History Screens column indicates when the validator will refer to computer-generated history screens to make an assessment of error. The Review Source Documentation column indicates when the validator will refer to source documentation, such as adjudication notes, adjudication notices, appeals decisions, or overpayment records. This documentation may come from paper files, microfilm or computer records, or images. It is important for identifying human errors involving interpretational and input errors.

TABLE C

VALIDATION TECHNIQUES, BY TRANSACTION POPULATION

Transaction Population	Review History Screens	Review Source Documentation
Benefits Populations		
1 Weeks Claimed	X	
2 Final Payments	X	
3/3a Claims, Claims Status, and Monetary Determinations	X[2]	
4 Payments	X	
5 Nonmonetary Determinations and Redeterminations	X	X[2]
6 Appeals Filed, Lower Authority	X	
7 Appeals Filed, Higher Authority	X	
8 Appeals Decisions, Lower Authority	X	X
9 Appeals Decisions, Higher Authority	X	X
10 Appeals Case Aging, Lower Authority	X	
11 Appeals Case Aging, Higher Authority	X	
12 Overpayments Established	X	X
13 Overpayment Reconciliation Transactions	X	X
14 Age of Overpayments	X	
Tax Populations[3]		
1 Active Employers	X	
2 Report Filing	X	
3 Status Determinations	X	
4 Accounts Receivable	X	
5 Field Audits	X	

[2]Examination of nonmonetary determination folders is accomplished through the quality review process.

[3]For tax validation, only two transactions per subpopulation are compared to history screens.

G. HANDBOOK OVERVIEW

To achieve the data validation goal of ensuring that reported data are accurate and meet federal reporting definitions, four separate validation processes or "modules" have been developed. These modules include various tools to be used in validating the quantity and quality of federally reported data. The modules and accompanying appendices are outlined below.

- **Module 1--Report Validation**

Module 1 validates that the reporting programs that create the federal reports are functioning correctly. The validation software systematically processes files of the transactions included in the federal report items and compares the count in each federal report item with the count of the corresponding subpopulations. The validator examines transactions that were flagged by the software as possibly invalid and determines if it is necessary to regenerate or reload the validation files. Such transactions include those with invalid or missing dates as well as duplicate transactions.

- **Module 2--Data Element Validation**

Module 2 validates that the data elements used in report validation are correct. The validator examines samples of individual transactions to determine the accuracy of both the state reporting programs and the data elements used to classify the transactions. The software produces an automated worksheet containing the relevant data elements for each selected transaction. The validator reviews the sampled transactions using state-specific data values and instructions in Module 3 to ensure that the data elements are accurate and that the transaction has been assigned to the appropriate subpopulation.

The Module 3 instructions refer the validator to the appropriate supporting documentation (benefits history screens and paper files, if necessary) required to ensure that the individual data elements are valid. The validator enters the results of the validation directly into the worksheet using the validation software. After the validator completes the worksheets, the software generates summary and analytical reports showing the results of the validation (Appendix E).

- **Module 3--State-Specific Data Element Validation Instructions**

This module is the actual state-specific set of instructions that the validator uses in data element validation. Module 3 directs the validator to the appropriate database screen where the data to be validated are found. Also included are rules that must be applied to each element to determine the accuracy of the data. In addition, state definitions or procedures which impact validation are documented in the state's Module 3 to aid state and federal staff in interpreting the validation results and in improving procedures.

- **Module 4--Quality Sample Validation**

Module 4 ensures that the samples selected for nonmonetary determinations and lower authority appeals quality have been randomly selected from the correctly defined universe. It is important to review and check the quality sampling methodology used by the state. The quality reviews are a key indicator of the state's performance, and the results must be statistically valid.

Appendices Listed below are the appendices where additional information supporting each validation task and/or validation output document is found.

- **Appendix A--Report Validation Specifications**

Appendix A, directed to state ADP staff, contains a table of options of appropriate validation processes, given different state data sources for federal reporting and validation. Specifications for the printouts to be generated for the quantity validation in Module 1 are also included, as are the sampling methodologies used to select specific transactions for the data element validation described in Module 2.

Appendix A components: Report Validation File Specifications and Relationship Between Subpopulations and Federal Report Items (p. A.2-A.77)

Sampling Strategy (pp. A.78-A.84)

- **Appendix--Technical Guidance**

Appendix B contains detailed guidance on reporting combined wage claims and the Liable Agent Data Transfer (LADT) System.

- **Appendix C--Report Validation Summaries**

- **Appendix D--Data Element Validation Worksheets**

- **Appendix E--Summary and Analytical Reports**

- **Appendix F--Independent Count**

Appendix F provides a mechanism for the validator to determine whether transactions have been systematically excluded from any of the federal reports. This mechanism is applicable to states that create federal reports from the same extract files used to generate the reconstruction files. It is not required for states that use separate processes to generate federal reports and to reconstruct the reported transactions.

- **Appendix G--Duplication Detection Criteria**

H. WALK THROUGH OF DATA VALIDATION METHODOLOGY

(Figure A, p. I-16)

This section provides ADP and validation staff with a step by step walk through of the data validation process. Each step of the walk through includes a reference to the specific module in which that aspect of the data validation process is described. Readers should review the referenced modules for further information.

① The benefits database is the state claims file. State **ADP staff** may generate required federal reports from the benefits database or from a statistical file of counts or detail records. The report item in the upper-left-hand corner of Figure A represents the reported count of UI intrastate first payments reported on the ETA 9050.

② In the second step of the validation process, **ADP staff** extract detailed records for the transactions reported in the report item to "reconstruct" and provide an audit trail for the reported count. The extract is then loaded into the validation software. (See Module 1.)

③ In the third step, the **software** compiles the detailed records in a report validation file showing all the specified characteristics of the reported payments. (See Module 1.)

④ In the fourth step, the **software** generates an error report listing all the first payments transactions that cannot be assigned to the UI intrastate first payments subpopulation or to any other first payments subpopulation. The **software** then compares the reconstructed count with the reported count. In this example, the report validation file shows the six UI intrastate first payments reported on the ETA 9050 report in the upper-left-hand corner. The results are then automatically transferred to the report validation summary. (See Module 1.)

⑤ In the fifth step, the **software** selects a sample of transactions and prints them on a worksheet. The sample worksheet shows that two of the six payments have been selected for further validation. (See Module 2.)

⑥ In the sixth step, after matching the SSN of the transaction on the worksheet with the source document (using Step 1C in Module 3), the **validator** turns to Step 10 in Module 3 (as indicated in the column heading of the worksheet) in order to validate that the payment met the federal definition of a first payment. The document (benefits history screen or case folder) and the rule (the validation instruction) are customized for each state to facilitate the validation process for state and regional personnel. The federal definition and the function or purpose of each validation instruction are the same for all states. (See Module 2.)

⑦ In the seventh step, the **validator** calls up or prints out the "Claims Inquiry" screen from the benefits database. (See Module 2.)

⑧ The **validator** executes the instructions in the handbook to: (1) check that the week reported as the first compensable week was not a waiting week (STS is not W); and (2) to check that the week was the first week in the benefit year after the waiting week without excessive earnings (earnings for the week ending 2/10 are $0 and thus not excessive, and there are no earlier weeks other than the waiting week present on the payments history file). The validator then places a check on the worksheet to show that the transaction was a valid first payment. (See Modules 2 and 3.)

FIGURE A: OVERVIEW OF DATA VALIDATION METHODOLOGY

Sample Portion of UIRR ETA 9050

	Intrastate	
	UI	UCFE
First Payments, ETA 9050	6	2

1

Benefits Database

7

Sample Screen (from State Database)

Claims Inquiry

SSN		Program	Agent State	WBA
123		UI	Same	$120

Payments History

Payment Date	Wk. End	Amount	STS	Earnings
	2/3	$0	W	$0
2/12	2/10	$120	A	$0
2/19	2/17	$120	A	$0

Minnesota

2

4

3

8

Detail Record Extract

Report Validation File Printout - Payments/Weeks Compensated - Subpopulation 4.1

Obs	1 (Step 1C) SSN	6 (Step 10A) (Step 10B) (Step 10C) (Step 10F) (Step 10G) Pay Type	4 (Step 4) Prog	5 (Step 5) Intra Inter	10 (Step 12A) UI Amt	16 (Step 14) Chk Date	15 (Step 13) Week	17 (Step 15) Time Lapse
1	123	First	UI	Intra	$120	2/12	2/10	2
2	234	First	UI	Intra	$150	2/16	2/10	6
3	587	First	UI	Intra	$200	2/10	2/3	7
4	890	First	UI	Intra	$212	2/12	2/3	9
5	235	First	UI	Intra	$112	2/24	2/10	14
6	687	First	UI	Intra	$180	2/28	2/10	18
Total	6				$974			

5

6

Data Element Validation Worksheet - Payments/Weeks Compensated - Subpopulation 4.1

Obs	1 (Step 1C) SSN	6 (Step 10A) (Step 10B) (Step 10C) (Step 10F) (Step 10G) Pay Type	4 (Step 4) Prog	5 (Step 5) Intra Inter	10 (Step 12A) UI Amt	16 (Step 14) Chk Date	15 (Step 13) Week	17 (Step 15) Time Lapse
1	123	✓ First	✓ UI	Intra	$120	2/12	2/10	2
6	687	First	UI	Intra	$180	2/28	2/10	18
Errors								

Sample Validation Step (Module 3)

STEP 10 TYPES OF COMPENSATION ***A. FIRST PAYMENT***

INSTRUCTIONS

Rules on this page apply to Population 4

Check (✓) the box on the worksheet for the selected case if all of the following conditions are met. Otherwise record a zero (0) in the box:

1. Minnesota does not maintain this indicator.

   Function: This rule validates that there is a first payment indicator for the payment being validated.

2. **Document:** PCHS CLAIM HISTORY

   Rule: The AUTH code for the selected DATE is not WWS.

   Function: This rule validates that the week paid is the first compensable week by ensuring that it was not a waiting week.

3. **Document:** PPHS PAYMENT HISTORY

   Rule: The selected W/E DATE is for the first claimed week in the benefit year after the waiting week during which there were not excessive earnings. (The DEDUCTIONS EARN amount is less than 100 percent of the WBA.)

   Function: This rule validates that the week paid is the first claimed week in the benefit year after the waiting period--if applicable--where the claimant did not have excessive earnings.

FOR CWC FIRST PAYMENTS:

4. **Document:** PCHS CLAIM HISTORY

   Rule: The selected DATE is the first payment date after the monetary determination date that combined wages from two States.

   Function: This rule validates that the payment was the first payment issued to the claimant after wages were combined.

MODULE 1--REPORT VALIDATION

This procedure validates the accuracy of the counts reported in each item on UIRR benefits reports. Fifteen sets of files are produced, which reconstruct the counts for the 15 types of UI transaction populations that the state is validating. The report validation files enable the validator to determine the accuracy of the UIRR report item counts. The 15 report validation population files are listed in Table 1.1 on the next page.

State ADP staff are responsible for producing the reconstruction files according to the tasks addressed on pages 1-3 to 1-6 of this module.

TABLE 1.1

SUMMARY OF REPORT VALIDATION POPULATION FILES

File Specification	Population Description
1	Weeks Claimed
2	Final Payments
3	Claims and Claim Status (and Original Monetary Determinations)
3a	Additional Claims
4	Payments/Weeks Compensated
5	Nonmonetary Determinations and Redeterminations
6	Appeals Filed, Lower Authority
7	Appeals Filed, Higher Authority
8	Appeals Decisions, Lower Authority
9	Appeals Decisions, Higher Authority
10	Pending Appeals, Lower Authority
11	Pending Appeals, Higher Authority
12	Overpayments Established - Sorted by Causes
13	Overpayment Reconciliation Transactions
14	Aged Overpayments

A. PROCEDURES

Task 1: ADP Staff Produce Fifteen Report Validation Extract Files

State ADP staff produce 15 report validation extract files based on the record layout specifications in the validation software user's guide. There is one extract file for each of the 15 populations of UI benefit transactions and statuses (such as payments, claims, aged overpayments, etc.). There are 15 and not 14 populations because Population 3 (claims) is divided into two separate files. See Figure 1.1 for an example of a record layout.

The extract file should be an ASCII file with comma delimited columns. Data must be in the order listed in the record layouts. The Data Type/Format column on the layouts indicates the generic values for text fields. The generic values must be followed by a dash and the state-specific value. See Figure 1.2 for an example of a sample extract file.

The extract files are imported into the data validation software, which processes each extract file and builds the subpopulations as specified in Appendix A. The subpopulations are based on the unique types of transactions that can occur and that can be reported on the federal reports. For example, population 4, payments and weeks compensated, includes all payments made during the month. The software assigns the transactions to numerous subpopulations defined by unique combinations of payments and weeks compensated, including characteristics such as first payments, continued payments, partial payments, and program type. See Figure 1.3 for a sample of a validation file imported into the software.

It is essential that the programs generating the validation files be run at the same time as the federal reporting programs to eliminate differences in data caused by changes in the database over time.

Because the UIRR reports provide a "snapshot" of transactions during a specific time period, the validation is intended to verify the status of transactions at the time the report was run, even if it later changed. It is less efficient to compare a set of transactions captured at one point in time with a set of transactions captured at another point in time, because many discrepancies will represent legitimate changes in a dynamic database, rather than systems errors or faulty data. For example, claims can legitimately change from interstate to intrastate, and program type can change from federal to UI if UI wages are added to a claim.

Task 2: Install Software and Import Extract Files

See the User Guide provided with the software for detailed instructions on installing the software and loading the extract files.

Task 3: Examine Error Reports and Reload Extracts If Necessary

When the extract files are loaded, the software reads each record to ensure that all fields are valid. Any records with invalid data, missing mandatory data, or records which appear to be duplicates are rejected and an error report is produced. For example, the front-end error checking program produces an error report when data fields are not in the format specified in the record layout (such as dates in the wrong format or text fields not preceded by one of the specified valid prefix values such as UI, UCFE, or UCX). The record layouts in the software users guide specify the data formats which must be met for the records to be successfully loaded. The population tables in Appendix A specify the valid values which must be present for transactions to be assigned to subpopulations.

For certain populations, the software also uses the duplicate detection criteria in Appendix G to reject records which match the criteria for duplicates. These criteria include appeals with duplicate docket numbers and payments for the same benefit week.

After reviewing any error reports that are generated, state ADP staff should determine if the extracts are correct or whether they need to be regenerated or reformatted and reloaded into the software.

See Figure 1.4 for a sample error report.

Task 4: Schedule Batch Program to Produce Benefit History Screens for Sampled Cases

States should, immediately after the software generates the worksheets, use a batch program to print all applicable benefits history screens for each sampled case, in the same order that the cases are sampled and listed on validation worksheets. This concurrency ensures that the snapshot itself is being validated.

To the extent that states have a complete audit trail, timing problems should not affect the reconstruction of transactions. For example, states should maintain records of appeals decisions, payments, or nonmonetary determination notices even if the transaction was later canceled or adjusted. The validator then uses these audit trails to verify that a transaction was correct at the time of reporting.

Task 5: Enter the UIRR Data

To calculate the report validation error rate, the software must have the reported values to compare to the validation values. Therefore, the ADP staff or the validator must enter the item totals from the applicable UIRR into the reported counts and dollars input form in the software.

Task 6: Report Validation Summary Report

After the reported counts have been entered into the reported count input form, the software calculates the difference between the validation and reported counts and calculates an error rate. The software then produces a report validation summary report that is submitted to the UIS national office. The software user's guide provides more information about producing the report in the format required by DOL. See UIPL 10-03 for a timeline for submitting spreadsheets and reports to the UIS national office.

Task 7: Independent Count (See Appendix F)

Appendix F is only applicable to states that generate the federal reports from a detailed record file, whether accumulated daily, weekly, monthly or as a snapshot. This extract file cannot be used for validation and states must conduct an independent count. It is not required for states that produce the files directly from the benefits database.

B. EXAMPLES

The following figures are examples of:

1. Population 8 Record Layout (Figure 1.1)
2. Population 8 Sample Extract File (Figure 1.2)
3. Population 8 Validation File After Processed Through Software (Figure 1.3)
4. Population 3 Sample Error Report (Figure 1.4)

FIGURE 1.1

Population 8 Record Layout

Extract file type is - ASCII, comma delimited columns. Data must be in the order listed below. The Module 3 reference indicates the step where the state-specific values are documented. The Data Type/Format indicates the generic values for text fields. These must be followed by a dash and the state-specific value. All fields are mandatory unless listed as optional.

No.	*Field Name*	*Module 3 Reference*	*Field Description*	*Data Type/Format*
1	OBS		Sequential Number	Number – 00000000
2	SSN	Step 1E		Number - 000000000
3	Docket # Unique ID	Step 1E	The Docket Number or other unique ID assigned to the appeal.	Number – 0000000000
4	Type of UI Program	Step 2	Regular UI claim.	Text – Regular UI
5	Program Type	UI: Step 4A UCFE: Step 4B UCX: Step 4C	UI, UCFE, or UCX.	Text – UI; UCFE; UCX
6	Intrastate/Interstate	Intrastate: Step 5A Interstate Received as Liable State: Step 5B Interstate Taken as Agent State: Step 5C Interstate Filed From Agent State: Step 5D	Intrastate, or interstate.	Text – Intrastate; Interstate
7	Lower Authority Appeal	Step 24A	The appeal type is a lower authority appeal.	Text – Lower

FIGURE 1.2

POPULATION 8 SAMPLE EXTRACT FILE

```
1,1,1,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,Y,03/27/02,04/17/02,Y,VL,8.1
2,2,2,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,Y,05/03/01,04/04/02,Y,VL,8.2
3,3,3,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,N,03/15/02,04/02/02,Y,VL,8.3
4,4,4,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,N,05/02/01,04/09/02,Y,VL,8.4
5,5,5,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,Y,05/02/01,04/09/02,Y,VL,8.5
6,6,6,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,Y,05/02/01,04/09/02,Y,VL,8.6
7,7,7,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,N,05/02/01,04/09/02,Y,VL,8.7
8,8,8,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,N,05/02/01,04/09/02,Y,VL,8.8
9,9,9,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,Y,03/22/02,04/12/02,Y,MC,8.9
10,10,10,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,Y,05/08/01,04/17/02,Y,MC,8.10
11,11,11,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,N,03/15/02,04/01/02,Y,MC,8.11
12,12,12,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,N,01/01/01,04/12/02,Y,MC,8.12
13,13,13,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,Y,01/01/01,04/12/02,Y,MC,8.13
14,14,14,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,Y,01/01/01,04/12/02,Y,MC,8.14
15,15,15,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,N,01/01/01,04/12/02,Y,MC,8.15
16,16,16,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,N,01/01/01,04/12/02,Y,MC,8.16
17,17,17,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,Y,01/01/01,04/12/02,Y,Suitable Work,8.17
18,18,18,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,Y,01/01/01,04/12/02,Y,Suitable Work,8.18
19,19,19,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,N,01/01/01,04/12/02,Y,Suitable Work,8.19
20,20,20,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,N,01/01/01,04/12/02,Y,Suitable Work,8.20
21,21,21,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,Y,01/01/01,04/12/02,Y,Suitable Work,8.21
22,22,22,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,Y,01/01/01,04/12/02,Y,Suitable Work,8.22
23,23,23,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,N,01/01/01,04/12/02,Y,Suitable Work,8.23
24,24,24,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,N,01/01/01,04/12/02,Y,Suitable Work,8.24
25,25,25,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,Y,11/20/01,04/22/02,Y,A & A,8.25
26,26,26,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,Y,11/20/01,04/22/02,Y,A & A,8.26
27,27,27,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Claimant-C,N,11/20/01,04/22/02,Y,A & A,8.27
28,28,28,Regular UI-REG,UI,Intrastate-AB,Lower-AT,S,,Employer-E,N,11/20/01,04/22/02,Y,A & A,8.28
29,29,29,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Claimant-C,Y,11/20/01,04/22/02,Y,A & A,8.29
30,30,30,Regular UI-REG,UI,Interstate-AB,Lower-AT,S,,Employer-E,Y,11/20/01,04/22/02,Y,A & A,8.30
```

FIGURE 1.3

POPULATION 8 VALIDATION FILE AFTER PROCESSED THROUGH SOFTWARE

Import Data | Change Population | Report Validation | Data Element Validation | Utilities | Window | Help

Summary | **Detail**

Total Number of Records: 43

Obs	SSN	Unique ID	TypeUIprog	Program Ty	Inter/Intras	LowerAuth	SingleMulti	MultiClaima	Appellant	InFavo
1	1	6101002	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
2	2	12401001	Regular UI - U	UI-MN	Intrastate-07	LOWER-AP	S-0000		Claimant-CL	Y-Y
3	3	20201002	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
4	4	21601002	Regular UI - U	UI-MN	Intrastate-05	LOWER-AP	S-0000		Claimant-CL	Y-Y
5	5	33601002	Regular UI - U	UI-MN	Intrastate-02	LOWER-AP	S-0000		Claimant-CL	Y-Y
6	6	36601002	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
7	7	292001001	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
8	8	42501002	Regular UI - U	UI-MN	Intrastate-04	LOWER-AP	S-0000		Claimant-CL	Y-Y
9	9	50601002	Regular UI - U	UI-MN	Intrastate-03	LOWER-AP	S-0000		Claimant-CL	Y-Y
10	10	53501001	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
11	11	59001001	Regular UI - U	UI-MN	Intrastate-02	LOWER-AP	S-0000		Claimant-CL	Y-Y
12	12	60801002	Regular UI - U	UI-MN	Intrastate-07	LOWER-AP	S-0000		Claimant-CL	Y-Y
13	13	70401002	Regular UI - U	UI-MN	Intrastate-11	LOWER-AP	S-0000		Claimant-CL	Y-Y
14	14	75501001	Regular UI - U	UI-MN	Intrastate-06	LOWER-AP	S-0000		Claimant-CL	Y-Y
15	15	88201001	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
16	16	92601001	Regular UI - U	UI-MN	Intrastate-04	LOWER-AP	S-0000		Claimant-CL	Y-Y
17	17	101301001	Regular UI - U	UI-MN	Intrastate-11	LOWER-AP	S-0000		Claimant-CL	Y-Y
18	18	102601001	Regular UI - U	UI-MN	Intrastate-07	LOWER-AP	S-0000		Claimant-CL	Y-Y
19	19	115901001	Regular UI - U	UI-MN	Intrastate-03	LOWER-AP	S-0000		Claimant-CL	Y-Y
20	20	122001001	Regular UI - U	UI-MN	Intrastate-05	LOWER-AP	S-0000		Claimant-CL	Y-Y
21	21	129301001	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y
22	22	137401001	Regular UI - U	UI-MN	Intrastate-01	LOWER-AP	S-0000		Claimant-CL	Y-Y

FIGURE 1.4

POPULATION 3 SAMPLE ERROR REPORT

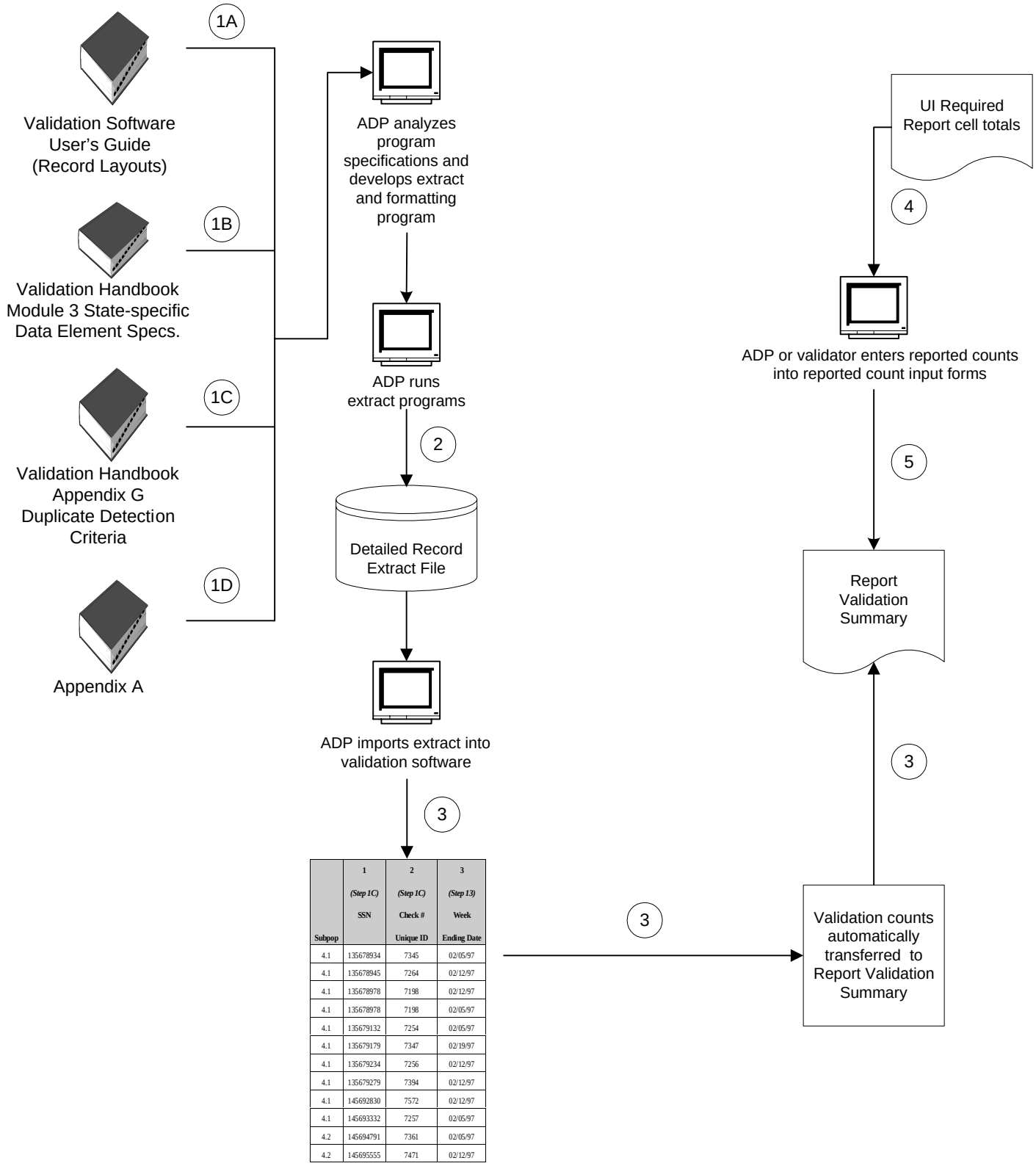
errors in file: C:\Program Files\UIDV\3pop.txt on 10/14/2001 4:59:41 PM

OBS #8,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #31,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #62,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #69,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #75,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #79,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #98,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #128,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #158,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #162,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #171,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #179,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #198,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #212,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)
OBS #217,SSN #999999999 - (Unable to assign a subpopulation code. Some columns do not meet data requirements.)

OVERVIEW OF MODULE 1 (FIGURE 1.5)

Figure 1.5 Step No.	Description of Step	Who Performs Step
1A – 1D	ADP staff analyze the validation program specifications including: **1A. Validation Software User Guide:** contains the report validation record layouts which detail the extract file layouts for each population. **1B. Validation Handbook Module 3:** state-specific data element specifications include the state's specific screen names, element names and value codes for each data element. **1C. Duplicate Detection Criteria Appendix G:** contains the criteria that the software uses to detect duplicates. **1D. Report Validation Specifications Appendix A:** contains reporting and sampling specifications for each population.	ADP Staff
2	The ADP staff run the extract programs that extract detailed transaction records from the state database(s), including all of the data elements specified in the record layouts. Incorporated into the extract process is a routine to ensure that invalid duplicates are not included, as specified in the duplicate detection criteria in Appendix G.	ADP Staff
3	The validation software processes the extract files and displays imported transactions in the populations and subpopulations that are specified in Appendix A of the handbook. The software also transfers validation counts to the report validation summary.	Validation Software
4	Either the ADP staff or the validator enter the UIRR item totals into the reported count input form.	ADP Staff or Validator
5	Once the reported counts have been entered into the reported count input form, the software will automatically calculate the difference between the counts and the percentage of error.	Validation Software

FIGURE 1.5
REPORT VALIDATION



Subpop	1 (Step 1C) SSN	2 (Step 1C) Check # Unique ID	3 (Step 13) Week Ending Date
4.1	135678934	7345	02/05/97
4.1	135678945	7264	02/12/97
4.1	135678978	7198	02/12/97
4.1	135678978	7198	02/05/97
4.1	135679132	7254	02/05/97
4.1	135679179	7347	02/19/97
4.1	135679234	7256	02/12/97
4.1	135679279	7394	02/12/97
4.1	145692830	7572	02/12/97
4.1	145693332	7257	02/05/97
4.2	145694791	7361	02/05/97
4.2	145695555	7471	02/12/97

MODULE 2--DATA ELEMENT VALIDATION

The most important goal of the entire validation process is to ensure that the individual transactions have been reported correctly on the UIRR. After all of the relevant data have been assembled and each observation has been assigned to a specific reporting subpopulation, the key question is whether the information used in report validation is correct. For example, if a claim is classified as UCFE, do the base period wages match the federal criteria for a UCFE claim? This process is called data element validation, which closely examines each data element used in the report validation process for a small sample of transactions.

A. VALIDATION SAMPLES AND WORKSHEETS

Task 1: Procedure

The purpose of sampling transactions from the reconstruction file is to verify that the data used in report validation are correct.

Data element validation uses two types of samples--random and supplemental--to address different types of federal report errors and different requirements for accuracy. The type of transaction being validated, and whether human error is inherent in the data, help to determine which sample type is used. The samples enable the validator to review the reconstructed populations for both systems logic and data quality errors. The sampling strategy for each population is further detailed in Appendix A beginning on page A.78.

Random samples are used to conduct data element validation for the most important and high risk performance and reporting elements. These include Tier 1 performance measures and workload items. Appendix A explains each type of sample and the number of cases that are selected by the validation software for data element validation. Validators may need to review only the first 30 or 60 cases in a random sample if the findings show that the error rate is conclusively above five percent or below five percent.

The validation software automatically selects samples from the validation files and displays the sampled data on a validation worksheet. The sampling specifications detail each of the samples to be drawn and specify the subpopulations to be sampled, the sample size, and the sample type. Randomly sampled transactions are subjected to a series of “logic rules” that validate the cases relative to their most definitive source documentation to test adherence to state practices and federal definitions. All

samples are validated using system data (either pre-printed on the validation worksheet or from the review of the database screens), to ensure that the state's reporting programs are functioning correctly. States that reconstruct reported transactions directly from the database can validate some samples from the worksheet alone, if the necessary data have been captured. For a small number of samples, it is also necessary to review supporting documentation in the form of paper files. Table A.1 in Appendix A specifies how this is done.

Task 2: Conducting the Data Element Validation

In the data element validation process, the state validator applies a series of logic tests to each sampled transaction, using the data fields, values, and codes from the claimant benefits history database. These "logic tests" are based on federal requirements that determine how transactions are reported. The state-specific step-by-step instructions in Module 3 provide complete documentation on how to validate each data element required to correctly report each individual transaction (such as payments, appeals, etc.).

Although the steps identify the location of all necessary data in each state's system, all states perform the identical logic tests against federal reporting guidelines. Performing identical logic tests ensures uniform and consistent validation and reporting practices across states. This comprehensive and detailed state-specific reporting documentation protects states and the national office from loss of expertise due to staff turnover and permits flexibility in staffing the validation effort. The instructions include a structure for recording comments and definitional problems that enables states to track federal report and data validation issues. This is important for documenting issues that may affect validation in the future, and for explaining inconsistencies.

The state validators follow each step in the data element validation instructions in Module 3 to validate discrete transaction characteristics such as mail date, program type, etc. There are 44 benefits validation steps such as payment type, claim type, program type, etc. Many of the validation steps are divided into substeps for different types of payments, claims and programs. For example the compensation type step has substeps for first payment, continued payment, adjusted payment and CWC payments. The claim type step has substeps for new claims, additional claims, transitional claims and CWC claims. The program type step has substeps for UI, UCFE, UCX and joint UI/Federal programs.

Appendix D provides formats for the worksheets created by the validation software. The worksheets contain the data for the sampled observations and a Total row for total transactions and errors. The worksheets also guide the validator to the appropriate steps in the state-specific instructions in Module 3 for validating each relevant data element on the worksheet. The validator clicks on the checkbox for each element to indicate whether the element passed (0) or failed (1) the validation based on the criteria in Module 3.

The supporting documentation used for validating the sampled transactions will come from one of three sources:

1. **Validation Worksheets.** The validation worksheet alone is used for validation for populations where all of the data elements required for validation are pre-printed on the worksheet. The worksheet is identical to the reconstruction file except that checkbox columns have been added to the right of each data element.

2. **Database Screens.** For populations where the definitive source is the database, it is necessary to review the data on the worksheet against the database screens.

3. **Supporting Files/Paper Documentation.** For populations where the definitive source is a paper record or file, it is also necessary to validate the data on the worksheet against the paper audit trail. This methodology will be used for validation of non-monetary redeterminations, appeals, and overpayments.[1]

[1]Non-monetary determinations are validated as a part of the quality review (see ETA HB 301), so it is not necessary to review these paper files during validation.

Task 3: Summary and Analytical Reports

The validator uses summary and analytical reports to summarize and evaluate errors identified through the data element validation process. Errors detected through the validation process are recorded on the summary and analytical report for each random and supplemental sample for a specific type of transaction. Error rates are calculated for the population as a whole and for each type of error, including time lapse.

For example, it is necessary to distinguish between an invalid first payment (i.e., the payment was not the first payment on the claim) and a valid first payment that was reported in the wrong category (e.g., an incorrect program type). Results from random and supplemental samples of a transaction population are not combined because random samples indicate error rates for the universe of transactions, whereas supplemental samples identify only the existence of errors.

The summary and analytical reports are also used for reporting data element validation results to the UIS national office. The software user's guide provides more information about producing the report in the format required by DOL. See UIPL 10-03 for a timeline for submitting spreadsheets and reports to the UIS national office.

Appendix E includes formats for the summary and analytical report.

Because nonmonetary determinations data validation will be performed in conjunction with the BTQ quality review, the population summary and analytical report will be constructed from the subset of quality review data elements used for validation by the UIS national office.

Task 4: Corrective Action (CAP)

Validation is not an end in itself; it is a means toward correct reporting. If validation identifies reporting errors, the state should correct them as soon as possible.

To document the steps required for corrective action and the timetable for completion, the state must submit a Corrective Action Plan (CAP) to its ETA Regional Office in accordance with the annual State Quality Service Plan (SQSP). The CAP should contain the following information on every validated report element found to exceed the validation tolerance:

- Report element(s) in error.
- Magnitude of error found.

- Status/Plan/Schedule for correcting. Note: If reporting errors were corrected in the course of the first validation, the report should simply note "corrected during validation." (Validation of the affected transactions should occur immediately after these corrections have been made.)

Timing of CAP. The CAP should be submitted within one month of submitting the Validation Summary Report. CAPs are considered additions to the SQSP. If the state is conducting the validation in segments, e.g., benefits first, then tax, and a CAP is required based on a segment's validation results, the CAP should be prepared within a month of the completion of that segment.

Revalidation. Every element in error by more than the stated validation limit must be revalidated the following year. A "clean" validation confirms the success of the corrective action or, if the state has not completed corrective action, identifies the current extent of the error.

Errors Discovered Outside the Validation Process. During the validation process, errors in reporting may be identified that are outside the scope of the validation program. Such errors should be included in the comments section of state's Data Validation Summary/Analytical Report and included in the CAP if warranted.

Note: A CAP is also required for any state that fails to conduct the validation for either the benefits or tax programs. Full validation will be repeated at regular intervals or after changes to the state's system have been made.

B. EXAMPLES

Figure 2.1 is an example of a worksheet for a sample of lower authority appeals decisions in population 8. This is only a portion of the worksheet. The worksheet itself displays the identical information (the characteristics of the transactions) as displayed on the validation file, except that the worksheet lists only sampled transactions. The worksheet also contains a check box between each characteristic in which the validator indicates whether the characteristic of the transaction passed (0) or failed (1) the validation check.

Figure 2.2 is an example of a Summary/Analytical Report. The report displays the individual number, total number, and percentage of errors for each sample.

FIGURE 2.1

DATA ELEMENT VALIDATION WORKSHEET

File Import Data Change Population Report Validation Data Element Validation Utilities Window Help

Validation Population 8
Lower Authority Appeals Decisions
Decision Date Falls Within Reporting/Validation Period

Summary of Samples Taken | **Worksheet**

(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority Number samples inspected: 8

Seq	OBS	SubPop	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	Pass /Fail	3 (Step 2) Type of UI Program	Pass /Fail	4 (Step 4) Program Type	Pass /Fail	5 (Ste Intr Inte
1	760	8.12	1004	257401001	0	Regular UI - UI	0	UI-MN	0	Intr
2	41	8.1	41	918200004	0	Regular UI - UI	0	UI-MN	0	Intr
3	511	8.11	781	77601001	0	Regular UI - UI	0	UI-MN	0	Intr
4	627	8.11	445	1051400001	0	Regular UI - UI	0	UI-MN	0	Intr
5	520	8.11	790	86801001	0	Regular UI - UI	0	UI-MN	0	Intr
6	1029	8.35	657	274101001	0	Regular UI - UI	0	UI-MN	0	Intr
7	474	8.10	744	812500003	0	Regular UI - UI	0	UI-MN	0	Intr
8	804	8.18	492	995000002	0	Regular UI - UI	0	UI-MN	0	Intr

Match Errors	Type of UI Prog	ProgramType	Intra/Inter	Lower Athority A	Single/MultiClair	Multi Claima
0	0	0	0	0	1	1

Refresh Counts

FIGURE 2.2

SUMMARY/ANALYTICAL REPORT

Validation Population 8 - Lower Authority Appeals Decisions(Single Claimant) - Quality Summary - for period 4/1/2002 - 4/30/2002

Samples	Total Sample	Cases in Error %	Invalid Decisions					Reporting Characteristic Errors										Time Lapse Errors			
			1 (Step 1E) Batch	6 (Step 24A) Lower Authority Appeal	14 (Step 31A) Disposed of By Decision	Total Errors	Percent Error	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intra/ Inter	7 (Step 25A) (Step25B) Single/ Multi-Claimant	8 (Step 26) Multi-Claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	15 (Step 31) Issue Code	Total Errors	Percent Error	11 (Step 32) Filed Date	12 (Step33) Decision Date	Total Errors	Percent Errors
(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority	7	1 14.29%	0	0	0	0	0.00%	0	0	0	0	0	0	0	1	1	14.29 %	0	0	0	0.00%
Total Random	7	1 14.29%	0	0	0	0	0.00%	0	0	0	0	0	0	0	1	0	0.00%	0	0	0	0.00%

OVERVIEW OF MODULE 2 (FIGURE 2.3)

Figure 2.3 Step No.	Step Description	Who Performs Step
1	The validator uses the worksheet to locate the first relevant step in Module 3. For each sampled transaction, there will be certain data elements printed on the worksheet. Columns for data that are not relevant to a particular transaction will be blank. For elements where data exist, the validator locates the step number at the top of the column. The step numbers refer to the step numbers in Module 3 of the handbook. In Figure 2.3, for the first sampled transaction in Subpopulation 1.1 the first data element is UI-01. This column directs the validator to go to Step 4 in Module 3. The validator proceeds through each of the steps for each sampled transaction in the same manner.	Validator
2	The validator turns to the designated step in Module 3. Each step will have one or more rules listed. The purpose or "Function" of each rule is provided. In addition, each step includes the definition from the ETA 401. "Definitional Problems" is used to document instances where state regulations or practices conflict with the federal definitions. The "Comments" field can be used by the validator to record notes or document issues that may be helpful for future validations.	Validator
3	The validator locates the source "Document" listed to check each rule. The document is the source used to compare the data on the worksheet with the data residing in the state database or state files. In some cases, it will not be necessary to pull any additional documents when all of the data elements have been included on the worksheet. In other instances, it will be necessary for the validator to refer to screens and/or case files.	Validator
4	The validator determines if the characteristic being validated passes all of the validation rules using the required documents.	Validator
5	If any of the rules for the step fail validation, then the validator clicks the box on the worksheet to enter a "1"for that step to indicate an error.	Validator
6	If the data element passes all of the rules, then the validator clicks the box on the worksheet to enter a "0" for that step.	Validator
7	After each of the steps has been validated for every sampled transaction, the software generates the Summary/Analytical Report. The validator selects the Summary/Analytical Report option under the 'Data Element Validation' menu and prints the final report.	Software/ Validator

FIGURE 2.3
DATA ELEMENT VALIDATION PROCEDURES

Method for validating each characteristic (column) for each sampled transaction on worksheet
Assume that validator needs to validate using a benefits history screen

Subpop	Step 4	✓	Step 5
1.1	UI - 01		Intra - A
1.1	UI - 01		Intra - A
1.5	UCFE - 02		Inter - B
1.5	UCFE - 02		Inter - B

Section of DEV Worksheet

1

Validator locates validation Instructions in Module 3
- Looks up first step number on worksheet (Step 4)

2

Step 4A - Unemployment Insurance (UI)

Instructions:
Select 0 on the worksheet if the conditions are met, otherwise record a 1:

1. Document:
   Rule:
   Function:

2. Document:
   Rule:
   Function:

Comments:

Definitional Problems:

Definition:

Example of Module 3 step

3

Obtain necessary screens/ documents

State-specific documents/ screens

4

Determine if characteristic passes all validation rules using:

1) Worksheet
2) Step in Module 3
3) Screens/Documents

Does characteristic pass rules?

PASS

6

PASS

click the box to enter a "0"

FAIL

5

FAIL

Click the box to enter a "1"

7

Software transfers total errors and types of errors from worksheet to summary and analytical reports

MODULE 3--DATA ELEMENT VALIDATION INSTRUCTIONS

Table 3.1 outlines each step in the state-specific validation instructions and its component substeps. Table 3.2 indicates the combination of validation steps required for validation of each population. The worksheet guides the validator to the necessary steps by the presence or absence of data in each column for a given transaction. The worksheets also indicate the corresponding steps used for validation for data in a given column on the worksheet. Once the validator learns the instructions and rules listed under each step and substep, it may not be necessary to refer to them for each transaction or element being validated.

The validator begins the validation by looking at the first transaction (first row) on the worksheet and then by looking at the first step listed in the column at the top of the worksheet. The validator then locates that step in the state-specific instructions in Module 3.

If there are substeps, but the substep is not specified in the column heading, the first page for the step number will direct the validator to the appropriate substep.

The inclusion of state-specific information in this module is not to be deemed a finding that such information is in compliance with federal reporting data definitions.

TABLE 3.1

DATA ELEMENT VALIDATION STEPS AND SUBSTEPS

Step	Substep A	Substep B	Substep C	Substep D	Substep E	Substep F	Substep G	Substep H	Substep I	Substep J
1 - Matching Sampled Transaction to Benefits History Screen(s)	Week Claimed	Claims	Payments	Nonmonetary Determinations and Redeterminations	Appeals - Lower	Appeals - Higher	Overpayments	Overpayment Reconciliation Activities		
2 - Type of UI Program	Regular Unemployment Insurance	Workshare	Extended Benefits	Disaster Unemployment Assistance (DUA)						
3/3a- Type of Claim	New Claim	Additional Claims/ Reopened Claims	Transitional Claims	Entering Self-Employment Program						
4 - Program Type	UI	UCFE or UCFE/UCX	UCX	Joint UI/Federal	Self-Employment Program					
5 - Intrastate or Interstate Claim	Intrastate	Interstate Received as Liable State	Interstate Taken as Agent State	Interstate Filed from Agent State	Intrastate CWC	Interstate CWC				
6 - Claim Status	Monetary Determination Within Quarter	No Monetary Determination	Sufficient Wages to Qualify for Benefits	Insufficient Wages to Qualify for Benefits						
7 - Maximum Weekly Benefit										
8 - Potential Weeks of Duration	Potential Weeks of Duration	Maximum Potential Weeks of Duration								
9 - Actual Weeks of Duration	Actual Weeks of Duration	Maximum Actual Weeks								
10 - Types of Compensation	First Payment	Continued (Weeks) Payment	Final Payment	Partial/Part-Total Payment	Total Payment	Adjusted Payments	Prior Weeks Compensated			
11 - Weeks Claimed										
12 - Amount Compensated	UI Amount Compensated	UCFE Amount Compensated	UCX Amount Compensated	CWC Amount Compensated	Self-Employment Amount Compensated					
13 - Week Ending Date of Week Paid										

Table 3.1 *(continued)*

Step	Substep A	Substep B	Substep C	Substep D	Substep E	Substep F	Substep G	Substep H	Substep I	Substep J
14 - Payment Mail or Deposit Date										
15 - Payments Time Lapse										
16 - Nonmonetary Determination/ Redetermination	Nonmonetary Determination	Nonmonetary Redetermination								
17 - Type of Determination	Single Claimant	Multiclaimant								
18 - Determination Issues	Voluntary Quit	Misconduct	Other Separation Issues	Able and Available To Work	Deductible Income	Suitable Work Refusal	Reporting Requirements	Profiling	Other Nonseparation Issues	Labor Dispute (Substep K) Other Multiclaimant Issues
19 - First Week Affected by a Determination										
20 - Issue Detection Date										
21 - Notice Date										
22 - Nonmonetary Determination Time Lapse	Detection Date to Notice Date	First Week Affected to Detection Date								
23 - Outcome of Determination	Determination to Allow	Determination or Redetermination to Deny								
24 - Appeal Level	Lower Authority Appeal	Higher Authority Appeal								
25 - Type of Appeal	Single Claimant	Multiclaimant								
26 - Appellant	Claimant	Employer	Other than Claimant or Employer							
27 - Outcome of Decision	In Favor of Appellant	Not in Favor of Appellant								
28 - Appeal Decision Date										
29 - Appeal Time Lapse	Appeal Time Lapse	Appeal Case Age Calculation								
30 - Appeal Disposition	Disposed of by Decision	Not Disposed of								
31 - Appeal Issues	Voluntary Quit	Misconduct	Suitable Work Refusals	Able and Available To Work	Other Issues	Labor Dispute				

Table 3.1 *(continued)*

Step	Substep A	Substep B	Substep C	Substep D	Substep E	Substep F	Substep G	Substep H	Substep I	Substep J
32 - Appeal Filed Date										
33 - Type of Overpayments	Fraud Overpayment	Nonfraud	Penalty							
34 - Cause of Overpayments	Multi-Claimant Schemes	Reversal (JAVA)	SESA Error	Employer Error	Claimant Error	Other Cause	Penalty			
35 - Overpayment Detection Activities	Wage/Benefit Crossmatch	IB Crossmatch	New Hires System	Multi-Claimant Scheme Systems	Special Project	Other Controllable Overpayment Detection Activities	Noncontrollable Overpayment Detection Activities			
36 - Overpayment Established Date										
37 - Amount of Overpayment										
38 - Overpayment Reconciliation Activities	Recovered Cash	Recovered Offset	State Income Tax Offset	By Other States	Other	Waived	Written-Off	Additions	Subtractions	
39 - Overpayment Reconciliation Activity Date										
40 - Amount of Overpayments Reconciliation Activity										
41 - Outstanding Overpayment										
42 - Balance of Overpayment										
43 - Overpayment Aging Calculation										
43 - Active Collection	Yes or Blank	No Not in Active Collection	Dropped							

TABLE 3.2

RELEVANT DATA ELEMENT VALIDATION STEPS, BY POPULATION

Population	Relevant Data Element Validation Steps[a]
1 - Weeks Claimed	1, 2, 4, 5, 11
2 - Final Payments	1, 2, 4, 9, 10
3/3a - Claims	1, 2, 3, 4, 5, 6, 7, 8
4 - Payments	1, 2, 4, 5, 10, 12, 13, 14, 15
5 - Nonmonetary Determinations/Redeterminations	1, 2, 4, 5, 16, 17, 18, 19, 20, 21, 22, 23
6 - Appeals Filed, Lower Authority	1, 24, 25, 32
7 - Appeals Filed, Higher Authority	1, 24, 25, 32
8 - Appeals Decisions, Lower Authority	1, 2, 4, 5, 24, 25, 26, 27, 28, 29, 30, 31, 32
9 - Appeals Decisions, Higher Authority	1, 2, 4, 5, 24, 25, 26, 27, 28, 29, 30, 32
10 - Appeals Pending, Lower Authority	1, 24, 29, 30, 32
11 - Appeals Pending, Higher Authority	1, 24, 29, 30, 32
12 - Overpayments Established	1, 4, 33, 34, 35, 36, 37
13 - Overpayment Reconciliation	1, 4, 33, 38, 39, 40
14 - Overpayment Case Aging	1, 4, 36, 41, 42, 43, 44

[a]The appropriate substeps for each population are specified on the population specification tables in Appendix A.

QUALITY SAMPLE VALIDATION MODULE 4

A. PURPOSE

The purpose of the quality sample validation is to ensure that the samples drawn to assess nonmonetary determinations and appeals quality are the correct sample size and are randomly selected from the correct populations and are the correct size. Sample sizes are set annually beginning with the first quarter of the calendar year and are dependent on the volume of nonmonetary determinations reported to the Department of Labor on the ETA 9052 reports for the preceding calendar year and the number of lower authority appeals reported on the ETA 9054 reports.

There are two basic approaches to selecting the quality samples. In a conventional interval sample, the programmer (or a utility program) divides the size of the desired sample (e.g., 30) into the size of the population (e.g., 300) and derives the sample interval (every 10th observation). The programmer or the utility program then selects a random start point between 1 and 10 and selects every 10th case from that point. Another approach to sampling is to use a sampling utility program that randomizes the file and selects the first 30 observations. This approach is somewhat more difficult to validate but could involve a review of the sample against the source file or a review of the utility program specifications.

The quality sample validation should be coordinated with the sample selection for nonmonetary and appeals quality review. If the sampling procedures are successfully validated, then the quality reviews can proceed. If the sampling procedures do not pass validation, however, the problem(s) will need to be researched and corrected prior to conducting the quality review.

B. QUALITY SAMPLE VALIDATION MATERIALS (ADP STAFF)

Task 1: Copy of the Universe File of Nonmonetary Determinations for the Quarter

(For nonmonetary determination quality sample)

Task 2: Copy of the Universe File of Appeals for the Quarter

(For appeals quality sample)

Validation of the samples selected for nonmonetary determinations and lower authority appeals quality must be conducted for the first calendar quarter's samples, at a minimum. Validation must occur *before* cases are assigned to the quality review staff.

If the sample selection procedures meet the validation criteria contained in this module, then state staff may proceed with the distribution of the cases.

If the sample selection procedures do not meet the validation criteria contained in this module, then ADP staff must be consulted. The sampling procedure must be fixed and rerun until validation indicates it is correct. Assignment of the cases can then proceed accordingly.

C. QUALITY SAMPLE VALIDATION METHODOLOGY (VALIDATION STAFF)

Validate the Selection of the Nonmonetary Determination Quality (QPI) Sample:

Task 1:

Review the total number of nonmonetary determinations reported on the ETA 9052 report for the preceding calendar year. If the total is 100,000 or more, then the sample size is 100 (50 separations and 50 nonseparations). If the total is fewer than 100,000, then the sample size is 60 (30 separations and 30 nonseparations).

Task 2:

Compare the total count of the nonmonetary universe for the quarter with the count reported on the ETA 9052 for the three-month period. This comparison validates that the correct universe was used.

Task 3:

Determine whether an interval sample was drawn (and how it was drawn) or whether the file was randomized such that the first set of cases could be selected without establishing intervals.

Task 4:

Obtain a copy of the nonmonetary universe file for the quarter with the observation number and SSN of each case.

Task 5:

If an interval sample was drawn, check to see that the first case was randomly selected and that the proper cases were selected (e.g., if the random start was 10 and the interval was every 40th case, check to see that 50, 90, 130, and so on were selected). The validator can identify the sampled cases from the quality review documentation and can compare the sampled cases with the observations in the universe file by matching on observation number and SSN.

Task 6:

If the sample was drawn from a randomized file, determine how the file was randomized and print out the file to check that it was not ordered by date, local office number, or other nonrandom means. The validator can compare this order with the way the file was ordered prior to randomization to ensure that the file was randomly reordered.

Validate the Selection of the Appeals Quality Sample:

Task 1:

Review the total number of Lower Authority Appeals decisions for the preceding calendar year. If the total reported is 40,000 or more, then the sample size is 40 decisions per quarter. The sample size is 20 decisions per quarter if the total reported is fewer than 40,000.

Task 2:

Compare the total count with the count reported on the ETA 9054 report for the three-month period. If the programmer who selected the sample deleted appeals decisions representing withdrawals, dismissals, and no shows from the sample universe, then the quality universe should be smaller than the count reported on the ETA 9054 report. The validator can examine a printout of the sample universe and can examine the code used by the programmer to distinguish between decisions with reviewable hearings and decisions representing withdrawals, dismissals, and no shows. If the sum of the two groups matches the count reported on the ETA 9054 report for the three-month period, then the correct universe was used.

Task 3:

Determine whether an interval sample was drawn (and how it was drawn) or whether the file was randomized such that the first set of cases could be selected without establishing intervals.

Task 4:

Obtain a copy of the appeals universe file for the quarter with the observation number and SSN of each case.

Task 5:

If an interval sample was drawn, check to see that the first case was randomly selected and that the proper cases were selected (e.g., if the random start was 10 and the interval was every 40th case, check to see that 50, 90, 130, and so on were selected). The validator can identify the sampled cases from the quality review documentation and can compare the sampled cases with the observations in the universe file by matching on observation number and SSN.

Task 6:

If the sample was drawn from a randomized file, determine how the file was randomized and print out the file to check that it was not ordered by date, local office number or other nonrandom means. The validator can compare this order with the way the file was ordered prior to randomization to ensure that the file was randomly reordered.

D. RESULTS

If the sampling method was not correct or was not implemented properly, the validator should discuss the problems with the programmer and determine what corrective actions are needed. If the programmer confirms that the process was incorrect, the validator should record the problems on the summary and analytical reports for the two samples, which are included in Appendix E.

APPENDIX A

REPORT VALIDATION SPECIFICATIONS

POPULATION TABLES

TABLE NUMBER	DESCRIPTION	PAGE
1	Weeks Claimed	A.3
2	Final Payments	A.6
3	Claims and Claim Status	A.10
4	Payments/Weeks Compensated	A.24
5	Adjudications and Redeterminations	A.32
6	Appeals Filed - Lower	A.45
7	Appeals Filed - Higher	A.46
8	Appeals Decisions - Lower	A.48
9	Appeals Decisions - Higher	A.58
10	Pending Appeals - Lower	A.63
11	Pending Appeals - Higher	A.64
12	Overpayments Established - Sorted by Causes	A.66
13	Overpayment Reconciliation Transactions	A.70
14	Aged Overpayments	A.75

VALIDATION POPULATION 1

WEEKS CLAIMED - WEEK WAS CLAIMED DURING REPORTING/VALIDATION PERIOD

Subpop #	ETA 5159 Report Line and Column	1 *(Step 1A)* Week Claimed	2 *(Step 1A)* SSN	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/Interstate	6 *(Step 11) (Rule 1)* Date Week Claimed	7 *(Step 11) (Rule 2)* Monetarily Eligible or Pending	8 *(Step 11) (Rule 3)* Earnings	9 *(Step 11) (Rule 3)* WBA
INTRASTATE WEEKS CLAIMED (1.1 through 1.3) 1) Random sample: 60 or 200										
1.1	5159A-201-10			Regular UI	UI	Intrastate				
1.2	5159A-202-10			Regular UI	UCFE	Intrastate				
1.3	5159A-203-10			Regular UI	UCX	Intrastate				
INTERSTATE WEEKS CLAIMED RECEIVED AS LIABLE STATE (1.4 through 1.6) 1) Random sample: 30 or 100										
1.4	5159A-201-12			Regular UI	UI	Interstate Rec'd as Liable				
1.5	5159A-202-12			Regular UI	UCFE	Interstate Rec'd as Liable				
1.6	5159A-203-12			Regular UI	UCX	Interstate Rec'd as Liable				
INTERSTATE WEEKS CLAIMED FILED FROM AGENT STATE (1.7 through 1.9) 1) Minimum Sample: First two cases										
1.7	5159A-201-11			Regular UI	UI	Interstate Filed from Agent State				
1.8	5159A-202-11			Regular UI	UCFE	Interstate Filed from Agent State				
1.9	5159A-203-11			Regular UI	UCX	Interstate Filed from Agent State				

RELATIONSHIP BETWEEN WEEKS CLAIMED SUBPOPULATIONS IN POPULATION 1 AND THE ETA 5159A REPORT

		Continued Weeks Claimed		
		Intrastate (10)	Interstate Filed from Agent State (11)	Interstate Received as Liable State (12)
State UI	201	1	7	4
UCFE, No UI	202	2	8	5
UCX Only	203	3	9	6

Population 1 Notes

1. Population 1 includes the date of the week being claimed and the date the week was claimed:

   A) Column 1 (Step 1A), Week Claimed, is the benefit week ending (BWE) date of the week being claimed.

   B) Column 6 (Step 11), Date Week Claimed, is the date that the state processes the weekly certification.

2. Column 7 (Step 11, Rule 2) is an optional field for the extract file. It is included to ensure that the week claimed was valid based on monetary entitlement. Programmers may be able to populate this field with data to show that the week was countable by including data that shows that the claim was eligible (or pending), that an appeal of an ineligible monetary had been filed and not decided or that the appeal period for an ineligible monetary determination had not expired.

   Regardless of whether programmers provide data in column 7, validators will check all of this information for sampled cases as part of the data element validation process.

3. Subpopulations 1.7 – 1.9: This information comes from the LADT claimant records. Instructions for including data from these records for populations 1 and 3 can be found in the LADT Information section of Appendix B, Technical Guidance.

4. Column 9 (Step 11, Rule 3), WBA: Use the WBA that is in effect during the week claimed for this population.

VALIDATION POPULATION 2

FINAL PAYMENTS

Subpop #	Report, Line, and Column	1 *(Step 1C)* SSN	2 *(Step 1C)* Check # Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 9A)* MBA	6 *(Step 9A)* WBA	7 *(Step 9A)* Actual Weeks of Duration	8 *(Step 9B)* Maximum Duration	9 *(Step 10C)* Mail Date of Final Payment	10 *(Step 10C)* Balance
FINAL PAYMENTS (2.1 through 2.4) 1) Random sample: 30 or 100											
2.1	5159B-303-26 218B-104 (14, 19)			Regular UI	UI			26	Yes		
2.2	5159B-303-26 218B-102 (8-13)			Regular UI	UI			X	No		
2.3	5159B-303-27			Regular UI	UCFE or UCFE/UCX, no UI			NA	NA		
2.4	5159B-303-28			Regular UI	UCX Only			NA	NA		

RELATIONSHIP BETWEEN FINAL PAYMENTS SUBPOPULATIONS IN POPULATION 2 AND THE ETA 218B REPORT

SECTION B. ACTUAL DURATION FOR CLAIMANTS WHO RECEIVED FINAL PAYMENTS

LINE NO.	ITEM	LESS THAN MAXIMUM WEEKS OF DURATION Less than 26 Weeks (8-13)
102	Actual	2

		MAXIMUM WEEKS OF DURATION 26-27 Weeks (14)	Number at Maximum Duration (19)	Average Weeks Duration (20)
104	Actual	1	1	Average Calculation from Total Column for Subpopulations 1 and 2

RELATIONSHIP BETWEEN FINAL PAYMENTS SUBPOPULATIONS IN POPULATION 2 AND THE ETA 5159B REPORT

Final Payments for All Unemployment				
		State UI Program	UCFE & UCX Programs	
		Total (26)	UCFE, No UI (27)	UCX Only (28)
Number	303	1 and 2	3	4

Population 2 Notes

1. This population validates two reports for different time periods:

   A) The 5159 is a monthly report

   B) The 218 is a quarterly report

   Validate a quarter by taking three 5159 monthly reports and adding them up to equal the 218 for the quarter. There may be some dynamic data (values that change during the time period). Therefore, the reported counts and validation counts may not match exactly.

   It is important that the correct reported counts be entered into the Reported Counts Data Entry screen in the validation software for the same period. For example, if you validate the 218 for the first quarter (January – March), you must enter the sum of the 5159 report totals for January, February, and March.

2. Columns 5 and 6 (Step 9A), WBA and MBA: Use the final MBA and WBA on the claim for this population.

3. Column 7 (Step 9A), Actual Weeks of Duration: Divide the final MBA by the final WBA and round to the next highest whole number. The number of actual weeks of duration is unrelated to the number of weeks compensated. If the claim included partial payments, there will be more weeks compensated than actual weeks of duration. For example, if the final MBA is $5,200.00 and the final WBA is $200.00, the actual weeks of duration is 26. This claimant, however, may have been compensated for 30 weeks if partial payments were made on the claim.

4. The balance on the claim may not be zero if the state retains the balance for disqualified weeks on its database. For example, the final MBA is $5,200.00; the final WBA is $200.00; but 13 weeks were disqualified. The disqualified portion of $2,600.00 should be removed from the final MBA before loading the file into the software. Therefore, the final MBA will be $2,600.00, and the actual weeks of duration will be 13.

5. The range of duration breakouts are not validated. Only the totals are validated.

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 (Step 1B) SSN	2 (Step 3A) (Step 3C) (Rule 1) Date Claim Filed/ IB-4 Sent	3 (Step 2) Type of UI Program	4 (Step 3) Type of Claim	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 6A) (Step 6B) Date of Original Monetary[a]	8 (Step 6C) (Step 6D) Sufficient/ Insufficient/ Wages Combined	9 (Step 7) WBA	10 (Step 8A) MBA	11 (Step 8A) Potential Weeks of Duration	12 (Step 8B) Potential Weeks of Maximum Duration
NEW UI CLAIMS (3.1 through 3.14) 1) Random sample: 60 or 200; 2) Supplemental sample--missing strata													
3.1	5159A-101-2 218A-100-2			Regular UI	New	UI	Intrastate		Insufficient				
3.2	5159A-101-2 218A-100 (3-6) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New	UI	Intrastate		Sufficient New BY	Maximum		X[b]	Yes
3.3	5159A-101-2 218A-100 (3-5) 218B-101 (8-13)			Regular UI	New	UI	Intrastate		Sufficient New BY	Maximum		X	No
3.4	5159A-101-2 218A-100 (3-4) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New	UI	Intrastate		Sufficient New BY	Less than Maximum		X	Yes
3.5	5159A-101-2 218A-100 (3-4) 218B-101 (8-13)			Regular UI	New	UI	Intrastate		Sufficient New BY	Less than Maximum		X	No
3.6	5159A-101-2 218A-100-3			Regular UI	New	UI	Intrastate		Sufficient No BY[c]				
3.7	5159A-101-2			Regular UI	New	UI	Intrastate	No Monetary					
3.8	5159A-101-7 218A-100-2			Regular UI	New	UI	Interstate Recv'd as liable		Insufficient				
3.9	5159A-101-7 218A-100 (3-6) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New	UI	Interstate Recv'd as liable		Sufficient New BY	Maximum		X[b]	Yes
3.10	5159A-101-7 218A-100 (3-5) 218B-101 (8-13)			Regular UI	New	UI	Interstate Recv'd as liable		Sufficient New BY	Maximum		X	No

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 (Step 1B) SSN	2 (Step 3A) (Step 3C) (Rule 1) Date Claim Filed/ IB-4 Sent	3 (Step 2) Type of UI Program	4 (Step 3) Type of Claim	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 6A) (Step 6B) Date of Original Monetary[a]	8 (Step 6C) (Step 6D) Sufficient/ Insufficient/ Wages Combined	9 (Step 7) WBA	10 (Step 8A) MBA	11 (Step 8A) Potential Weeks of Duration	12 (Step 8B) Potential Weeks of Maximum Duration
3.11	5159A-101-7 218A-100 (3-4) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New	UI	Interstate Rcvd as liable		Sufficient New BY	Less than Maximum		X	Yes
3.12	5159A-101-7 218A-100 (3-4) 218B-101 (8-13)			Regular UI	New	UI	Interstate Rcvd as liable		Sufficient New BY	Less than Maximum		X	No
3.13	5159A-101-7 218A-100-3			Regular UI	New	UI	Interstate Rcvd as liable		Sufficient No BY[c]				
3.14	5159A-101-7			Regular UI	New	UI	Interstate Rcvd as liable	No Monetary					
NEW UCFE/UCX CLAIMS (3.15 through 3.18) 1) Minimum sample: First two cases from each subpopulation													
3.15	5159A-102-2			Regular UI	New	UCFE	Intrastate						
3.16	5159A-103-2			Regular UI	New	UCX	Intrastate						
3.17	5159A-102-7			Regular UI	New	UCFE	Interstate Rcvd as liable						
3.18	5159A-103-7			Regular UI	New	UCX	Interstate Rcvd as liable						

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 (Step 1B) SSN	2 (Step 3A) (Step 3C) (Rule 1) Date Claim Filed/ IB-4 Sent	3 (Step 2) Type of UI Program	4 (Step 3) Type of Claim	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 6A) (Step 6B) Date of Original Monetary[a]	8 (Step 6C) (Step 6D) Sufficient/ Insufficient/ Wages Combined	9 (Step 7) WBA	10 (Step 8A) MBA	11 (Step 8A) Potential Weeks of Duration	12 (Step 8B) Potential Weeks of Maximum Duration
INTERSTATE FILED FROM AGENT STATE CLAIMS (3.19 through 3.21) 1) Minimum sample: First two cases from each subpopulation													
3.19	5159A-101-4			Regular UI	New Additional Reopened Transitional	UI	Interstate Filed from Agent State						
3.20	5159A-102-4			Regular UI	New Additional Reopened Transitional	UCFE	Interstate Filed from Agent State						
3.21	5159A-103-4			Regular UI	New Additional Reopened Transitional	UCX	Interstate Filed from Agent State						
INTERSTATE CLAIMS TAKEN AS AGENT STATE (3.22 through 3.24) 1) Minimum sample: First two cases from each subpopulation													
3.22	5159A-101-5			Regular UI	New Additional Reopened	UI	Interstate Taken as agent						
3.23	5159A-102-5			Regular UI	New Additional Reopened	UCFE	Interstate Taken as agent						
3.24	5159A-103-5			Regular UI	New Additional Reopened	UCX	Interstate Taken as agent						

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 (Step 1B) SSN	2 (Step 3A) (Step 3C) (Rule 1) Date Claim Filed/ IB-4 Sent	3 (Step 2) Type of UI Program	4 (Step 3) Type of Claim	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 6A) (Step 6B) Date of Original Monetary[a]	8 (Step 6C) (Step 6D) Sufficient/ Insufficient/ Wages Combined	9 (Step 7) WBA	10 (Step 8A) MBA	11 (Step 8A) Potential Weeks of Duration	12 (Step 8B) Potential Weeks of Maximum Duration
INTRASTATE AND INTERSTATE TRANSITIONAL CLAIMS (3.25 through 3.33) 1) Random sample: 30 or 100													
3.25	5159A-101-6 218A-100-2			Regular UI	Transitional	UI			Insufficient				
3.26	5159A-101-6 218A-100 (3-6) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	Transitional	UI			Sufficient New BY	Maximum		X[b]	Yes
3.27	5159A-101-6 218A-100 (3-5) 218B-101 (8-13)			Regular UI	Transitional	UI			Sufficient New BY	Maximum		X	No
3.28	5159A-101-6 218A-100 (3-4) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	Transitional	UI			Sufficient New BY	Less than Maximum		X	Yes
3.29	5159A-101-6 218A-100 (3-4) 218B-101 (8-13)			Regular UI	Transitional	UI			Sufficient New BY	Less than Maximum		X	No
3.30	5159A-101-6 218A-100-3			Regular UI	Transitional	UI			Sufficient No BY[c]				
3.31	5159A-101-6			Regular UI	Transitional	UI		No Monetary					
3.32	5159A-102-6			Regular UI	Transitional	UCFE							
3.33	5159A-103-6			Regular UI	Transitional	UCX							

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 (Step 1B) SSN	2 (Step 3A) (Step 3C) (Rule 1) Date Claim Filed/ IB-4 Sent	3 (Step 2) Type of UI Program	4 (Step 3) Type of Claim	5 (Step 4) Program Type	6 (Step 5) Intrastate/ Interstate	7 (Step 6A) (Step 6B) Date of Original Monetary[a]	8 (Step 6C) (Step 6D) Sufficient/ Insufficient/ Wages Combined	9 (Step 7) WBA	10 (Step 8A) MBA	11 (Step 8A) Potential Weeks of Duration	12 (Step 8B) Potential Weeks of Maximum Duration
CWC CLAIMS (3.34 through 3.39) 1) Random sample: 30 or 100; 2) Supplemental sample--missing strata													
3.34	586A-101-1		Within Quarter	Regular UI	New CWC		Intrastate CWC	None	Insufficient				
3.35	586A-101 (1-2)		Within Quarter	Regular UI	New CWC		Intrastate CWC	Within Quarter	Sufficient New BY				
3.36	586A-102-1		Within Quarter	Regular UI	New CWC		Interstate CWC	Within Quarter	Insufficient				
3.37	586A-102 (1-2)		Within Quarter	Regular UI	New CWC		Interstate CWC	Within Quarter	Sufficient New BY				
3.38	586A-101-2		A Prior Quarter	Regular UI	New CWC BY for Claim Filed in Prior Quarter		Intrastate CWC	Within Quarter	Sufficient New BY				
3.39	586A-102-2		A Prior Quarter	Regular UI	New CWC BY for Claim Filed in Prior Quarter		Interstate CWC	Within Quarter	Sufficient New BY				
MONETARY SENT WITHOUT NEW CLAIM (3.40 through 3.45) 1) Minimum sample: First two cases from each subpopulation													
3.40	218A-100-2			Regular UI	New Claim Filed in Prior Quarter	UI			Insufficient				
3.41	218A-100 (3-6) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New Claim Filed in Prior Quarter	UI			Sufficient New BY	Maximum		X[b]	Yes
3.42	218A-100 (3-5) 218B-101 (8-13)			Regular UI	New Claim Filed in Prior Quarter	UI			Sufficient New BY	Maximum		X	No

VALIDATION POPULATION 3

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 *(Step 1B)* SSN	2 *(Step 3A) (Step 3C) (Rule 1)* Date Claim Filed/ IB-4 Sent	3 *(Step 2)* Type of UI Program	4 *(Step 3)* Type of Claim	5 *(Step 4)* Program Type	6 *(Step 5)* Intrastate/ Interstate	7 *(Step 6A) (Step 6B)* Date of Original Monetary[a]	8 *(Step 6C) (Step 6D)* Sufficient/ Insufficient/ Wages Combined	9 *(Step 7)* WBA	10 *(Step 8A)* MBA	11 *(Step 8A)* Potential Weeks of Duration	12 *(Step 8B)* Potential Weeks of Maximum Duration
3.43	218A-100 (3-4) 218B-101 (8-13) 218B-103 (14, 19)			Regular UI	New Claim Filed in Prior Quarter	UI			Sufficient New BY	Less than Maximum		X	Yes
3.44	218A-100 (3-4) 218B-101 (8-13)			Regular UI	New Claim Filed in Prior Quarter	UI			Sufficient New BY	Less than Maximum		X	No
3.45	218A-100-3			Regular UI	New Claim Filed in Prior Quarter	UI			Sufficient No BY[c]				
ENTERING SELF-EMPLOYMENT PROGRAM (3.46) 1) Minimum sample: First two cases													
3.46	5159A-201-13			Regular UI	Entering Self-Employment								

[a]For subpopulations 3.34 through 3.39, "original monetary" refers to the first monetary determination/redetermination using wages from more than one state.

[b]Observations reported in all populations which require the number of weeks of potential duration will be sorted by the number of weeks and subtotaled by the range of weeks.

[c]This situation will only occur when the State does not automatically establish a new benefit year for claimants who are monetarily eligible for benefits.

VALIDATION POPULATION 3a

CLAIMS - CLAIMANT ELIGIBILITY
CLAIM FILED DATE OR ORIGINAL MONETARY DETERMINATION DATE
FOR NEW UI CLAIM FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Cell #	1 *(Step 1A)* SSN	2 *(Step 1B)* *(Step 3B)* Date Claim Filed	3 *(Step 2)* Type of UI Program	4 *(Step 3B)* Type of Claim	5 *(Step 4)* Program Type	6 *(Step 5)* Intrastate/Interstate	7 *(Step 3B)* *(Rule 3)* Unclaimed Week	8 *(Step 3B)* *(Rule 3)* Separation Date	9 *(Step 3B)* *(Rule 4)* Last Employer	10 *(Step 3B)* *(Rule 5)* Separation Reason
ADDITIONAL CLAIMS (3.49 through 3.54) 1) Random sample: 60 or 200											
3a.49	5159A-101-3			Regular UI	Additional	UI	Intrastate				
3a.50	5159A-102-3			Regular UI	Additional	UCFE	Intrastate				
3a.51	5159A-103-3			Regular UI	Additional	UCX	Intrastate				
3a.52	5159A-101-7			Regular UI	Additional	UI	Interstate Recvld as liable				
3a.53	5159A-102-7			Regular UI	Additional	UCFE	Interstate Recvld as liable				
3a.54	5159A-103-7			Regular UI	Additional	UCX	Interstate Recvld as liable				

RELATIONSHIP BETWEEN CLAIMS SUBPOPULATIONS IN POPULATION 3 AND THE ETA 5159A AND 586A REPORTS

ETA 5159A Program	Line No.	Initial Claims New Intrastate Excluding Transitional (2)	Additional Intrastate (3)	Interstate Filed from Agent State (4)	Interstate Taken as Agent State (5)	Transitional (6)	Interstate Received as Liable State (7)	Entering Self-employment, All Programs (13)
State UI	101	1-7	49	19	22	25-31	8-14 and 52	
UCFE, No UI	102	15	50	20	23	32	17 and 53	
UCX Only	103	16	51	21	24	33	18 and 54	
State UI	201							46

ETA 586A State UI	Line No.	New Claims (1)	Persons Establishing Benefit Years (2)
Intrastate	101	34 and 35	35 and 38
Interstate Recvd. as Paying State	102	36 and 37	37 and 39

RELATIONSHIP BETWEEN NEW UI CLAIMS SUBPOPULATIONS IN POPULATION 3 AND THE ETA 218 REPORT

SECTION A. STATUS OF NEW CLAIMS

	NEW CLAIMS		NUMBER OF CLAIMANTS ESTABLISHING BENEFIT YEARS		
LINE NO.	Insufficient Wage Credits (2)	Sufficient Wage Credits (3)	Total (4)	Maximum Weekly Benefit Amount (5)	Maximum Benefit and Duration (6)
100	1, 8, 25, 40	2-6 9-13 26-30 41-45	2-5 9-12 26-29 41-44	2-3 9-10 26-27 41-42	2, 9, 26, 41

SECTION B. POTENTIAL DURATION FOR DETERMINATIONS ESTABLISHING BENEFIT YEARS

LINE NO.	ITEM	LESS THAN MAXIMUM WEEKS OF DURATION Less than 26 Weeks (8-13)
101	Potential	2-5 9-12 26-29 41-44

		MAXIMUM WEEKS OF DURATION 26-27 Weeks (14)	Number at Maximum Duration (19)	Average Weeks Duration[a] (20)
103	Potential	2, 4, 9, 11, 26, 28, 41, 43	2, 4, 9, 11, 26, 28, 41, 43	Average Calculation from Total Column for Subpopulations 2-5, 9-12, 26-29, and 41-44

[a]This item is not validated. It is represented here for informational purposes only.

Population 3/3a Notes

1. Overview

Population 3 includes new, transitional and CWC claims. Population 3a includes additional claims. The only additional and reopened claims reported in Population 3 are interstate filed from agent state claims from the LADT report. New and transitional UI claims are reported on the 5159 and the monetary determinations associated with these claims are reported on the 218. For new and transitional UI claims, states are required to produce a single record showing the claim and monetary. This is the only way to ensure that each claim is reported once and only once on the 218.

Validation of New and Transitional UI claims validates two federal reports:

ETA 5159: All claims filed (established) during the report/validation quarter.

ETA 218: New and transitional UI claims where the original monetary determination was issued during the quarter. The claims will match three months of the ETA 5159 report, and their most recent monetary determinations will match the quarterly 218 report (see the tables on the previous page for the relationship between claims populations and cells on the 5159 and 218 reports).

UCFE and UCX claims are included only on the 5159 report and not on the 218 report. Therefore, columns 7 through 12 are optional for UCFE and UXC claims.

CWC claims are extracted, processed and reported using completely separate logic from that used to extract, process and report non-CWC claims. In fact, each CWC claim is reported twice, once as a CWC claim and once as a regular claim. The CWC technical assistance guide, in Appendix B, provides instructions for extracting and labeling CWC claims.

2. Monetary Determinations

Many states generate a monetary determination automatically when a claim is filed, even when a wage request is pending. For these states, the counts of new and transitional UI claims on the 5159 will match the counts of original monetary determinations on the 218.

Some states do not automatically generate a monetary determination when a claim is filed. For these states, the counts on the two reports may differ when a claim is filed in one quarter, but the original monetary determination for that claim is generated in the following quarter. The validation methodology handles these situations as follows:

A) When no original monetary determination was sent during the quarter being validated in which the new claim was filed, the claim will be reported on the ETA 5159, but there will be no monetary status reported on the ETA 218 for the quarter being validated. These claims are assigned to subpopulations 3.7 (new intrastate), 3.14 (new interstate), and 3.31 (transitional).

B) When the original monetary determination was sent during the quarter being validated but the claim was filed during the previous quarter, the monetary status will be reported on the ETA 218, but there will be no claim reported on the ETA 5159 for the quarter being validated. These monetary determinations

are assigned to subpopulations 3.32 through 3.36, depending on their monetary status.

3. Reporting Criteria

5159 Report Criteria and procedures for building claims extract file:

- The date the claim was filed or processed drives the reporting on the 5159.
- Assign a claim type category (new, transitional, additional) and sort into the categories in column 3.
- Assign an intrastate or interstate category based on the liable and agent state(s) and sort into the categories in column 6.
- Assign a program type (UI, UCFE, UCX) based on the wages present on the most recent monetary determination at the time the report program is run and sort into the categories in column 5. If no wages were found, assign the program type based on the type of claim filed. Follow the current program type hierarchy (any UI wages are UI; any UCFE wages without UI are UCFE; and UCX wages are only UCX).

The following table shows how various types of claims are assigned to the reporting categories on the 5159 report based on the type of claim and the intra/interstate type.

Mapping of Claim Types to 5159 Report Items

Type of Claim	New Intrastate Excluding Transitional (2)	Additional Intrastate (3)	Interstate Filed from Agent State (4)	Interstate Taken as Agent State (5)	Transitional (6)	Interstate Received as Liable State (7)
New	X		X	X		X
Transitional			X		X	
Additional		X	X	X		X
Reopen			X	X		

218 Report Criteria and procedures for extracting information from monetary determinations:

- The date of the original monetary determination drives the reporting on the 218.
- Based on the most recent monetary determination/WBA at the time the report is run, assign a monetary determination status and sort into the categories in column 8.

Column (7) Lines 101−103 (Interstate Additional Claims):

The software transfers the count of interstate additional claims from Population 3a to Population 3 after both are loaded. The reported count for Lines 101−103 (7) will be higher than the validation count for Population 3 until Population 3a counts are added.

The count of UI interstate additional claims on the RV Summary will be the sum of 3.8−3.14 plus 3.52 (from Population 3a).

The count of UCFE interstate additional claims on the RV Summary will be the sum of 3.17 and 3.53 (from Population 3a).

The count of UCX interstate additional claims on the RV Summary will be the sum of 3.18 and 3.54 (from Population 3a).

4. Summary of Subpopulations:

3.1: These records represent insufficient monetary determinations (ineligible claims).

3.2 – 3.5: These records represent sufficient monetary determinations (eligible claims) with a new benefit year established. These records include monetary information columns 7 – 12 (Date of the Original Monetary, Sufficient/Insufficient, WBA, MBA, Potential Weeks of Duration and Potential Weeks of Maximum Duration)

3.6: These records represent sufficient monetary determinations with no new benefit year established. This applies to states where a new benefit year is not established at the same time that the claim is filed.

3.7: These records represent new claims filed where no monetary determination was issued.

3.8 – 3.14: These records represent interstate liable claims and are assigned to subpopulations using the same logic as subpopulations 3.1 – 3.7.

3.15 – 3.18: These records represent new UCFE/UCX claims. The monetary information columns 7 – 12 (Date of the Original Monetary, Sufficient/Insufficient, WBA, MBA, Potential Weeks of Duration, and Potential Weeks of Maximum Duration) are not required because these claims are not reported on the 218. You may leave data in these fields in the extract file. The software will ignore them.

3.19 – 3.21: These records represent interstate filed from agent state claims. This information comes from the LADT claimant records. Instructions for building the records to be added to the extract file from the LADT detail records can be found in Appendix B, Technical Guidance.

3.22 – 3.24: These records represent interstate claims taken as agent state. These are claims against other states that are filed in your state agency.

3.25 – 3.33: These records represent transitional claims (UI/UCFE/UCX). Transitional UI claims are reported on the 5159 and the 218.

3.34 – 3.37: These records represent new CWC claims. Procedures for validating CWC claims and payments are found in Appendix B.

A new CWC claim occurs when the first IB4 request to transfer wages is sent to another state for a claim.

If the first IB4 for a claim is sent during a quarter and a monetary determination or redetermination is issued using wages from more than one state during that quarter, it constitutes a new CWC claim and a new CWC benefit year.

These records are assigned to subpopulations 3.35 (for intrastate) and 3.37 (for interstate).

If the first IB4 for a claim is sent during a quarter but no monetary determination or redetermination using wages from more than one state is issued during that quarter, then this constitutes an insufficient CWC claim (no new benefit year is established), and these transactions are assigned to subpopulations 3.34 (for intrastate) and 3.36 (for interstate).

There are several reasons why a monetary determination using wages from more than one state may not be issued in the quarter in which the initial IB-4 was sent for a claim:

1) Wages were not found in the other state

2) Wages were found in the other state but not used

3) Wages were found but used in a subsequent quarter

3.38 – 3.39: These transactions represent new CWC benefit years where the new CWC claim was filed in a previous quarter. This occurs when the first monetary determination or redetetermination using wages from more than one state was issued during the quarter but the initial IB4 was sent during a previous quarter.

3.40 – 3.45: These transactions represent new UI claims filed in a quarter prior to the quarter being validated when the initial monetary determination or redetermination which first contains wages from two states was issued during the quarter being validated.

3.46: These transactions represent claims filed under the self-employment program.

3.49 – 3.54: These transactions represent intrastate and interstate additional claims (UI/UCFE/UCX).

5. Commuter Claim

If a claimant commuted from the claimant's residence in another state to a job in your (the liable state) and that person filed directly with your (the liable) state, the claim is reported as an intrastate claim.

VALIDATION POPULATION 4

PAYMENTS/WEEKS COMPENSATED
PAYMENT MAIL DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 (Step 1C) SSN	2 (Step 1C) Check Number Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intra/ Inter	6 (Step 10A) (Step 10B) (Step 10F) (Step 10G) Type of Compensation	7 (Step 10D) (Step 10E) Partial/ Total Weeks of Unemployment	8 (Step 10D) (Step 10E) Earnings	9 (Step 10D) (Step 10E) WBA	10 (Step 12A) UI Amount	11 (Step 12B) UCFE Amount	12 (Step 12C) UCX Amount	13 (Step 12D) CWC Amount	14 (Step 12E) Self-Employ Amount	15 (Step 13) Week End Date	16 (Step 14) Mail Date	17 (Step 15) Time Lapse
FIRST PAYMENTS (4.1 through 4.16) 1) Random sample: 60 or 200; 2) Supplemental sample--missing strata; 3) Supplemental sample--outliers																		
4.1	5159B-301 (14-15) 5159B-302 (14-15) 9050-All-C2			Regular UI	UI only	Intrastate	First Payment	Total			X							
4.2	5159B-301 (14-16) 5159B-302 (14-16) 9050-All-C6			Regular UI	UI only	Interstate	First Payment	Total			X							
4.3	5159B-301 (14, 15, 17) 5159B-302 (14, 15, 17) 9050-All-C2			Regular UI	UI/Federal	Intrastate	First Payment	Total			X	X[a]	X[a]					
4.4	5159B-301 (14-17) 5159B-302 (14-17) 9050-All-C6			Regular UI	UI/Federal	Interstate	First Payment	Total			X	X[a]	X[a]					
4.5	5159B-301 (17-18) 5159B-302 (17-18) 9050-All-C3			Regular UI	UCFE or UCFE/UCX	Intrastate	First Payment	Total				X	X[b]					
4.6	5159B-301 (17-18) 5159B-302 (17-18) 9050-All-C7			Regular UI	UCFE or UCFE/UCX	Interstate	First Payment	Total				X	X[b]					
4.7	5159B-301 (17, 19) 5159B-302 (17, 19) 9050-All-C4			Regular UI	UCX only	Intrastate	First Payment	Total					X					
4.8	5159B-301 (17, 19) 5159B-302 (17, 19) 9050-All-C8			Regular UI	UCX only	Interstate	First Payment	Total					X					
4.9	5159B-301-14 5159B-302-14 9050-Part-C2			Regular UI	UI only	Intrastate	First Payment	Partial			X							
4.10	5159B-301 (14, 16) 5159B-302 (14, 16) 9050-Part-C6			Regular UI	UI only	Interstate	First Payment	Partial			X							
4.11	5159B-301 (14, 17) 5159B-302 (14, 17) 9050-Part-C2			Regular UI	UI/Federal	Intrastate	First Payment	Partial			X	X[a]	X[a]					
4.12	5159B-301 (14, 16, 17) 5159B-302 (14, 16, 17) 9050-Part-C6			Regular UI	UI/Federal	Interstate	First Payment	Partial			X	X[a]	X[a]					
4.13	5159B-301 (17-18) 5159B-302 (17-18) 9050-Part-C3			Regular UI	UCFE or UCFE/UCX	Intrastate	First Payment	Partial				X	X[b]					

VALIDATION POPULATION 4

PAYMENTS/WEEKS COMPENSATED
PAYMENT MAIL DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 *(Step 1C)* SSN	2 *(Step 1C)* Check Number Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intra/ Inter	6 *(Step 10A) (Step 10B) (Step 10F) (Step 10G)* Type of Compensation	7 *(Step 10D) (Step 10E)* Partial/ Total Weeks of Unemployment	8 *(Step 10D) (Step 10E)* Earnings	9 *(Step 10D) (Step 10E)* WBA	10 *(Step 12A)* UI Amount	11 *(Step 12B)* UCFE Amount	12 *(Step 12C)* UCX Amount	13 *(Step 12D)* CWC Amount	14 *(Step 12E)* Self-Employ Amount	15 *(Step 13)* Week End Date	16 *(Step 14)* Mail Date	17 *(Step 15)* Time Lapse
4.14	5159B-301 (17-18) 5159B-302 (17-18) 9050-Part-C7			Regular UI	UCFE or UCFE/UCX	Interstate	First Payment	Partial				X	X[b]					
4.15	5159B-301 (17, 19) 5159B-302 (17, 19) 9050-Part-C4			Regular UI	UCX only	Intrastate	First Payment	Partial					X					
4.16	5159B-301 (17, 19) 5159B-302 (17, 19) 9050-Part-C8			Regular UI	UCX only	Interstate	First Payment	Partial					X					
CONTINUED TOTAL PAYMENTS (4.17 through 4.24) 1) Supplemental sample--outliers																		
4.17	5159B-301 (14-15) 5159B-302 (14-15) 9051-All-C2			Regular UI	UI only	Intrastate	Cont. Payment	Total			X							
4.18	5159B-301 (14-16) 5159B-302 (14-16) 9051-All-C6			Regular UI	UI only	Interstate	Cont. Payment	Total			X							
4.19	5159B-301 (14, 15, 17) 5159B-302 (14, 15, 17) 9051-All-C2			Regular UI	UI/Federal	Intrastate	Cont. Payment	Total			X	X[a]	X[a]					
4.20	5159B-301 (14-17) 5159B-302 (14-17) 9051-All-C6			Regular UI	UI/Federal	Interstate	Cont. Payment	Total			X	X[a]	X[a]					
4.21	5159B-301 (17-18) 5159B-302 (17-18) 9051-All-C3			Regular UI	UCFE or UCFE/UCX	Intrastate	Cont. Payment	Total				X	X[b]					
4.22	5159B-301 (17-18) 5159B-302 (17-18) 9051-All-C7			Regular UI	UCFE or UCFE/UCX	Interstate	Cont. Payment	Total				X	X[b]					
4.23	5159B-301 (17, 19) 5159B-302 (17, 19) 9051-All-C4			Regular UI	UCX only	Intrastate	Cont. Payment	Total					X					
4.24	5159B-301 (17, 19) 5159B-302 (17, 19) 9051-All-C8			Regular UI	UCX only	Interstate	Cont. Payment	Total					X					

VALIDATION POPULATION 4

PAYMENTS/WEEKS COMPENSATED
PAYMENT MAIL DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 (Step 1C) SSN	2 (Step 1C) Check Number Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intra/ Inter	6 (Step 10A) (Step 10B) (Step 10F) (Step 10G) Type of Compensation	7 (Step 10D) (Step 10E) Partial/ Total Weeks of Unemployment	8 (Step 10D) (Step 10E) Earnings	9 (Step 10D) (Step 10E) WBA	10 (Step 12A) UI Amount	11 (Step 12B) UCFE Amount	12 (Step 12C) UCX Amount	13 (Step 12D) CWC Amount	14 (Step 12E) Self-Employ Amount	15 (Step 13) Week End Date	16 (Step 14) Mail Date	17 (Step 15) Time Lapse
CONTINUED PARTIAL PAYMENTS (4.25 through 4.32) 1) Random sample: 30 or 100																		
4.25	5159B-301-14 5159B-302-14 9051-Part-C2			Regular UI	UI only	Intrastate	Cont. Payment	Partial			X							
4.26	5159B-301 (14, 16) 5159B-302 (14, 16) 9051-Part-C6			Regular UI	UI only	Interstate	Cont. Payment	Partial			X							
4.27	5159B-301 (14, 17) 5159B-302 (14, 17) 9051-Part-C2			Regular UI	UI/Federal	Intrastate	Cont. Payment	Partial			X	X[a]	X[a]					
4.28	5159B-301 (14, 16, 17) 5159B-302 (14, 16, 17) 9051-Part-C6			Regular UI	UI/Federal	Interstate	Cont. Payment	Partial			X	X[a]	X[a]					
4.29	5159B-301 (17-18) 5159B-302 (17-18) 9051-Part-C3			Regular UI	UCFE or UCFE/UCX	Intrastate	Cont. Payment	Partial				X	X[b]					
4.30	5159B-301 (17-18) 5159B-302 (17-18) 9051-Part-C7			Regular UI	UCFE or UCFE/UCX	Interstate	Cont. Payment	Partial				X	X[b]					
4.31	5159B-301 (17, 19) 5159B-302 (17, 19) 9051-Part-C4			Regular UI	UCX only	Intrastate	Cont. Payment	Partial					X					
4.32	5159B-301 (17, 19) 5159B-302 (17, 19) 9051-Part-C8			Regular UI	UCX only	Interstate	Cont. Payment	Partial					X					
ADJUSTED PAYMENTS (4.33 through 4.42) 1) Supplemental sample--outliers by dollars																		
4.33	5159B-302 (14-15)			Regular UI	UI only	Intrastate	Adjustment	Total			X							
4.34	5159B-302 (14-16)			Regular UI	UI only	Interstate	Adjustment	Total			X							
4.35	5159B-302 (14, 15, 17)			Regular UI	UI/Federal	Intrastate	Adjustment	Total			X	X[a]	X[a]					
4.36	5159B-302 (14-17)			Regular UI	UI/Federal	Interstate	Adjustment	Total			X	X[a]	X[a]					
4.37	5159B-302 (17-18)			Regular UI	UCFE or UCFE/UCX	NA	Adjustment	NA				X	X[b]					
4.38	5159B-302 (17, 19)			Regular UI	UCX only	NA	Adjustment	NA					X					
4.39	5159B-302-14			Regular UI	UI only	Intrastate	Adjustment	Partial			X							

VALIDATION POPULATION 4

PAYMENTS/WEEKS COMPENSATED
PAYMENT MAIL DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 *(Step 1C)* SSN	2 *(Step 1C)* Check Number Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intra/ Inter	6 *(Step 10A) (Step 10B) (Step 10F) (Step 10G)* Type of Compensation	7 *(Step 10D) (Step 10E)* Partial/ Total Weeks of Unemployment	8 *(Step 10D) (Step 10E)* Earnings	9 *(Step 10D) (Step 10E)* WBA	10 *(Step 12A)* UI Amount	11 *(Step 12B)* UCFE Amount	12 *(Step 12C)* UCX Amount	13 *(Step 12D)* CWC Amount	14 *(Step 12E)* Self-Employ Amount	15 *(Step 13)* Week End Date	16 *(Step 14)* Mail Date	17 *(Step 15)* Time Lapse
4.40	5159B-302 (14, 16)			Regular UI	UI only	Interstate	Adjustment	Partial			X							
4.41	5159B-302 (14, 17)			Regular UI	UI/Federal	Intrastate	Adjustment	Partial			X	X[a]	X[a]					
4.42	5159B-302 (14, 16, 17)			Regular UI	UI/Federal	Interstate	Adjustment	Partial			X	X[a]	X[a]					
SELF-EMPLOYMENT PAYMENTS (4.43) 1) Minimum sample: First two cases																		
4.43	5159B-301-20 5159B-302-20			Regular UI	Self-employ	Both	Self-Employment	NA							X			
CWC FIRST PAYMENTS (4.44 through 4.45) 1) Random sample: 30 or 100																		
4.44	586A-101 (4-5) 586B Column 8 (Total)			Regular UI	NA	Intrastate CWC	First Payment	NA						X				
4.45	586A-102 (4-5) 586B Column 9 (Total)			Regular UI	NA	Interstate CWC	First Payment	NA						X				
CWC CONTINUED PAYMENTS (4.46 through 4.47) 1) Minimum sample: First two cases from each subpopulation																		
4.46	586A-101 (4-5)			Regular UI	NA	Intrastate CWC	Cont. Payment	NA						X				
4.47	586A-102 (4-5)			Regular UI	NA	Interstate CWC	Cont. Payment	NA						X				
CWC ADJUSTED PAYMENTS (4.48 through 4.49) 1) Minimum sample: First two cases from each subpopulation																		
4.48	586A-101-5			Regular UI	NA	Intrastate CWC	Adjustment	NA						X				
4.49	586A-102-5			Regular UI	NA	Interstate CWC	Adjustment	NA						X				

VALIDATION POPULATION 4

PAYMENTS/WEEKS COMPENSATED
PAYMENT MAIL DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 *(Step 1C)* SSN	2 *(Step 1C)* Check Number Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intra/ Inter	6 *(Step 10A) (Step 10B) (Step 10F) (Step 10G)* Type of Compensation	7 *(Step 10D) (Step 10E)* Partial/ Total Weeks of Unemployment	8 *(Step 10D) (Step 10E)* Earnings	9 *(Step 10D) (Step 10E)* WBA	10 *(Step 12A)* UI Amount	11 *(Step 12B)* UCFE Amount	12 *(Step 12C)* UCX Amount	13 *(Step 12D)* CWC Amount	14 *(Step 12E)* Self-Employ Amount	15 *(Step 13)* Week End Date	16 *(Step 14)* Mail Date	17 *(Step 15)* Time Lapse
CWC PRIOR WEEKS COMPENSATED (4.50 through 4.51) 1) Minimum sample: First two cases from each subpopulation																		
4.50	586A-101 (6-7)			Regular UI	NA	Intrastate CWC	Prior Week Comp.	NA						X				
4.51	586A-102 (6-7)			Regular UI	NA	Interstate CWC	Prior Week Comp.	NA						X				

[a]Either the UCFE or UCX amount (or both) must be entered.

[b]There may not be a UCX amount.

NOTE: For Joint Claims, Column 10 represents the UI portion of the payment, and Columns 11 and 12 represent the Federal portion of the payment.

The term supplement includes supplemental payments, partial offset payments, and negative adjustments. Observations reported in all populations of first and continued payments (column 2) will be sorted by time lapse days in ascending order and subtotalled by time lapse categories. Observations reported in all populations of supplemental payments will be sorted by SSN.

RELATIONSHIP BETWEEN VALIDATION SUBPOPULATIONS IN POPULATION 4 AND ETA 9050, ETA 9051, AND ETA 586B PAYMENTS TIME LAPSE

		Intrastate					Interstate			
		Workshare (Total) C1	UI C2	UCFE C3	UCX C4	(586B-TOTAL) CWC (8)	UI C6	UCFE C7	UCX C8	(586B-TOTAL) CWC (9)
All First Payments	**9050 (All)**	52	1, 3, 9, and 11	5 and 13	7 and 15	44	2, 4, 10, and 12	6 and 14	8 and 16	45
Partial First Payments	**9050 (Part)**		9 and 11	13	15		10 and 12	14	16	
All Continued Payments	**9051 (All)**	53	17, 19, 25, and 27	21 and 29	23 and 31		18, 20, 26, and 28	22 and 30	24 and 32	
Partial Continued Payments	**9051 (Part)**		25 and 27	29	31		26 and 28	30	32	

RELATIONSHIP BETWEEN VALIDATION SUBPOPULATIONS IN POPULATION 4 AND ETA 5159B REPORTING CELLS WEEKS COMPENSATED

	State UI Program[a]			UCFE and UCX Programs			Self-employment All Programs (20)
5159 Section B	All Weeks Compensated (14)	Total Unemployment (15)	Interstate (16)	Total (17)	UCFE - No UI (18)	UCX Only (19)	
Number 301	1 - 4 9 - 12 17 - 20 25 - 28	1 - 4 17 - 20	2, 4, 10, 12 18, 20, 26, 28	5 - 8 13 - 16 21 - 24 29 - 32	5 - 6 13 - 14 21 - 22 29 - 30	7 - 8 15 - 16 23 - 24 31 - 32	43
Amount 302	Column 10 1 - 4 9 - 12 17 - 20 25 - 28 33 - 36 39 - 42	Column 10 1 - 4 17 - 20 33 - 36	Column 10 2, 4, 10, 12 18, 20, 26, 28 34, 36, 40, 42	Columns 11 & 12 3 - 8 11 - 16 19 - 24 27 - 32 35 - 38 41 - 42	Column 11[b] 5 - 6 13 - 14 21 - 22 29 - 30 37	Column 12[c] 7 - 8 15 - 16 23 - 24 31 - 32 38	43

[a]If joint claim, then only includes the UI share of the payment.
[b]Includes all payments from UCFE funds.
[c]Includes all payments from UCX funds.

RELATIONSHIP BETWEEN VALIDATION SUBPOPULATIONS IN POPULATION 4 AND ETA 586A REPORTING CELLS

PAYMENT ACTIVITY

State UI	Line No.	Weeks Compensated (4)	Benefits Paid (5)	Prior Weeks Compensated (6)	Prior Benefits Paid (7)
Intrastate	101	44 and 46	44, 46, 48	50	50
Interstate Recvd. as Paying State	102	45 and 47	45, 47, 49	51	51

Population 4 Notes

1. The First Payment time lapse performance measure (as reported on the 9050 Report) uses a different definition of first payment than the definition of first payment used on the 5159 report. The 9050 measure uses the first compensable week rather than the first week compensated.

   First payments are payments for the first compensable week in the benefit year after the waiting week where there were no excessive earnings. Because it is driven by the week paid, it is possible that the first payment date could fall after other payments have been made on the claim.

   The 5159 counts (which are currently not validated) use the first week compensated (earliest payment date on the claim).

2. Adjusted Payments (Subpopulations 4.33 – 4.42): These are payments for weeks that have previously been compensated. The initial payment for the week is counted as a week compensated, and only additional payments for the same week are considered adjustments. These are reported on row 302 (section B) of the 5159 only. Only dollar amounts are included. These payments are not counted as weeks compensated in row 301 (section B) of the 5159 nor are they included on the 9050 or 9051 reports.

3. Self-employment: These payments are reported twice. They are reported as self-employment and also as part of the regular program; therefore, they must be extracted twice.

4. CWC prior weeks compensated (Subpopulations 4.50 – 4.51): The software allows the state to check the integrity of the files by using date ranges. For example, the 5159 is a monthly report, and the dates must be within the month being validated. CWC prior weeks compensated payment dates will not fall during the same month being validated, and the software will not accept these records since the dates will not fall in the date range. The way around this is to set a begin date that will cover the earliest CWC prior weeks.

5. Joint Payments: In situations where a payment for a joint claim is made that does not use funds from more than one program, that payment is not considered joint and should be reported as UI, UCFE, or UCX.

6. Timing: Set the sign in dates for a quarter to allow the validation counts (from Subpopulations 4.44 to 4.51) to match a quarterly CWC 586 report. For the other subpopulations, select one month from within the quarter to load and validate. Records labeled “CWC Prior Weeks Compensated” (subpopulations 4.50 and 4.51) will have payment dates prior to the quarter, but the software will allow those to import.

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 *(Step 1D)* SSN	2 *(Step 1D)* Issue Number (Unique ID)	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/ Interstate	6 *(Step 16)* Determination/ Redetermination	7 *(Step 17)* Single Claimant Multi-claimant[a]	8 *(Step 18)* Issue Types	9 *(Step 19)* First Week Affected	10 *(Step 20)* Detection Date	11 *(Step 21)* Notice Date	12 *(Step 22A)* T.L. 1 Detection Notice	13 *(Step 22B)* T.L. 2 Week Affected Detection	14 *(Step 23)* Allow[b] Deny
SINGLE CLAIMANT NON-MONETARY DETERMINATIONS (5.1 through 5.60) 1) Random sample: 30 or 100; 2) Supplemental sample--missing strata; 3) Supplemental sample--outliers															
5.1	207: A 101-2; B 201-8 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	VL						Allow
5.2	207: A 101-2; B 201-9 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	MC						Allow
5.3	207: A 101-2; B 201-10 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	Sep/Other						Allow
5.4	207: A 101-2; C 301-12 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	A & A						Allow
5.5	207: A 101-2; C 301-13 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Ded. Income						Allow
5.6	207: A 101-2; C 301-14 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Suitable Work						Allow
5.7	207: A 101-2; C 301-15 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Reporting						Allow

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.8	207: A 101-2; C 301-16 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Profiling						Allow
5.9	207: A 101-2; C 301-17 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Other Nonsep						Allow
5.10	207: A 101-2; B 201-8 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	VL						Allow
5.11	207: A 101-2; B 201-9 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	MC						Allow
5.12	207: A 101-2; B 201-10 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	Sep/Other						Allow
5.13	207: A 101-2; C 301-12 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	A & A						Allow
5.14	207: A 101-2; C 301-13 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Ded. Income						Allow
5.15	207: A 101-2; C 301-14 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Suitable Work						Allow

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.16	207: A 101-2; C 301-15 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Reporting						Allow
5.17	207: A 101-2; C 301-16 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Profiling						Allow
5.18	207: A 101-2; C 301-17 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Other Nonsep						Allow
5.19	207A: 101-2; 102-2 207B: 201-8; 202-8 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	VL						Deny
5.20	207A: 101-2; 102-2 207B: 201-9; 202-9 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	MC						Deny
5.21	207A: 101-2; 102-2 207B: 201-10; 202-10 9052A-C2; 9053A-C2			Regular UI	UI	Intrastate	Determination	Single	Sep/Other						Deny
5.22	207A: 101-2; 102-2 207C: 301-12; 302-12 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	A & A						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.23	207A: 101-2; 102-2 207C: 301-13; 302-13 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Ded. Income						Deny
5.24	207A: 101-2; 102-2 207C: 301-14; 302-14 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Suitable Work						Deny
5.25	207A: 101-2; 102-2 207C: 301-15; 302-15 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Reporting						Deny
5.26	207A: 101-2; 102-2 207C: 301-16; 302-16 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Profiling						Deny
5.27	207A: 101-2; 102-2 207C: 301-17; 302-17 9052B-C98; 9053B-C98			Regular UI	UI	Intrastate	Determination	Single	Other Nonsep						Deny
5.28	207A: 101-2; 102-2 207B: 201-8; 202-8 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	VL						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.29	207A: 101-2; 102-2 207B: 201-9; 202-9 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	MC						Deny
5.30	207A: 101-2; 102-2 207B: 201-10; 202-10 9052A-C6; 9053A-C6			Regular UI	UI	Interstate	Determination	Single	Sep/Other						Deny
5.31	207A: 101-2; 102-2 207C: 301-12; 302-12 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	A & A						Deny
5.32	207A: 101-2; 102-2 207C: 301-13; 302-13 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Ded. Income						Deny
5.33	207A: 101-2; 102-2 207C: 301-14; 302-14 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Suitable Work						Deny
5.34	207A: 101-2; 102-2 207C: 301-15; 302-15 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Reporting						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.35	207A: 101-2; 102-2 207C: 301-16; 302-16 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Profiling						Deny
5.36	207A: 101-2; 102-2 207C: 301-17; 302-17 9052B-C102; 9053B-C102			Regular UI	UI	Interstate	Determination	Single	Other Nonsep						Deny
5.37	207: A 103-1; B 203-8 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	VL						Allow
5.38	207: A 103-1; B 203-9 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	MC						Allow
5.39	207: A 103-1; B 203-10 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	Sep/Other						Allow
5.40	207A-103-1 9052B-C99; 9053B-C99			Regular UI	UCFE	Intrastate	Determination	Single	Nonsep						Allow
5.41	207: A 103-1; B 203-8 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	VL						Allow
5.42	207: A 103-1; B 203-9 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	MC						Allow

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.43	207: A 103-1; B 203-10 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	Sep/Other						Allow
5.44	207A-103-1 9052B-C103; 9053B-C103			Regular UI	UCFE	Interstate	Determination	Single	Other Nonsep						Allow
5.45	207A: 103-1; 104-1 207B: 203-8; 204-8 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	VL						Deny
5.46	207A: 103-1; 104-1 207B: 203-9; 204-9 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	MC						Deny
5.47	207A: 103-1; 104-1 207B: 203-10; 204-10 9052A-C3; 9053A-C3			Regular UI	UCFE	Intrastate	Determination	Single	Sep/Other						Deny
5.48	207A: 103-1; 104-1 9052B-C99; 9053B-C99			Regular UI	UCFE	Intrastate	Determination	Single	Other Nonsep						Deny
5.49	207A: 103-1; 104-1 207B: 203-8; 204-8 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	VL						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.50	207A: 103-1; 104-1 207B: 203-9; 204-9 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	MC						Deny
5.51	207A: 103-1; 104-1 207B: 203-10; 204-10 9052A-C7; 9053A-C7			Regular UI	UCFE	Interstate	Determination	Single	Sep/Other						Deny
5.52	207A: 103-1; 104-1 9052B-C103; 9053B-C103			Regular UI	UCFE	Interstate	Determination	Single	Nonsep						Deny
5.53	207A-105-1 9052A-C4; 9053A-C4			Regular UI	UCX	Intrastate	Determination	Single	Sep						Allow
5.54	207A-105-1 9052B-C100; 9053B-C100			Regular UI	UCX	Intrastate	Determination	Single	Nonsep						Allow
5.55	207A-105-1 9052A-C8; 9053A-C8			Regular UI	UCX	Interstate	Determination	Single	Sep						Allow
5.56	207A-105-1 9052B-C104; 9053B-C104			Regular UI	UCX	Interstate	Determination	Single	Nonsep						Allow
5.57	207A: 105-1; 106-1 9052A-C4; 9053A-C4			Regular UI	UCX	Intrastate	Determination	Single	Sep						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 (Step 1D) SSN	2 (Step 1D) Issue Number (Unique ID)	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 16) Determination/ Redetermination	7 (Step 17) Single Claimant Multi-claimant[a]	8 (Step 18) Issue Types	9 (Step 19) First Week Affected	10 (Step 20) Detection Date	11 (Step 21) Notice Date	12 (Step 22A) T.L. 1 Detection Notice	13 (Step 22B) T.L. 2 Week Affected Detection	14 (Step 23) Allow[b] Deny
5.58	207A: 105-1; 106-1 9052B-C100; 9053B-C100			Regular UI	UCX	Intrastate	Determination	Single	Nonsep						Deny
5.59	207A: 105-1; 106-1 9052A-C8; 9053A-C8			Regular UI	UCX	Interstate	Determination	Single	Sep						Deny
5.60	207A: 105-1; 106-1 9052B-C104; 9053B-C104			Regular UI	UCX	Interstate	Determination	Single	Nonsep						Deny
MULTI-CLAIMANT NON-MONETARY DETERMINATIONS (5.61 through 5.64) 1) Minimum Sample: First two cases from each subpopulation															
5.61	207A-101-5 9052C-C193; 9053C-C193			Regular UI			Determination	Multi	Labor Dispute						Allow
5.62	207A: 101-5; 102-5 9052C-C193; 9053C-C193			Regular UI			Determination	Multi	Labor Dispute						Deny
5.63	207A-101-6 9052C-C194; 9053C-C194			Regular UI			Determination	Multi	Other						Allow
5.64	207A: 101-6; 102-6 9052C-C194; 9053C-C194			Regular UI			Determination	Multi	Other						Deny

VALIDATION POPULATION 5

NON-MONETARY DETERMINATIONS AND REDETERMINATIONS
NOTICE DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Sub pop #	Report, Line, and Column	1 *(Step 1D)* SSN	2 *(Step 1D)* Issue Number (Unique ID)	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/ Interstate	6 *(Step 16)* Determination/ Redetermination	7 *(Step 17)* Single Claimant Multi-claimant[a]	8 *(Step 18)* Issue Types	9 *(Step 19)* First Week Affected	10 *(Step 20)* Detection Date	11 *(Step 21)* Notice Date	12 *(Step 22A)* T.L. 1 Detection Notice	13 *(Step 22B)* T.L. 2 Week Affected Detection	14 *(Step 23)* Allow[b] Deny
REDETERMINATIONS (5.65 through 5.70) 1) Random Sample: 30 or 100															
5.65	207A-101-3			Regular UI	UI	Both	Redetermination	Single	All						Allow
5.66	207A: 101-3; 102-3			Regular UI	UI	Both	Redetermination	Single	All						Deny
5.67	207A-103-1			Regular UI	UCFE	Both	Redetermination	Single	All						Allow
5.68	207A: 103-1; 104-1			Regular UI	UCFE	Both	Redetermination	Single	All						Deny
5.69	207A-105-1			Regular UI	UCX	Both	Redetermination	Single	All						Allow
5.70	207A: 105-1; 106-1			Regular UI	UCX	Both	Redetermination	Single	All						Deny

[a]For multiclaimants, include the number of claimants involved.
[b]Allow or affirmed

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 5 AND ETA 207 REPORTING CELLS

207 SECTION A			Total dets and redets (1)	dets (2)	redets (3)	multi-labor (5)	multi-other (6)
UI	Dets	101		1-36	65-66	61-62	63-64
UI	Denials	102		19-36	66	62 (Column 7)[a]	64 (Column 7)[a]
UCFE	Dets	103	37-52 67-68				
UCFE	Denials	104	45-52 68				
UCX	Dets	105	53-60 69-70				
UCX	Denials	106	57-60 70				

207 SECTION B			Total Seps (7)	VL (8)	MC (9)	Other Sep (10)
UI	Dets	201	1, 10 19, 28	2, 11 20, 29	3, 12 21, 30
UI	Denials	202	19, 28	20, 29	21, 30
UCFE	Dets	203	37, 41 45, 49	38, 42 46, 50	39, 43 47, 51
UCFE	Denials	204	45, 49	46, 50	47, 51

207 SECTION C			Total Nonseps (11)	A & A (12)	Ded. Income (13)	Suit. Work (14)	Reporting (15)	Profiling (16)	Other (17)
UI	Dets	301	4, 13, 22, 31	5, 14, 23, 32	6, 15, 24, 33	7, 16, 25, 34	8, 17, 26, 35	9, 18, 27, 36
UI	Denials	302	22, 31	23, 32	24, 33	25, 34	26, 35	27, 36

[a]Add the number of multiclaimants involved.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 5 AND ETA 9052 AND 9053 ADJUDICATIONS TIME LAPSE REPORTING CELLS

		Separation 9052A 9053A						Non-Separation 9052B 9053B						Labor Dispute	Other
		Intrastate			Interstate			Intrastate			Interstate				
		UI C2	UCFE C3	UCX C4	UI C6	UCFE C7	UCX C8	UI C98	UCFE C99	UCX C100	UI C102	UCFE C103	UCX C104	C193	C194
Single Claimant	9052	1-3	37-39	53	10-12	41-43	55	4-9	40	54	13-18	44	56		
	9053	19-21	45-47	57	28-30	49-51	59	22-27	48	58	31-36	52	60		
Multi-claimant	9052C													61	63
	9053C													62	64

NOTE: There are 11 time lapse categories in each of these table cells.

Population 5 Notes

1. For states that require a week to be claimed in order to count non-monetary determinations, use the transaction date of the non-monetary determination when the mail date precedes the week claimed date. For example, if a determination is mailed in December and the week is claimed in January, the state enters the transaction (or countable) date in January to signify that this non-monetary determination is countable for Federal reporting purposes.

2. Columns 12 and 13 (Steps 22A and 22B), Time Lapse: It is not necessary to fill in the time lapse. This will be automatically calculated by the validation software.

3. This population includes non-monetary determinations for Short Time Compensation (STC) Program (workshare) claims. These records should be labeled as "Workshare" for "Type of UI Program." See the software record layouts for more detail.

4. **Multiclaimant Nonmonetary Determinations to deny benefits** are counted in two ways on the ETA 207 Report. Section A 101(6) counts the number of determinations. Section A 102(6) counts the number of claimants. Currently the software does not distinguish between the number of claimants and the number of determinations. If a single record representing a determination is entered, the count of determinations will be correct; however, the count of *claimants involved in* denials will be incorrect. Likewise, if ten records representing ten claimants are entered, the count of denials will be correct; however, the count of determinations will be incorrect.

   The software will be revised in the future so that multiclaimant determinations to deny benefits will be counted by both the number of determinations and the number of claimants in the same way that it is currently done for all multiclaimant appeals reported on the ETA 5130 (Populations 8 and 9).

   In the meantime, enter a record for each claimant in a multiclaimant determination to deny benefits. The number of multiclaimant denials will be correct although the number of determinations will be incorrect. Indicate in the comments field of the RV spreadsheet that the discrepancy is due to a software limitation and is not a state error.

VALIDATION POPULATION 6

CLAIMANTS INVOLVED IN STATE UI APPEALS FILED - LOWER

Subpop #	ETA ar5130B Line and Column	1 *(Step 1E)* SSN	2 *(Step 1E)* Docket Number Unique ID	3 *(Step 24A)* Lower Authority Appeal	4 *(Step 25A)* *(Step 25B)* Single or Multiclaimant	5 *(Step 25B)* Number of Claimants	6 *(Step 32)* Date Filed
LOWER AUTHORITY APPLEALS FILED (6.1 through 6.2) 1) Minimum sample: First two cases from each subpopulation							
6.1	200-8				Single Claimant	NA	
6.2	200-10				Number of Claimants Involved in Multiclaimant Appeal[a]	≥ 1	

[a]States can list each claimant involved in multiclaimant appeals or just provide the number of claimants based on how the files are stored in the system.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 6 AND ETA AR5130B REPORTING CELLS

Line No.	Status of Appeals	Number of Claimants Involved in State UI Single Claimant Appeals	Number of Claimants Involved in State UI Multi-Claimant Appeals
		Lower Authority (8)	Lower Authority (10)
200	Filed During Month	1	2

VALIDATION POPULATION 7

CLAIMANTS INVOLVED IN STATE UI APPEALS FILED - HIGHER

Subpop #	ETA ar5130B Line and Column	1 *(Step 1E)* SSN	2 *(Step 1E)* Docket Number Unique ID	3 *(Step 24B)* Higher Authority Appeal	4 *(Step 25A)* *(Step 25B)* Single or Multiclaimant	5 *(Step 25B)* Number of Claimants	6 *(Step 32)* Date Filed
HIGHER AUTHORITY APPEALS FILED (7.1 through 7.2) 1) Minimum sample: First two cases from each subpopulation							
7.1	200-9				Single Claimant	NA	
7.2	200-11				Number of Claimants Involved in Multiclaimant Appeal[a]	≥ 1	

[a]States can list each claimant involved in multiclaimant appeals or just provide the number of claimants based on how the files are stored in the system.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 7 AND ETA AR5130B REPORTING CELLS

Line No.	Status of Appeals	Number of Claimants Involved in State UI Single Claimant Appeals	Number of Claimants Involved in State UI Multi-Claimant Appeals
		Higher Authority (9)	Higher Authority (11)
200	Filed During Month	1	2

Population 6 and 7 Notes

1. Appeal File Date: If a state experiences delays in mailed appeals, it can use the received date rather than the postmark date to ensure that all appeals are counted. The received date can be used because there is no time lapse for this population. This would help in those situations where appeals are received after the 5130 report has been run for the previous month. For example, an appeal with a postmark of 3/31/02 that is received on 4/10/02, in a state where the 5130 was run on 4/7/02, would be reported as having been filed in April rather than in March.

2. Subpopulation 6.2, Number of Claimants Involved in Multi-Claimant Appeal: States will either store an individual record for each claimant involved in the appeal or one record with the number of claimants. The software will count the number of records or add the number of claimants in column 4 to derive the number of claimants involved in multi-claimant appeals filed.

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
SINGLE CLAIMANT LOWER AUTHORITY APPEALS DECISIONS (8.1 through 8.44) 1) Random sample: 60 or 200 (includes review of folders); 2) Supplemental sample--missing strata (8.33 through 8.40 only); 3) Supplemental sample--outliers																
8.1	ar5130: A-100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-21 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	Yes					V.L.
8.2	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-21 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	Yes					V.L.
8.3	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-21 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	No					V.L.
8.4	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-21 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	No					V.L.
8.5	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-21 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	Yes					V.L.
8.6	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-21 9054A-C3			Reg. UI	UI	Interstate		S		Employer	Yes					V.L.
8.7	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-21 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	No					V.L.

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
8.8	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-21 9054A-C3			Reg. UI	UI	Interstate		S		Employer	No					V.L.
8.9	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-22 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	Yes					M.C.
8.10	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-22 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	Yes					M.C.
8.11	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-22 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	No					M.C.
8.12	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-22 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	No					M.C.
8.13	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-22 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	Yes					M.C.

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
8.14	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-22 9054A-C3			Reg. UI	UI	Interstate		S		Employer	Yes					M.C.
8.15	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-22 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	No					M.C.
8.16	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-22 9054A-C3			Reg. UI	UI	Interstate		S		Employer	No					M.C.
8.17	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-23 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	Yes					Suit.
8.18	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-23 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	Yes					Suit.
8.19	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-23 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	No					Suit.
8.20	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-23 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	No					Suit.
8.21	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-23 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	Yes					Suit.

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
8.22	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-23 9054A-C3			Reg. UI	UI	Interstate		S		Employer	Yes					Suit.
8.23	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-23 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	No					Suit.
8.24	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-23 9054A-C3			Reg. UI	UI	Interstate		S		Employer	No					Suit.
8.25	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-24 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	Yes					A & A
8.26	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-24 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	Yes					A & A
8.27	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-24 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	No					A & A
8.28	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-24 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	No					A & A
8.29	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-24 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	Yes					A & A

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 *(Step 1E)* SSN	2 *(Step 1E)* Docket # Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/ Interstate	6 *(Step 24A)* Lower Authority Appeal	7 *(Step 25A)* *(Step 25B)* Single Claimant Multi-claimant	8 *(Step 25B)* Multi-claimants	9 *(Step 26)* Appellant	10 *(Step 27)* In Favor of Appellant	11 *(Step 32)* Filed Date	12 *(Step 28)* Decision Date	13 *(Step 29A)* Time Lapse	14 *(Step 30A)* Disposed of by Decision	15 *(Step 31)* Issue Code
8.30	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-24 9054A-C3			Re g. UI	UI	Interstate		S		Employer	Yes					A & A
8.31	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-24 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	No					A & A
8.32	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-24 9054A-C3			Reg. UI	UI	Interstate		S		Employer	No					A & A
8.33	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	Yes					Other

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
8.34	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	Yes					Other
8.35	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-26 9054A-C2			Reg. UI	UI	Intrastate		S		Claimant	No					Other
8.36	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-26 9054A-C2			Reg. UI	UI	Intrastate		S		Employer	No					Other
8.37	ar5130: A 100-1; B 210-8 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	Yes					Other
8.38	ar5130: A 100-1; B 210-8 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C3			Reg. UI	UI	Interstate		S		Employer	Yes					Other
8.39	ar5130: A 100-1; B 210-8 ar5130: C 300-14; D 400-26 9054A-C3			Reg. UI	UI	Interstate		S		Claimant	No					Other
8.40	ar5130: A 100-1; B 210-8 ar5130: C 300-16; D 400-26 9054A-C3			Reg. UI	UI	Interstate		S		Employer	No					Other
8.41[a]	ar5130A-100-3 9054A-C2			Reg. UI	UCFE	Intrastate		S								
8.42[a]	ar5130A-100-3 9054A-C3			Reg. UI	UCFE	Interstate		S								
8.43[a]	ar5130A-100-5 9054A-C2			Reg. UI	UCX	Intrastate		S								

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24A) Lower Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision	15 (Step 31) Issue Code
8.44[a]	ar5130A-100-5 9054A-C3			Reg. UI	UCX	Interstate		S								
MULTI-CLAIMANT LOWER AUTHORITY APPEALS DECISIONS (8.45 through 8.55) 1) Minimum sample: First two cases from each subpopulation (includes review of folders)																
8.45	ar5130: A 100-1; B 210-10 ar5130C: 300-14; 310-14 ar5130D-400-25 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Claimant	Yes					Labor Disp.
8.46	ar5130: A 100-1; B 210-10 ar5130C: 300-16; 310-16 ar5130D-400-25 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Employer	Yes					Labor Disp.
8.47	ar5130: A 100-1; B 210-10 ar5130: C 300-14; D 400-25 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Claimant	No					Labor Disp.
8.48	ar5130: A 100-1; B 210-10 ar5130: C 300-16; D 400-25 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Employer	No					Labor Disp.
8.49	ar5130: A 100-1; B 210-10 ar5130C: 300-14; 310-14 ar5130D-400-26 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Claimant	Yes					Other
8.50	ar5130: A 100-1; B 210-10 ar5130C: 300-16; 310-16 ar5130D-400-26 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Employer	Yes					Other
8.51	ar5130: A 100-1; B 210-10 ar5130: C 300-14; D 400-26 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Claimant	No					Other

VALIDATION POPULATION 8

LOWER AUTHORITY APPEALS DECISIONS
DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD
SORT BY TIME LAPSE DAYS ASCENDING

Subpop	Report, Line, and Column	1 *(Step 1E)* SSN	2 *(Step 1E)* Docket # Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/ Interstate	6 *(Step 24A)* Lower Authority Appeal	7 *(Step 25A)* *(Step 25B)* Single Claimant Multi-claimant	8 *(Step 25B)* Multi-claimants	9 *(Step 26)* Appellant	10 *(Step 27)* In Favor of Appellant	11 *(Step 32)* Filed Date	12 *(Step 28)* Decision Date	13 *(Step 29A)* Time Lapse	14 *(Step 30A)* Disposed of by Decision	15 *(Step 31)* Issue Code
8.52	ar5130: A 100-1; B 210-10 ar5130: C 300-16; D 400-26 9054A-C2			Reg. UI	UI	Intrastate		M-1 M-Lead	≥ 1	Employer	No					Other
8.53	ar5130B-210-10			Reg. UI	UI	Intrastate		M-Nonlead	≥ 1							
8.54	ar5130A: 100-1 ar5130B: 210-8; 210-10 ar5130C: 300-18; 310-18 9054A-C2			Reg. UI	UI	Intrastate		S	All	Other	Yes					
8.55	ar5130A: 100-1 ar5130B: 210-8; 210-10 ar5130C: 300-18 9054A-C2			Reg. UI	UI	Intrastate		S	All	Other	No					

[a]If a UCFE or UCX multiclaimant appeal is decided, report as a separate population and manually validate the 5130 report.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 8 AND ETA AR5130 REPORTING CELLS

SECTION A. Single Claimant and Multiclaimant Appeals Case Decisions and Other Dispositions

	UI Decisions	UCFE-No UI Decsisions	UCX Only Decisions
Line No.	Lower Authority (1)	Lower Authority (3)	Lower Authority (5)
100	1-40 45-52 54-55	41-42[a]	43-44[a]

SECTION B. Claimants Involved in State UI Appeals Cases by Status of Appeals

		Single Claimant Appeals	Multi-Claimant Appeals
Line No.	Status of Appeals	Lower Authority (8)	Lower Authority (10)
210	Disposed of During Month	1-40 54-55[b]	45-53

SECTION C. State UI Appeals Decisions by Type of Appellant

		Claimant	Employer	Other
Line No.	UI Appeals Decisions	Lower Authority (14)	Lower Authority (16)	Lower Authority (18)
300	Total	1, 3, 5, 7 9, 11, 13, 15 17, 19, 21, 23 25, 27, 29, 31 33, 35, 37, 39 45, 47, 49, 51	2, 4, 6, 8 10, 12, 14, 16 18, 20, 22, 24 26, 28, 30, 32 34, 36, 38, 40 46, 48, 50, 52	54-55
310	In favor of Appellant	1, 5. 9, 13 17, 21, 25, 29 33, 37. 45, 49	2, 6, 10, 14 18, 22, 26, 30 34, 38, 46, 50	54

SECTION D. Number of Lower Authority State UI Appeals Decisions by Issue

Line No.	Voluntary Quit (21)	Misconduct (22)	Refusal of Suitable Work (23)	Not Able or Available (24)	Labor Dispute (25)	Other (26)
400	1-8	9-16	17-24	25-32	45-48	33-40 49-52

[a]Also includes multiclaimant UCFE and UCX decision subpopulations that are not listed.

[b]Single claimant only

[c]Multiclaimant only

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 8 AND ETA 9054A REPORTING CELLS

Section A. Lower Authority Appeals Time Lapse from Date Filed to Decision Date

Days	Intrastate	Interstate
Total	C2	C3
	1-4 9-12 17-20 25-28 33-36 41, 43 45-52 54-55	5-8 13-16 21-24 29-32 37-40 42, 44

VALIDATION POPULATION 9

HIGHER AUTHORITY APPEALS DECISIONS, DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 (Step 1F) SSN	2 (Step 1F) Docket Number Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24B) Higher Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision
SINGLE CLAIMANT HIGHER AUTHORITY APPEALS DECISIONS (9.1 through 9.12) 1) Random sample: 30 or 100 (includes review of folders); 2) Supplemental sample--outliers															
9.1	ar5130: A 100-2 B 210-9 ar5130C: 300-15 310-15 9054B-C2			Reg. UI	UI	Intra		S	NA	Claimant	Yes				
9.2	ar5130: A 100-2 B 210-9 ar5130C: 300-17 310-17 9054B-C2			Reg. UI	UI	Intra		S	NA	Employer	Yes				
9.3	ar5130: A 100-2 B 210-9 ar5130C-300-15 9054B-C2			Reg. UI	UI	Intra		S	NA	Claimant	No				
9.4	ar5130: A 100-2 B 210-9 ar5130C-300-17 9054B-C2			Reg. UI	UI	Intra		S	NA	Employer	No				
9.5	ar5130: A 100-2 B 210-9 ar5130C: 300-15 310-15 9054B-C3			Reg. UI	UI	Inter		S	NA	Claimant	Yes				
9.6	ar5130: A 100-2 B 210-9 ar5130C: 300-17 310-17 9054B-C3			Reg. UI	UI	Inter		S	NA	Employer	Yes				
9.7	ar5130: A 100-2 B 210-9 ar5130C-300-15 9054B-C3			Reg. UI	UI	Inter		S	NA	Claimant	No				

VALIDATION POPULATION 9

HIGHER AUTHORITY APPEALS DECISIONS, DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 *(Step 1F)* SSN	2 *(Step 1F)* Docket Number Unique ID	3 *(Step 2)* Type of UI Program	4 *(Step 4)* Program Type	5 *(Step 5)* Intrastate/ Interstate	6 *(Step 24B)* Higher Authority Appeal	7 *(Step 25A)* *(Step 25B)* Single Claimant Multi-claimant	8 *(Step 25B)* Multi-claimants	9 *(Step 26)* Appellant	10 *(Step 27)* In Favor of Appellant	11 *(Step 32)* Filed Date	12 *(Step 28)* Decision Date	13 *(Step 29A)* Time Lapse	14 *(Step 30A)* Disposed of by Decision
9.8	ar5130: A 100-2 B 210-9 ar5130C-300-17 9054B-C3			Reg. UI	UI	Inter		S	NA	Employer	No				
9.9[a]	ar5130A-100-4 9054B-C2			Reg. UI	UCFE	Intra		S	NA	NA	NA				
9.10[a]	ar5130A-100-4 9054B-C3			Reg. UI	UCFE	Inter		S	NA	NA	NA				
9.11[a]	ar5130A-100-6 9054B-C2			Reg. UI	UCX	Intra		S	NA	NA	NA				
9.12[a]	ar5130A-100-6 9054B-C3			Reg UI	UCX	Inter		S	NA	NA	NA				
MULTI-CLAIMANT HIGHER AUTHORITY APPEALS DECISIONS (9.13 through 9.23) 1) Minimum sample: First two cases from each subpopulation (includes review of folders)															
9.13	ar5130: A 100-2 B 210-11 ar5130C: 300-15 310-15 9054B-C2			Reg. UI	UI	Intra		M-1 M-Lead	≥ 1	Claimant	Yes				
9.14	ar5130: A 100-2 B 210-11 ar5130C: 300-17 310-17 9054B-C2			Reg. UI	UI	Intra		M-1 M-Lead	≥ 1	Employer	Yes				
9.15	ar5130: A 100-2 B 210-11 ar5130C-300-15 9054B-C2			Reg. UI	UI	Intra		M-1 M-Lead	≥ 1	Claimant	No				
9.16	ar5130: A 100-2 B 210-11 ar5130C-300-17 9054B-C2			Reg. UI	UI	Intra		M-1 M-Lead	≥ 1	Employer	No				

VALIDATION POPULATION 9

HIGHER AUTHORITY APPEALS DECISIONS, DECISION DATE FALLS WITHIN REPORTING/VALIDATION PERIOD

Subpop #	Report, Line, and Column	1 (Step 1F) SSN	2 (Step 1F) Docket Number Unique ID	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Intrastate/ Interstate	6 (Step 24B) Higher Authority Appeal	7 (Step 25A) (Step 25B) Single Claimant Multi-claimant	8 (Step 25B) Multi-claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	11 (Step 32) Filed Date	12 (Step 28) Decision Date	13 (Step 29A) Time Lapse	14 (Step 30A) Disposed of by Decision
9.17	ar5130: A 100-2 B 210-11 ar5130C: 300-15 310-15 9054B-C3			Reg. UI	UI	Inter		M-1 M-Lead	≥ 1	Claimant	Yes				
9.18	ar5130: A 100-2 B 210-11 ar5130C: 300-17 310-17 9054B-C3			Reg. UI	UI	Inter		M-1 M-Lead	≥ 1	Employer	Yes				
9.19	ar5130: A 100-2 B 210-11 ar5130C-300-15 9054B-C3			Reg. UI	UI	Inter		M-1 M-Lead	≥ 1	Claimant	No				
9.20	ar5130: A 100-2 B 210-11 ar5130C-300-17 9054B-C3			Reg. UI	UI	Inter		M-1 M-Lead	≥ 1	Employer	No				
9.21	ar5130B-210-11			Reg. UI	UI			M-Nonlead	1						
9.22	ar5130A: 100-2 ar5130B: 210-9 210-11 ar5130C: 300-19 9054B-C2			Reg. UI	UI	Intra		S		Other	All				
9.23	ar5130A: 100-2 ar5130B: 210-9 210-11 ar5130C: 300-19 9054B-C2			Reg. UI	UI	Intra		M	≥ 1	Other	All				

[a]If a UCFE or UCX multiclaimant appeal is decided, report as a separate population.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 9 AND AR5130 REPORTING CELLS

SECTION A. Single Claimant and Multiclaimant Appeals Case Decisions and Other Dispositions

	UI Decisions	UCFE-No UI Decisions	UCX Only Decisions
Line No.	Higher Authority (2)	Higher Authority (4)	Higher Authority (6)
100	1-8 13-20 22-23	9-10[a]	11-12[a]

SECTION B. Claimants Involved in State UI Appeals Cases by Status of Appeals

		Single Claimant Appeals	Multi-Claimant Appeals
Line No.	Status of Appeals	Higher Authority (9)	Higher Authority (11)
210	Disposed of During Month	1-8 22[b]	13-21 23[c]

SECTION C. State UI Appeals Decisions by Type of Appellant

		Claimant	Employer	Other
Line No.	UI Appeals Decisions	Higher Authority (15)	Higher Authority (17)	Higher Authority (19)
300	Total	1, 3 5, 7 13, 15 17, 19	2, 4 6, 8 14, 16 18, 20	22-23
310	In favor of Appellant	1, 5 13, 17	2, 6 14, 18	

[a]Also includes multiclaimant UCFE and UCX decisions subpopulations that are not listed.

[b]Single claimant only

[c]Multiclaimant only

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 9 AND ETA 9054B REPORTING CELLS

Section B. Higher Authority Appeals Time Lapse from Date Filed to Decision Date

Days	Intrastate	Interstate
Total	C2	C3
	1-4 9, 11 13-16 22-23	5-8 10, 12 17-20

Population 8 and 9 Notes

1. Column 7 (Step 25B), Multi-Claimant appeals:

   States will either store an individual record for each appeal or one record with the number of appellants. States that maintain a single record for multi-claimant appeals with a field for the number of claimants involved should insert a text prefix of multi-one (for multi-one record) in the multi-claimant field.

   States which maintain multiple records (one for each claimant) for a multi-claimant appeal should insert a text prefix of "multi-lead" for one of the records. Both of these types of records will be assigned to subpopulations 8.45 through 8.52 (lower) and 9.13 through 9.20 (higher). States which maintain multiple records should insert a text prefix of multi-non-lead in the multi-claimant field for the non-lead claimants. These records will be assigned to subpopulations 8.53 (lower) and 9.21 (higher).

2. If the appellant is other than the claimant or the employer, the appeals decisions are assigned to subpopulations 8.54 and 8.55 (lower) and 9.22 and 9.23 (higher). If this results in small count discrepancies in other cells, record the reason in the notes field on the RV summary.

3. Column 14 (disposed of by decision) is optional. States which have an indicator to distinguish countable from uncountable decisions should insert the value of the countable appeal indicator in this field to show that it is countable based on information on the appeals file.

4. Column 9 (appellant), Appeals Filed by Other. These records will not be added to line 400 of the 5130. They are not broken out by issue code so the counts of decisions from line 300 might not be consistent with the counts from line 400 if the state has appeals that were filed by other during the reporting period. In this case, use the comments field on the Report Validation Summary to explain the discrepancy.

5. This population includes appeals for Short Time Compensation (STC) Program (workshare) claims. These records should be labeled as "Workshare" for "Type of UI Program." See the software record layouts for more detail.

VALIDATION POPULATION 10

LOWER AUTHORITY APPEALS CASE AGING
APPEALS PENDING AT THE END OF THE MONTH BEING VALIDATED
SORT BY DAYS PENDING WITHIN EACH CATEGORY

Subpopulation #	ETA 9055A Column	1 *(Step 1E)* SSN	2 *(Step 1E)* Docket # Unique ID	3 *(Step 24A)* Lower Authority Appeal	4 *(Step 29B)* Time Lapse	5 *(Step 30B)* Appeal Pending	6 *(Step 32)* Filed Date
LOWER AUTHORITY APPEALS CASE AGING (10.1 through 10.7) 1) Supplemental sample--outliers							
10.1	C1				0 to 25		
10.2	C1				26 to 40		
10.3	C1				41 to 90		
10.4	C1				91 to 121		
10.5	C1				121 to 180		
10.6	C1				181 to 360		
10.7	C1				GT 360		

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 10 AND ETA 9055 REPORTING CELLS

Section A. LOWER AUTHORITY APPEALS CASE AGING

Days	Total
Total	C1
	10.1-10.7

VALIDATION POPULATION 11

HIGHER AUTHORITY APPEALS CASE AGING
APPEALS PENDING AT THE END OF THE MONTH BEING VALIDATED
SORT BY DAYS PENDING WITHIN EACH CATEGORY

Subpopulation #	ETA 9055B Column	1 *(Step 1F)* SSN	2 *(Step 1F)* Docket # Unique ID	3 *(Step 24B)* Higher Authority Appeal	4 *(Step 29B)* Time Lapse	5 *(Step 30B)* Appeal Pending	6 *(Step 32)* Filed Date
HIGHER AUTHORITY APPEALS CASE AGING (11.1 through 11.6) 1) Supplemental sample--outliers							
11.1	C1				0 to 40		
11.2	C1				41 to 70		
11.3	C1				71 to 120		
11.4	C1				121 to 180		
11.5	C1				181 to 360		
11.6	C1				GT 360		

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 11 AND ETA 9055 REPORTING CELLS

Section B. HIGHER AUTHORITY APPEALS CASE AGING

Days	Total
Total	C1
	11.1-11.6

Population 10 and 11 Notes

1. Capture the lower authority and higher authority appeals data at the end of the month.

2. It is not necessary for the state programmer to include the time lapse in Column 4. This will be automatically calculated by the software.

3. Column 5 (Step 30B), Appeal Pending, is an optional field for both population 10 and 11.

VALIDATION POPULATION 12

OVERPAYMENTS ESTABLISHED - SORTED BY CAUSES
ETA 227 - SECTION A

Subpop #	ETA 227A Line and Column	1 *(Step 1G)* SSN	2 *(Step 1G)* Unique ID	3 *(Step 4)* Program Type	4 *(Step 33)* Type of Overpayment	5 *(Step 34)* Cause of Overpayment	6 *(Step 35)* Detection Type	7 *(Step 36)* Date Overpayment Established	8 *(Step 37)* UI Amount	9 *(Step 37)* Federal Amount[a]
OVERPAYMENTS (12.1 through 12.16) 1) Random Sample: 60 or 200 (includes review of folders); 2) Supplemental sample--missing strata; 3) Supplemental sample--outliers by dollars										
12.1	101 (2, 4)			UI	Fraud	Other				
12.2	102 (2, 4)			UI	Fraud	Multi Claimant Schemes				
12.3	104 (2, 4)			UI	Nonfraud	Reversals				
12.4	105 (2, 4)			UI	Nonfraud	SESA Errors				
12.5	106 (2, 4)			UI	Nonfraud	Employer Errors				
12.6	107 (2, 4)			UI	Nonfraud	Claimant Errors				
12.7	108 (2, 4)			UI	Nonfraud	Other				
12.8	109 (4)			UI	Penalty					
12.9	101 (3, 5)			UCFE or UCX	Fraud	Other				
12.10	102 (3, 5)			UCFE or UCX	Fraud	Multi Claimant Schemes				
12.11	104 (3, 5)			UCFE or UCX	Nonfraud	Reversals				
12.12	105 (3, 5)			UCFE or UCX	Nonfraud	SESA Errors				
12.13	106 (3, 5)			UCFE or UCX	Nonfraud	Employer Errors				
12.14	107 (3, 5)			UCFE or UCX	Nonfraud	Claimant Errors				

VALIDATION POPULATION 12

OVERPAYMENTS ESTABLISHED - SORTED BY CAUSES
ETA 227 - SECTION A

Subpop #	ETA 227A Line and Column	1 *(Step 1G)* SSN	2 *(Step 1G)* Unique ID	3 *(Step 4)* Program Type	4 *(Step 33)* Type of Overpayment	5 *(Step 34)* Cause of Overpayment	6 *(Step 35)* Detection Type	7 *(Step 36)* Date Overpayment Established	8 *(Step 37)* UI Amount	9 *(Step 37)* Federal Amount[a]
12.15	108 (3, 5)			UCFE or UCX	Nonfraud	Other				
12.16	109 (5)			UCFE or UCX	Penalty					

[a]For Subpopulations 12.1 through 12.8, the federal amount is the federal share of the joint claim.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 12 AND ETA 227 REPORTING CELLS

A. PAGE 1 OF FORM

A. OVERPAYMENT ESTABLISHED – CAUSES						
Cause	Line No.	No. Schemes	Number of Cases		Dollar Amounts	
					Column 8	Column 9
			UI	UCFE/UCX	UI	UCFE/UCX
		(1)	(2)	(3)	(4)	(5)
Fraud – Total	101		1	9	1	1 and 9
Multi Claimant Schemes	102		2	10	2	2 and 10
Nonfraud – Total	103					
Reversals	104		3	11	3	3 and 11
SESA Errors	105		4	12	4	4 and 12
Employer Errors	106		5	13	5	5 and 13
Claimant Errors	107		6	14	6	6 and 14
Other	108		7	15	7	7 and 15
Penalty	109				8	8 and 16

Population 12 Notes

1. Subpopulations 12.1 – 12.8: Enter the federal amount in column 9 for joint claims.

2. Do not include revisions to overpayment amounts made in subsequent quarters. For example, if an overpayment was established in March and a revision to the amount was made in April, these revisions are reported in population 13 as additions and subtractions but not reported in population 12.

3. The “cause” of fraud overpayments must be either “multi-claimant schemes” or “other.” The software will reject records for fraud overpayments where the cause is not “multi-claimant schemes” or “other.” States that use multiple codes for types of fraud should code these as “other.”

VALIDATION POPULATION 13

OVERPAYMENT RECONCILIATION ACTIVITIES
OVERPAYMENT RECONCILIATION TRANSACTION OCCURRED DURING REPORTING QUARTER BEING VALIDATED
ETA 227 - SECTION C

Subpop #	ETA 227B Line and Column	1 *(Step 1H)* SSN	2 *(Step 1H)* Unique ID	3 *(Step 4)* Program Type	4 *(Step 33)* Type of Overpayment	5 *(Step 38)* Activity	6 *(Step 39)* Date of Activity	7 *(Step 40)* UI Amount	8 *(Step 40)* Federal Amount[a]
OVERPAYMENT RECONCILIATION TRANSACTIONS (13.1 through 13.34) 1) Random sample: 30 or 100 (includes review of folders); 2) Supplemental sample-missing strata; 3) Supplemental sample--outliers by dollars									
13.1	303 (11)			UI	Fraud	Cash			
13.2	304 (11)			UI	Fraud	Benefit Offset			
13.3	305 (11)			UI	Fraud	State Income Tax Offset			
13.4	306 (11)			UI	Fraud	By Other States			
13.5	307 (11)			UI	Fraud	Other			
13.6	309 (11)			UI	Fraud	Written-Off			
13.7	310 (11)			UI	Fraud	Additions			
13.8	311 (11)			UI	Fraud	Subtractions			
13.9	303 (12)			UCFE/UCX	Fraud	Cash			
13.10	304 (12)			UCFE/UCX	Fraud	Benefit Offset			
13.11	305 (12)			UCFE/UCX	Fraud	State Income Tax Offset			
13.12	306 (12)			UCFE/UCX	Fraud	By Other States			

VALIDATION POPULATION 13

OVERPAYMENT RECONCILIATION ACTIVITIES
OVERPAYMENT RECONCILIATION TRANSACTION OCCURRED DURING REPORTING QUARTER BEING VALIDATED
ETA 227 - SECTION C

Subpop #	ETA 227B Line and Column	1 *(Step 1H)* SSN	2 *(Step 1H)* Unique ID	3 *(Step 4)* Program Type	4 *(Step 33)* Type of Overpayment	5 *(Step 38)* Activity	6 *(Step 39)* Date of Activity	7 *(Step 40)* UI Amount	8 *(Step 40)* Federal Amount[a]
13.13	307 (12)			UCFE/UCX	Fraud	Other			
13.14	309 (12)			UCFE/UCX	Fraud	Written-Off			
13.15	310 (12)			UCFE/UCX	Fraud	Additions			
13.16	311 (12)			UCFE/UCX	Fraud	Subtractions			
13.17	303 (13)			UI	Nonfraud	Cash			
13.18	304 (13)			UI	Nonfraud	Benefit Offset			
13.19	305 (13)			UI	Nonfraud	State Income Tax Offset			
13.20	306 (13)			UI	Nonfraud	By Other States			
13.21	307 (13)			UI	Nonfraud	Other			
13.22	308 (13)			UI	Nonfraud	Waived			
13.23	309 (13)			UI	Nonfraud	Written-Off			
13.24	310 (13)			UI	Nonfraud	Additions			
13.25	311 (13)			UI	Nonfraud	Subtractions			
13.26	303 (14)			UCFE/UCX	Nonfraud	Cash			

VALIDATION POPULATION 13

OVERPAYMENT RECONCILIATION ACTIVITIES
OVERPAYMENT RECONCILIATION TRANSACTION OCCURRED DURING REPORTING QUARTER BEING VALIDATED
ETA 227 - SECTION C

Subpop #	ETA 227B Line and Column	1 *(Step 1H)* SSN	2 *(Step 1H)* Unique ID	3 *(Step 4)* Program Type	4 *(Step 33)* Type of Overpayment	5 *(Step 38)* Activity	6 *(Step 39)* Date of Activity	7 *(Step 40)* UI Amount	8 *(Step 40)* Federal Amount[a]
13.27	304 (14)			UCFE/UCX	Nonfraud	Benefit Offset			
13.28	305 (14)			UCFE/UCX	Nonfraud	State Income Tax Offset			
13.29	306 (14)			UCFE/UCX	Nonfraud	By Other States			
13.30	307 (14)			UCFE/UCX	Nonfraud	Other			
13.31	308 (14)			UCFE/UCX	Nonfraud	Waived			
13.32	309 (14)			UCFE/UCX	Nonfraud	Written-Off			
13.33	310 (14)			UCFE/UCX	Nonfraud	Additions			
13.34	311 (14)			UCFE/UCX	Nonfraud	Subtractions			

[a]For Subpopulations 13.9 through 13.16 and Subpopulations 13.26 through 13.34, the federal amount is the federal share of the joint claim.

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 13 AND ETA 227 REPORTING CELLS

A. PAGE 2 OF FORM

C. RECOVERY/RECONCILIATION					
Item	Line No.	Dollar Amount			
		Fraud		Nonfraud	
		UI	UCFE/UCX	UI	UCFE/UCX
		Column 7	Column 8	Column 7	Column 8
		(11)	(12)	(13)	(14)
Recovered - Total	302				
Cash	303	1	9	17	26
Benefit Offset	304	2	10	18	27
State Income Tax Offset	305	3	11	19	28
By Other States	306	4	12	20	29
Other	307	5	13	21	30
Waived	308			22	31
Written-Off	309	6	14	23	32
Additions	310	7	15	24	33
Subtractions	311	8	16	25	34

Population 13 Notes

1. Reconstructing this population requires a detailed transaction history file that associates activities (column 5) with particular overpayment types.

2. Subpopulations 13.1 – 13.8: Enter the federal amount in column 8 for joint claims (field number 9 on the record layout).

3. Additions include payments made on removed balances. Otherwise, additions and subtractions reflect changes in the balance resulting from administrative decisions such as appeal reversals.

4. The validation of Receivables Removed at the End of the Period occurs in Population 14.

VALIDATION POPULATION 14

AGE OF OVERPAYMENTS

Subpop #	ETA 227C ETA 227E Report, Line, and Column	1 (Step 1G) SSN	2 (Step 1G) Unique ID	3 (Step 36) Date Established	4 (Step 4) Program Type	5 (Step 41) Outstanding Overpayment	6 (Step 43) End of Reporting Period	7 (Step 43) Age of Receivables in Days/ Prior Report Quarters	8 (Step 42) UI Balance at End of Qtr	9 (Step 42) Federal Balance at End of Qtr	10 (Step 33) Type of Overpayment	11 (Step 44) Active Collection
AGE OF OVERPAYMENTS (14.1 through 14.16) 1) Supplemental Sample—outliers by dollars												
14.1	E501 (18)				UI			0 to 90				
14.2	E502 (18)				UI			91 to 180				
14.3	E503 (18)				UI			181 to 270				
14.4	E504 (18)				UI			271 to 360				
14.5	E505 (18)				UI			361 to 450				
14.6	E506 (18)				UI			GT 450				Yes or No
14.7	E501 (19)				UCFE/UCX			0 to 90				
14.8	E502 (19)				UCFE/UCX			91 to 180				
14.9	E503 (19)				UCFE/UCX			181 to 270				
14.10	E504 (19)				UCFE/UCX			271 to 360				
14.11	E505 (19)				UCFE/UCX			361 to 450				
14.12	E506 (19)				UCFE/UCX			GT 450				Yes or No
14.13	C312 (11)				UI			Report in 8 Prior Quarters			Fraud	No or Dropped
14.14	C312 (13)				UI			Report in 8 Prior Quarters			Non-Fraud	No or Dropped
14.15	C312 (12)				UCFE/UCX			Report in 8 Prior Quarters			Fraud	No or Dropped
14.16	C312 (14)				UCFE/UCX			Report in 8 Prior Quarters			Non-Fraud	No or Dropped

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 14
AND ETA 227 REPORTING CELLS

E: AGING OF BENEFIT OVERPAYMENT ACCOUNTS			
Accounts Receivable	Line No.	Dollar Amounts	
		UI	UCFE/UCX
		(18)	(19)
90 days or less	501	1	7
91 - 180 days	502	2	8
181 - 270 days	503	3	9
271 - 360 days	504	4	10
361 - 450 days	505	5	11
451 days or more	506	6	12
Total Accounts Receivable	507		

RELATIONSHIP BETWEEN SUBPOPULATIONS IN POPULATION 14
AND ETA 227 REPORTING CELLS
A. PAGE 2 OF FORM

C. RECOVERY/RECONCILIATION					
Item	Line No.	Dollar Amount			
		Fraud		Nonfraud	
		UI	UCFE/UCX	UI	UCFE/UCX
		Column 7	Column 8	Column 7	Column 8
		(11)	(12)	(13)	(14)
Receivables Removed at End of Month	312	13	14	15	16

Population 14 Notes

1. Population 14 has been designed to process a state's entire outstanding overpayments file and generate:

    - Section E of the ETA 227 Report (Age of Outstanding Overpayments)
    - Amounts removed on Section C of the ETA 227 Report (Overpayments Reconciliation Activities – Row 312)

    The validation of amounts removed in Section C uses the population 14 file and not the population 13 file which validates Section C because removal is determined by examining outstanding overpayments.

    The software will ignore any overpayments that are included in the extract file that are too old to be included in Section E and are not removed during the quarter.

    Overpayments are not removed automatically when they have been included on the previous eight 227 reports. If the overpayment is in Active Collection status in the 9th quarter after it was established, it is not removed until the state indicates that it has dropped the Active Collection status.

    Therefore, states must label each outstanding overpayment that has been reported on eight 227 reports in Column 11 (Active Collection) as either:

    - Yes – in active collection. These overpayments will not be removed and will be included in section E (greater than 450 days).

    - No – not in active collection. These overpayments will be removed (not included in section E but included in Section C line 12) in the ninth quarter after the date established. Any overpayment greater than nine quarters old with a no in column 11 is not included in Sections C or E.

    - Dropped – the overpayment has been reported for 9 or more quarters and was in active collection in the prior quarter but has been dropped during the report quarter from active collection status. These payments will be included in Section C line 12 as removed during the quarter.

2. Overpayment in Active Collection: Overpayments for which a payment schedule is established with the claimant or for which offsets are being collected.

3. Section C of the ETA 227 report requires the amounts removed to be identified as fraud or non-fraud. Therefore, a value of fraud or non-fraud is required in Column 10 for overpayments which had been reported for eight quarters and are not in active collection or overpayments which had been reported for nine or more quarters and the state dropped active collection during the quarter.

SAMPLING SPECIFICATIONS

A. TYPES OF SAMPLES

The validation software uses specific random and supplemental sampling techniques to ensure that the validation methodology is efficient but thorough. The software selects four different types of samples:

- **Random samples**
- **Supplemental samples of subpopulations missing from the random sample (missing subpopulations)**
- **Supplemental samples to examine data outliers**
- **Supplemental minimum samples**

Each of these four sample types is described below.

1. Random Samples

Random samples are used to validate the most important transaction types, for which ETA requires the most comprehensive validation. These transaction types are used for funding or for important performance measures, such as initial claims, nonmonetary determinations, appeals, and first payments. Initial samples of 30 or 60 cases are reviewed to detect errors; additional cases are reviewed only if the results of the initial sample are inconclusive. However, in the sample selection process, the software will miss some types of payments that occur infrequently. The procedures used by the software for selecting random samples are found on page A.81 of this Appendix. Specifications for each type of random sample are found in Table A.1 on page A.82.

The random sampling approach is very efficient because it allows states with good data and programming to review a relatively small number of cases while still ensuring that the data meet UI validation standards. If a review of 60 cases produces no errors, then it can be concluded that the state's error rate for the sampled type of transaction is less than 5%. If a certain number of errors are detected, however, then an additional 140 cases must be reviewed to more precisely measure the error rate (see Table A.1).

Random samples are used to conduct data element validation for the most important and high risk performance and reporting elements. These include Tier 1 performance measures and workload items. Depending on the type of sample, the software selects 100 or 200 cases at random to be validated. After the validator reviews the first set of cases (30 for samples of 100 and 60 for samples of 200), the validator makes a determination as to whether it is necessary to continue to review the remaining cases. If there are no errors or a large number of errors, it is not necessary to validate the remaining cases because the error rate is conclusively below 5% or above 5%. It is only necessary to validate the remaining cases when the error rate is not conclusively below or above 5%.

PROCEDURES FOR DETERMINING HOW MANY CASES TO REVIEW

Procedures for reviewing 30 cases:

Step 1: Review the original sample of 30 cases.

0 errors: the error rate is considered to be below 5%, and it is not necessary to review an additional sample.

5 or more errors: the error rate is considered to be above 5%, and it is not necessary to review an additional sample.

1 - 4 errors: the error rate is inconclusive, and an additional sample of 70 cases must be reviewed (proceed to step 2).

Step 2: Review an additional sample of 70 cases.

9 or fewer errors (out of 100): the error rate is considered to be below 5%.

10 or more errors (out of 100): the error rate is considered to be above 5%.

Procedures for reviewing 60 cases:

Step 1: Review the original sample of 60 cases.

0 errors: the error rate is considered to be below 5%, and it is not necessary to review an additional sample.

7 or more or more errors: the error rate is considered to be above 5%, and it is not necessary to review an additional sample

1 - 6 errors: the error rate is inconclusive, and an additional sample of 140 cases must be reviewed (proceed to step 2).

Step 2: Review an additional sample of 140 cases.

15 or fewer errors (out of 200): the error rate is considered to be below 5%.

16 or more errors (out of 200): the error rate is considered to be above 5%.

2. Supplemental Samples to Check One Transaction from Each Subpopulation Missing from the Random Sample (Missing Subpopulations)

It is important to ensure that the validation files are programmed correctly. For populations where random samples are reviewed, the software draws a supplemental sample of one case for each subpopulation that is not selected by the random sample. For example, the random sample of first payments may not include any payments from population 4.12, interstate first payments for claimants with both state UI and federal wages, because this type of payment will occur infrequently. The software would select a sample transaction from subpopulation 4.12 and from any other subpopulation not represented in the random sample.

The results of the validation of the supplemental sample are recorded separately from the random sample on the summary and analytical reports.

3. Supplemental Samples to Examine Data Outliers

The random samples and the supplemental samples of missing subpopulations ensure that the population as a whole has been defined correctly, and that each specific subpopulation within the population has been defined correctly. However, neither sample will necessarily examine the high-risk area of time lapse and dollar amount extremes (the shortest and longest time lapses, and the lowest and highest dollar amounts) where data errors or programming errors in time lapse or dollar calculations may occur. Review of data outliers is the most efficient means of detecting calculation or logic errors because it examines the extremes in a distribution of cases sorted by time lapse or dollar amount. To ensure that calculation and date errors have not occurred, this type of sample examines the five cases with the lowest time lapse in days and the five cases with the highest time lapse in days for transactions subjected to time lapse measurement. The software sorts the file by time lapse days and selects the first five and last five cases on the file. This type of outlier sample is similarly drawn from transactions that report dollar amounts, such as overpayments established and overpayment reconciliation activities. Specifications for each sample of data outliers are found in Table A.1.

4. Supplemental Minimum Samples

Supplemental minimum samples are used for transactions which are low priority for validation and for which no random sample is drawn by the software. For these types of transactions, it is only necessary to ensure that the reporting software uses the correct fields in the database to process and report the transactions. For example, for new UCFE/UCX claims (subpopulations 3.15-3.18), only a supplemental sample of 2 cases per subpopulation (or 8 cases in total) is reviewed and no random sample is drawn. Specifications for each supplemental minimum sample are found in Table A.1.

B. SPECIFICATIONS FOR SELECTING EACH TYPE OF SAMPLE

Table A.1 is a summary of the sampling specifications that appear on each validation population specification. It details each of the samples drawn by the software and specifies the subpopulations sampled, the sample size, the sample type, and the type of supporting documentation needed to validate the sample. The validation software draws all of the specified samples and displays them on the worksheet.

- Column 1 lists, in sequence, the subpopulation groups that are sampled. Some subpopulation groups include more than one kind of sample.
- Column 2 shows the type of sampled transactions and the corresponding subpopulations.
- Columns 3a through 3d show the random sample size, and whether samples are drawn from missing subpopulations, outliers, or a minimum sample only.
- Columns 4 and 5 show the number of transactions which must be validated using benefits history screens, or supporting paper files/documentation.

The following example illustrates how Table A.1 works. For example, the first sample grouping of subpopulations 1.1 through 1.3 (intrastate weeks claimed) requires an initial random sample of 60 cases. The worksheet has been programmed to include all data elements specified in the record layout from the state's extract file.

TABLE A.1

SPECIFICATIONS FOR DATA VALIDATION SAMPLING

(1) Sample	(2) Type of Sampled Transaction	Sample Types and Sizes				Samples	
		(3a) Random Sample Size	(3b) Missing Subpopulations	(3c) Outliers	(3d) Minimum Sample	(4) Number to be Reviewed Using Data Base Screens	(5) Number to be Reviewed Using Supporting File/Paper Documentation
1	Intrastate Weeks Claimed (1.1-1.3)	60-200 claimants	NA	NA	NA	60-200	NA
2	Interstate Liable Weeks Claimed (1.4-1.6)	30-100 claimants	NA	NA	NA	30-100	NA
3	Interstate Weeks Claimed Filed from Agent State (1.7-1.9)	NA	NA	NA	2	2	NA
4	Sample Omitted						
5	Final Payments (2.1-2.4)	30-100	NA	NA	NA	2	NA
6	Sample Omitted						
7	New UI Claims (3.1-3.14)	60-200	Yes	NA	NA	60-200+[a]	NA
8	New UCFE/UCX Claims (3.15-3.18)	NA	NA	NA	8 (2 per subpop.)	8	NA
9	Interstate Filed From Agent State Claims (3.19-3.21)	NA	NA	NA	6 (2 per subpop.)	6	NA
10	Interstate Claims Taken as Agent State (3.22-3.24)	NA	NA	NA	6 (2 per subpop.)	6	NA
11	Intrastate and Interstate Transitional Claims (3.25-3.33)	30-100	NA	NA	NA	30-100	NA
12	CWC Claims (3.34-3.39)	30-100	Yes	NA	NA	30-100	NA
13	Monetary Sent Without New Claim (3.40-3.45)	NA	NA	NA	12 (2 per subpop.)	2	NA
14	Entering Self-Employment Program (3.46)	NA	NA	NA	2	2	NA
15	Sample Omitted						
16	Additional Claims (3a.49-3a.54)	60-200	NA	NA	NA	60-200	NA

[a]Unknown number of cases from missing subpopulations

Table A.1 *(continued)*

(1) Sample	(2) Type of Sampled Transaction	Sample Types and Sizes				Samples	
		(3a) Random Sample Size	(3b) Missing Subpopulations	(3c) Outliers	(3d) Minimum Sample	(4) Number to be Reviewed Using Data Base Screens	(5) Number to be Reviewed Using Supporting File/Paper Documentation
17	Sample Omitted						
18	First Payments (4.1-4.16)	60-200	Yes	10 (Intrastate only/Mod 1 sort)	NA	70-210+[a]	NA
19	Continued Weeks Total Payments (4.17-4.24)	NA	NA	10	NA	10	NA
20	Continued Weeks Partial Payments (4.25-4.32)	30-100	NA	NA	NA	30-100	NA
21	Adjusted Payments (4.33-4.42)	NA	NA	10 ($)	NA	10	NA
22	Self-Employment Payments (4.43)	NA	NA	NA	2	2	NA
23	CWC First Payments (4.44-4.45)	30-100	NA	NA	NA	30-100	NA
24	CWC Continued Payments (4.46-4.47)	NA	NA	NA	4 (2 per subpop.)	4	NA
25	CWC Adjusted Payments (4.48-4.49)	NA	NA	NA	4 (2 per subpop.)	4	NA
26	CWC Prior Weeks Compensated (4.50-4.51)	NA	NA	NA	4 (2 per subpop.)	4	NA
27	Sample Omitted						
28	Single Claimant Nonmonetary Determinations (5.1-5.60)	30-100	Yes	10 (TL)	NA	40-110	NA
29	Multiclaimant Nonmonetary Determinations (5.61-5.64)	NA	NA	NA	8 (2 per subpop.)	2	NA
30	Redeterminations (5.65-5.70)	30-100	NA	NA	NA	30-100	30-100
31	Appeals Filed, Lower Authority (6.1-6.2)	NA	NA	NA	4 (2 per subpop.)	4	NA
32	Appeals Filed, Higher Authority (7.1-7.2)	NA	NA	NA	4 (2 per subpop.)	4	NA

[a]Unknown number of cases from missing subpopulations

Table A.1 *(continued)*

(1) Sample	(2) Type of Sampled Transaction	Sample Types and Sizes				Samples	
		(3a) Random Sample Size	(3b) Missing Subpopulations	(3c) Outliers	(3d) Minimum Sample	(4) Number to be Reviewed Using Data Base Screens	(5) Number to be Reviewed Using Supporting File/Paper Documentation
33	Single Claimant Appeals Decisions, Lower Authority (8.1-8.44)	60-200	Yes (8.33 - 8.40 only)	10 (TL)	NA	70-210+[a]	60-210+[a]
34	Multiclaimant Appeals Decisions, Lower Authority (8.45-8.55)	NA	NA	NA	22 (2 per subpop.)	2	2
35	Single Claimant Appeals Decisions, Higher Authority (9.1-9.12)	30-100	NA	10	NA	40-110	30-110
36	Multiclaimant Appeals Decision, Higher Authority (9.13-9.23)	NA	NA	NA	22 (1 per subpop.)	2	2
37	Appeals Case Aging, Lower Authority (10.1-10.7)	NA	NA	10	NA	2	NA
38	Appeals Case Aging, Higher Authority (11.1-11.6)	NA	NA	10	NA	2	NA
39	Overpayments Established (12.1-12.16)	60-200	Yes	10 ($)	NA	60-210+[a]	60-210+[a]
40	Overpayment Reconciliation Activities (13.1-13.34)	30-100	Yes	10 ($)	NA	40-110+[a]	30-110+[a]
41	Overpayments Aging (14.1-14.12)	NA	NA	10 ($)	NA	10	NA

NOTES: The subpopulation references in parentheses match the subpopulations on the report validation population specifications.

The software selects each sample from the population file created for the Module 1 report validation (except for the outliers samples, which require resorts).

A sample of missing subpopulations is only drawn if all subpopulations are not represented in the random sample. The sample of outliers is always done where indicated. Outliers samples are for time lapse where it exists, otherwise dollars.

[a]Unknown number of cases from missing subpopulations

APPENDIX B

LADT AND CWC TECHNICAL GUIDANCE

APPENDIX B

CONTENTS

INSTRUCTIONS FOR CREATING RECORDS FOR INTERSTATE
FILED FROM AGENT STATE (LADT) B.3

TRAINING GUIDE FOR VALIDATION OF 586 REPORT B.7

INSTRUCTIONS FOR CREATING RECORDS FOR INTERSTATE FILED FROM AGENT STATE WEEKS CLAIMED (POPULATION 1) AND CLAIMS (POPULATION 3) FROM THE LIABLE/AGENT DATA TRANSFER (LADT) RECORD

Attached are two record layouts which provide guidance for creating the parts of the import files for populations 1 and 3 (subpopulations 1.7-1.9 and 3.19-3.21 only) that are derived from LADT individual records transferred to the state from the ICON system. These subfiles must be appended to the other records for populations 1 and 3 before importing the files into the validation software. Consult field number 62 (Record Type) in the LADT record layout to determine which records belong in each respective population. If Record Type = 2, then the record belongs in population 1. If Record Type = 1 or 3, then the record belongs in population 3.

The extract type for each of the two subfiles is ASCII, comma delimited columns. Data must be in the order listed on the record layout. The Module 3 reference indicates the step where the state-specific values for each field are documented. The LADT Field Number indicates the field number of the data element on the LADT record, where applicable. Where the LADT record does not contain the appropriate information, the record layout indicates “Leave blank” in the LADT field number column.

The Data Type/Format indicates the generic values for text fields. These must be followed by a dash and the state-specific value.

Population 1: Weeks Claimed

Record Layout for Creating Records for

Interstate Filed From Agent State Weeks Claimed

5159 reference: Row 201, column 11; Row 202, column 11; Row 203, column 11
Subpopulations: 1.7 – 1.9
Field 62 (Record Type) in LADT = 2 (Weeks Claimed)

Number	Field Name	Module 3 Reference	LADT Field Number	Field Description	Data Type/Format
1.	OBS	NA		Record number assigned by DP staff's extracting program.	Number – 00000000
2.	Week Claimed	Step 1 - Rule 2	52	The week-ending date of the claim.	Date - MM/DD/YYYY
3.	SSN	Step 1 - Rule 1	1		Number - 000000000
4.	Type of UI Program	Regular UI: Step 2	Field 28 = 0	Regular UI claim.	Text – Regular UI
5.	Program Type	UI: Step 4A – Rule 1 UCFE: Step 4B- Rule 1 UCX: Step 4C – Rule 1	27	Indicate whether claim's program type is UI only, UCFE only, or UCX only.	Text – UI; UCFE; UCX
6.	Intrastate or Interstate Claim	Interstate Filed From Agent State: Step 5D-Rule 1	Insert "Interstate Agent"	Interstate filed from agent state.	Text –Interstate agent
7.	Date Week Claimed	Step 11	63	The week ending date of the week claimed.	Date – MM/DD/YYYY
8.	Monetarily Eligible or Pending	Step 11	Leave Blank	Indicate whether claimant is monetarily eligible or pending.	Text - Eligible; Pending (Optional)
9.	Earnings	Step 10D	Leave Blank	Indicate earnings for the week claimed.	Number - 00000.00 (Optional)
10.	WBA	Step 7	33	Indicate the weekly benefit allowance.	Number – 00000.00 (Optional)
11.	User	NA	Leave Blank	User defined field. Can be used for any additional data element.	Text (Optional)

Population 3: Claims

Instructions for Creating Records for

Interstate Filed From Agent State Claims

5159 reference: Row 101, column 4; Row 102, column 4; Row 103, column 4
Subpopulations: 3.19 – 3.21
Field 62 (Record Type) in LADT = 1 or 3 (TIC or Reopen/Transfer)

Number	Field Name	Module 3 Reference	LADT Field Number	Field Description	Data Type/Format
1.	OBS	NA		Record number assigned by DP staff's extracting program.	Number – 00000000
2.	SSN	Step 1B	1		Number – 000000000
3.	Date Claim Filed	Step 3A	25	The date claim was filed in person, by mail or telephone.	Date – MM/DD/YYYY
4.	Type of UI Program	Regular UI: Step 2	Field 28 = 0	Regular UI Claim.	Text – Regular UI
5.	Claim Type	New: Step 3A – Rule 2 Transitional: Step 3C – Rule 2 Additional: Step 3B – Rule 2 Reopened: Step 3B – Reopened Rule 1	30 or 59 = 1(Reopen)	New claim, Transitional claim, entering self-employment, additional claim, or reopened claim.	Text – New; Transitional; Additional; Reopened;
6.	Program Type	UI: Step 4A – Rule 1 UCFE: Step 4B- Rule 1 UCX: Step 4C – Rule 1	27	Indicate whether claim's program type is UI only, UCFE only, or UCX only.	Text – UI; UCFE; UCX
7.	Intrastate or Interstate Claim	Interstate Filed From Agent State: Step 5D- Rule 1	Insert "Interstate Agent"	Indicate whether claim is interstate filed from agent state.	Text – Interstate agent

Number	Field Name	Module 3 Reference	LADT Field Number	Field Description	Data Type/Format
8.	Date of Original Monetary	Step 6A	Leave Blank	Date a determination was made on whether the claimant has sufficient base-period wages and/or employment to establish a benefit year.	Date – MM/DD/YYYY (Optional)
9.	Sufficient / Insufficient Wages to Qualify for Benefits	Sufficient Wages: Step 6C Benefit Year: Step 6C Sufficient Wages – No BY: Step 6C Insufficient Wages: Step 6D	Leave Blank	Indicate whether the claim is insufficient, sufficient new base year, or sufficient no new base year.	Text – Insufficient; Sufficient New BY; Sufficient No BY (Optional)
10.	WBA	Step 7	33	Indicate whether the weekly benefit allowance is the maximum or less than maximum.	Text – Maximum; Less than Maximum (Optional)
11.	MBA	Step 7	Leave Blank	Indicate the maximum benefit allowance.	Number – 00000.00 (Optional)
12.	Potential Weeks of Duration	Step 8A	Leave Blank	The number of full weeks of benefits for which a claimant is determined to be eligible within a benefit year.	Number – 00 (Optional)
13.	Potential Weeks of Maximum Duration	Step 8B	Leave Blank	The duration of the benefit year is the maximum for the State.	Text – Y; N (Optional)
14.	User	NA	Leave Blank	User defined filed. Can be used for any additional data element.	Text (Optional)

TRAINING GUIDE FOR VALIDATION OF 586 REPORT
Using as Example the Quarter of January – March 2002

A. GENERAL GUIDANCE FOR EXTRACTING CWC CLAIMS AND PAYMENTS

The 5159 report includes information on claims filed. Some of those claims are also reported on the 586 report if they involve wages from more than one state (combined wage claims). The reporting logic for the two reports, however, is completely different. Therefore, the validation methodology treats a claim involving wages from more than one state as two separate reporting and validation transactions, even though they represent a single claim. It is important for state programmers to not combine the extract logic for CWC claims with other claims in building the file for population 3.

Therefore, state programmers need to extract claim records for population 3 (subpopulations 3.1 to 3.33; 3.40 to 3.46) using the 5159 logic (where the issue of wages from multiple states is irrelevant). Then, the programmers need to extract claim records for population 3 (subpopulations for CWC claims 3.34 to 3.39) following the logic presented in the scenarios on the following pages where wages from more than one state are involved (including where wages were requested but not added to the claim). Once the claims are extracted, the programmer must concatenate the records into a single file to load into the DV software for population 3.

The same methodology is used for CWC payments in population 4. The reporting of weeks compensated on the 5159 report and payments time lapse on the 9050 and 9051 reports is not affected by how many states' wages are used. The reporting logic for weeks compensated on the 586 report is explained in this training guide and is very different from the logic used for the 5159, 9050, and 9051 reports. As with claims, the same payments are reported twice (if they are for a combined wage claim) and are extracted twice for data validation in population 4.

Therefore, state programmers should extract payments for subpopulations 4.1 to 4.42, and then, using the logic explained in the scenarios on the following pages, create a separate extract for CWC payments for subpopulations 4.44 to 4.51. These two files must then be merged to load into population 4 in the DV software.

Obviously, it is not necessary to physically create two extracts each for populations 3 and 4 and then merge them. Programmers could also combine the two sets of extract logic into a single extract process for each of these populations.

B. CWC CLAIMS AND PAYMENTS REPORTING LOGIC: THREE SCENARIOS

The following scenarios illustrate three ways that combined wage claims and their associated payments are reported and validated on the ETA 586, for the first quarter of 2002 (January to March, 2002.) Therefore, activities in each scenario that were reported on prior 586 reports are listed as NA for that specific quarter.

Scenario 1:

The first scenario is straightforward and involves combining wages claimed during the same quarter in which the initial claim was filed.

Scenario 2:

Under the second scenario, wages were combined in the quarter after the new UI claim was filed. This situation is very different from the first scenario for reporting and validation purposes.

Scenario 3:

Under the third scenario, wages were combined in the quarter after the CWC claim was filed. The claimant requested that wages be added from another state, and the state sent the IB4 in one quarter. However, the first monetary determination (redetermination) based on wages from two or more states was not issued until the following quarter. This scenario is very different from the first two scenarios for reporting and validation purposes.

The first IB-4 sent for a claim constitutes a "new cwc claim." The first monetary determination or redetermination using wages from more than one state is a "new cwc benefit year." If these two transactions occur in different quarters, in the first quarter there is a claim but not a benefit year. Data validation treats this transaction as an "insufficient CWC claim."

In the subsequent quarter there is a new CWC benefit year established but the claim has already been reported in the prior quarter. Therefore, data validation treats this as a new CWC benefit year where the claim was filed in a prior quarter and does not double count the CWC claim.

SCENARIO 1

	Date	Activity	Validation Subpopulation	586 Report Element
1	02/02/2002	New intra UI claim and request for wages from another state	NA	NA
2	02/03/2002	IB-4 sent	3.35 new CWC claim	586-101-1
3	02/04/2002	Monetary determination for $100 WBA based on wages from two states	3.35 (include only once) new CWC BY	586-101-2
4	02/08/2002	Payment $100	4.44 CWC first payment	586-101-4, 101-5 ($)
5	02/15/2002	Payment $100	4.46 CWC continued payment	586-101-4, 101-5 ($)

1. A new UI intrastate claim is filed on 02/02/02. There is also a request made for wages from another state.

2. The IB-4 request to combine wages is sent. This results in a new CWC claim and is reported on the 586-101-1.

3. A monetary determination is issued which combines wages from two states and sets the WBA at $100.

4. A payment of $100 is made which is considered a CWC first payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

5. A second payment of $100 is made which is considered a CWC continued payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

SCENARIO 2

	Date	Activity	Validation Subpopulation	586 Report Element
1	12/02/2001	New intra UI claim	NA	NA
2	12/09/2001	Payment $100	4.50 prior week comp.	586-101-6, 101-7 ($)
3	12/16/2001	Payment $100	4.50 prior week comp.	586-101-6, 101-7 ($)
4	01/04/2002	Request to combine wages, IB-4 sent	3.35 new CWC claim	586-101-1
5	01/05/2002	Monetary redetermination increasing WBA to $150 after wages combined	3.35 (include only once) new CWC BY	586-101-2
6	01/12/2002	Adjusted payment $100	4.48 CWC adjusted payment	586-101-5 ($)
7	01/12/2002	Payment $150	4.44 CWC first payment	586-101-4, 101-5 ($)
8	01/19/2002	Payment $150	4.46 CWC continued payment	586-101-4, 101-5 ($)

1. A new UI intrastate claim is filed on 12/02/01.

2. A payment of $100 was paid on 12/09/01. This payment will be reported as a CWC prior week compensated on the 586-101-6. The dollar amount is reported in cell 101-7.

3. A second payment of $100 was paid on 12/16/01. This payment will be reported as a CWC prior week compensated on the 586-101-6. The dollar amount is reported in cell 101-7.

4. The IB-4 request to combine wages is sent. This results in a new CWC claim and is reported on the 586-101-1.

5. A monetary redetermination is issued which combines wages and increases the WBA to $150. This establishes the CWC benefit year and is reported on the 586-101-2.

6. An adjusted payment of $100 is paid which is reported as a CWC adjusted payment on the 586-101-5.

7. A payment of $150 is made which is considered a CWC first payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

8. A second payment of $150 is made which is considered a CWC continued payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

SCENARIO 3

	Date	Activity	Validation Subpopulation	586 Report Element
1	12/28/2001	New intra UI claim	NA	NA
2	12/28/2001	Request to combine wages, IB-4 sent	NA	Reported in 586-101-1 as new CWC claim in prior quarter
3	01/15/2002	Monetary redetermination increasing WBA to $150 after wages combined	3.38 new CWC BY	586-101-2
4	01/22/2002	Payment $150	4.44 CWC first payment	586-101-4, 101-5 ($)
5	01/29/2002	Payment $150	4.46 CWC continued payment	586-101-4, 101-5 ($)

1. A new UI intrastate claim is filed on 12/28/01.

2. The IB-4 request to combine wages is sent on 12/28/01. This results in a new CWC claim and is reported on the 586-101-1 for the fourth quarter of 2001.

3. A monetary redetermination is issued which combines wages and increases the WBA to $150. This establishes the CWC benefit year and is reported on the 586-101-2. Because the monetary redetermination is in a different quarter than the IB-4, the new CWC BY is reported in subpopulation 3.38 which is for new CWC benefit years when the new claim was reported in the prior quarter.

4. A payment of $150 is made which is considered a CWC first payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

5. A second payment of $150 is made which is considered a CWC continued payment and is reported on the 586-101-4. The dollar amount is reported in cell 101-5.

C. EXAMPLE OF ETA 586 REPORT FOR JANUARY TO MARCH, 2002

The sample 586 below illustrates the total counts and dollar amounts that the state would report in each applicable cell of the 586 for the first quarter of 2002, if all three of the preceding scenarios occurred.

ETA 586A State UI	Line No.	New Claims (1)	Persons Establishing Benefit Years (2)
Intrastate	101	2	3
Interstate Recvd. as Paying State	102		

State UI	Line No.	Weeks Compensated (4)	Benefits Paid (5)	Prior Weeks Compensated (6)	Prior Benefits Paid (7)
Intrastate	101	6	$900	2	$200
Interstate Recvd. as Paying State	102				

APPENDIX C

REPORT VALIDATION SUMMARY FORMAT

UIDV Report Viewer

100% 1 of 1

Report Validation Summary : Population 8 - for period 1/1

Report/Cell	Description	Validation Count	Reported Count	% Dupl. Errors	Adjusted Validation Count	Count Difference	Count% Difference	Count Pass/Fail	Time Lapse Errors	Time Lapse Pass/Fail	Commen
S100W100-1	UI Decisions	1,075	0			1,075	100.00%				
S100W100-3	FE Decisions	8	0			8	100.00%				
S100W100-5	CX Decisions	1	0			1	100.00%				
S100B210-8	Single Disposed of	1,009	0			1,009	100.00%				
S100B210-10	MC Disposed of	36	0			36	100.00%				
S100C000-14	Total Claimant	727	0			727	100.00%				
S100C000-16	Total Employer	347	0			347	100.00%				
S100C000-18	Total Other	0	0			0	0.00%				
S100C010-14	In favor of Claimant	190	0			190	100.00%				
S100C010-16	In favor of Employer	151	0			151	100.00%				
S100C010-18	In favor of Other	0	0			0	0.00%				
S100D400-21	VQ	287	0			287	100.00%				
S100D400-22	MC	506	0			506	100.00%				
S100D400-23	RSW	35	0			35	100.00%				
S100D400-24	A & A	81	0			81	100.00%				
S100D400-25	LD	0	0			0	0.00%				
S100D400-26	Other	165	0			165	100.00%				
5130	Total Total	4,648	0	9.25%	4,218	4,218	100.00%	Fail			
9054W2	Interstate Total	753	0			753	100.00%				
9054WQ	Interstate Total	61	0			61	100.00%				
9054	Total Total	814	0	4.75%	775	775	100.00%	Fail		Pass	

APPENDIX D

DATA ELEMENT VALIDATION WORKSHEETS

UI Data Validation System (For Population 8 - Appeals Descisions, Lower Authority) - [U010 - Data Validation Sampling.]

File Report Validation Work Sheets Utilities Window Help

Validation Population 8
Lower Authority Appeals Decisions
Decision Date Falls Within Reporting/Validation Period

Summary of Samples Taken | Sample Detail

TransAction Types	Sample Types
(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority	Random Sample
(33/8.33-8.40) Single Claimant Appeals Decisions, Lower Authority	Missing Subpopulations
(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority	Outliers
(34/8.45-8.55) Multiclaimant Appeals Decisions,Lower Authority	Minimum Sample

Exit

Reporting Period - 1/1/01 - 3/31/01 | DB: UIDV | 10/16/01

UI Data Validation System (For Population 8 - Appeals Descisions, Lower Authority) - [U010 - Data Validation Sampling.]

File Report Validation Work Sheets Utilities Window Help

Validation Population 8
Lower Authority Appeals Decisions
Decision Date Falls Within Reporting/Validation Period

Summary of Samples Taken | **Sample Detail**

(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority Number samples inspected: 7

	Seq	OBS	SubPop	1 (Step 1E) SSN	2 (Step 1E) Docket # Unique ID	Pass /Fail	3 (Step 2) Type of UI Program	Pass /Fail	4 (Step 4) Program Type	Pass /Fail	5 (Ste Intr Inte
	1	760	8.12	999999999	257401001	1	Regular UI - UI	1	UI-MN	1	Intr
	2	41	8.1	999999999	918200004	0	Regular UI - UI	0	UI-MN	0	Intr
	3	511	8.11	999999999	77601001	0	Regular UI - UI	0	UI-MN	0	Intr
▶	4	627	8.11	999999999	1051400001	0	Regular UI - UI	0	UI-MN	0	Intr
	5	520	8.11	999999999	86801001	0	Regular UI - UI	0	UI-MN	0	Intr
	6	1029	8.35	999999999	274101001	0	Regular UI - UI	0	UI-MN	0	Intr
	7	474	8.10	999999999	812500003	0	Regular UI - UI	0	UI-MN	0	Intr
	8	804	8.18	999999999	995000002		Regular UI - UI		UI-MN		Intr

	Match Errors	Type of UI Prog	ProgramType	Intra/Inter	Lower Athority A	Single/MultiClair	Multi Claima
▶	1	1	1	1	0	0	1

Refresh Counts

Exit

Reporting Period - 1/1/01 - 3/31/01 | DB: UIDV | 10/16/01

UI Data Validation System (For Population 8 - Appeals Descisions, Lower Authority) - [U010 - Data Validation Sampling.]

File Report Validation Work Sheets Utilities Window Help

Validation Population 8
Lower Authority Appeals Decisions
Decision Date Falls Within Reporting/Validation Period

Summary of Samples Taken | **Sample Detail**

(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority Number samples inspected: 7

5 (Step 5) Intra/ Inter	Pass /Fail	6 (Step 24A) Lower Authority Appeal	Pass /Fail	7 (Step 25A) (Step 25B) Single/Multi Claimant	Pass /Fail	8 (Step 25B) Multi-Claimants	Pass /Fail	9 (Step 26) Appellant	Pass /Fail	10 (Step 2 In Favo of Appella
Intrastate-0170	1	LOWER-AP	0	S-0000	0		1	Employer-EM	0	N-N
Intrastate-0170	0	LOWER-AP	0	S-0000	0		0	Claimant-CL	0	Y-Y
Intrastate-0860	0	LOWER-AP	0	S-0000	0		0	Claimant-CL	0	N-N
Intrastate-0700	0	LOWER-AP	0	S-0000	0		0	Claimant-CL	0	N-N
Intrastate-0141	0	LOWER-AP	0	S-0000	0		0	Claimant-CL	0	N-N
Intrastate-0140	0	LOWER-AP	0	S-0000	0		0	Claimant-CL	0	N-N
Intrastate-0520	0	LOWER-AP	0	S-0000	0		0	Employer-EM	0	Y-Y
Intrastate-0840		LOWER-AP		S-0000				Employer-EM		Y-Y

Match Errors	Type of UI Prog	ProgramType	Intra/Inter	Lower Athority A	Single/MultiClair	Multi Claima
1	1	1	1	0	0	1

Refresh Counts

Exit

Reporting Period - 1/1/01 - 3/31/01 | DB: UIDV | 10/16/01

UI Data Validation System (For Population 8 - Appeals Descisions, Lower Authority) - [U010 - Data Validation Sampling.]

File Report Validation Work Sheets Utilities Window Help

Validation Population 8
Lower Authority Appeals Decisions
Decision Date Falls Within Reporting/Validation Period

Summary of Samples Taken | **Sample Detail**

(33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority Number samples inspected: 7

Pass /Fail	11 (Step 32) Filed Date	Pass /Fail	12 (Step 28) Decision Date	Pass /Fail	13 (Step 29A) Time Lapse	Pass /Fail	14 (Step 30A) Disposed of by Decision	Pass /Fail	15 (Step 31) Issue Code	Pass /Fail
0	3/7/01	1	3/14/01	1	7	1		0	MC - 2	0
0	11/10/00	0	3/26/01	0	136	0		0	VL - 11	0
0	1/16/01	0	3/2/01	0	45	0		0	MC - 2	0
0	12/26/00	0	3/1/01	0	65	0		0	MC - 2	0
0	1/19/01	0	3/5/01	0	45	0		0	MC - 2	0
0	3/12/01	0	3/23/01	0	11	0		0	OTHER - 6	0
0	2/1/01	0	3/15/01	0	42	0		0	MC - 2	0
	11/27/00		3/13/01		106				SUITABLE WOI	

Appellant Errors	In Favor Of App	Filed Date	Decision Date	Time Lapse	Disposed Of By	Issue Code
0	0	1	1	1	0	0

Refresh Counts

Exit

Reporting Period - 1/1/01 - 3/31/01 | DB: UIDV | 10/16/01

APPENDIX E

SUMMARY AND ANALYTICAL REPORT FORMAT

UIDV Report Viewer

100% 1 of 2

Validation Population 8 - Lower Authority Appeals Decisions(Single Claimant) - Quality Summary - for period 1/1/01 - 3/31/01

Samples	Total Sample	Invalid Decisions					Reporting Characteristic Errors										
		1 (Step 1E) Match	6 (Step 24A) Lower Authority Appeal	14 (Step 30A) Disposed of By Decision	Total Errors	Percent Error	3 (Step 2) Type of UI Program	4 (Step 4) Program Type	5 (Step 5) Initial Inter	7 (Step 25A) (Step 25B) Single/ Multi-Claimant	8 (Step 26) Multi-Claimants	9 (Step 26) Appellant	10 (Step 27) In Favor of Appellant	15 (Step 31) Issue Code	Total Errors	Percent Error	11 (Step 32) Filed Date
33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority	7	0	2	0	2	28.57%	0	3	0	0	0	0	0	0	3	42.86%	1
Total Random	7	0	2	0	2	28.57%	0	3	0	0	0	0	0	0	3	42.86%	1

Text Object

UIDV Report Viewer

100% 2 of 2

Validation Population 8 - Lower Authority Appeals Decisions(Single Claimant) - Quality Summary - for period 1/1/01 - 3/31/01

		Invalid Decisions					Reporting Characteristic Errors										
		1 (Step 1E)	6 (Step 24A)	14 (Step 30A)			3 (Step 2)	4 (Step 4)	5 (Step 5)	7 (Step 25A) (Step 25B)	8 (Step 26)	9 (Step 26)	10 (Step 27)	15 (Step 31)			11 (Step 32)
Samples	Total Sample	Match	Lower Authority Appeal	Disposed of By Decision	Total Errors	Percent Error	Type of UI Program	Type	Initial Inter	Single/ Multi-Claimant	Multi-Claimants	Appellant	In Favor of Appellant	Issue Code	Total Errors	Percent Error	Filed Date
33/8.1-8.44) Single Claimant Appeals Decisions, Lower Authority	7	1	0	0	1	14.29%	0	0	2	1	0	0	2	1	6	85.71%	0
34/8.45-8.55) Multiclaimant Appeals ecisions,Low er Authority	3	0	0	0	0	0.00%	0	0	0	0	0	1	0	0	1	33.33%	0
Total Supplemental	10	1	0	0	1	10.00%	0	0	2	1	0	1	2	1	2	20.00%	0

Text Object

APPENDIX F

INDEPENDENT COUNT

APPENDIX F IS ONLY APPLICABLE TO STATES THAT GENERATE THE FEDERAL REPORTS FROM A DETAILED RECORD FILE, WHETHER ACCUMULATED DAILY, WEEKLY, MONTHLY OR AS A SNAPSHOT. THIS EXTRACT FILE CANNOT BE USED FOR VALIDATION AND STATES MUST CONDUCT AN INDEPENDENT COUNT.

A. PURPOSE

The validation exercises described in Module 1 and those outlined in Module 2 address the validation of all UI transactions that have been *included* in federal reports. However, it is also important to confirm that no transactions have been improperly or systematically *excluded* from the federal reports. Although this problem is a difficult one, it is important to ensure that funding, economic statistics, and performance outcomes have not been biased by the systematic elimination of particular types of transactions.

This module is not applicable for states that produce the report validation files directly from the benefits database, because the report validation reconstruction process itself constitutes an independent count. When the report validation file is produced from the same file used to produce the federal reports, it is necessary to conduct an independent count in order to identify any errors that may have occurred in the federal reports, since these errors will be duplicated in the reconstruction file.

Table F.1 on page F.4 provides the criteria required to conduct the independent count.

B. MATERIALS (ADP STAFF)

Task 1. Produce Independent Count Files

ADP staff create independent total counts of transactions from the main database for comparison with counts generated on the extract files used to create the federal reports. In general, the way that the independent count is created is the opposite of how the report validation file is created. The report validation file should be programmed from the bottom up, by selecting only the issue codes and criteria indicated on the file specification. However, the independent count should be programmed from the top down, by including all issue codes relevant to a population and then subtracting observations not indicated on the file specification.

Table F.1 describes independent count criteria for each population.

Task 2. Produce Independent Count Summary Spreadsheet

The independent count summary spreadsheet on page F.7 helps the state to compare the reported and validation counts with the results of the independent count procedure. Validation staff enter the results of the independent count and the reported and validation counts onto the spreadsheet.

Task 3. Transfer Counts from Independent Count Summary Spreadsheet to the Report Validation Summary Spreadsheet

See Module 1 for an explanation of the purpose and construct of the Report Validation Summary.

TABLE F.1

INDEPENDENT COUNT CRITERIA, BY POPULATION (USING QUERY CAPABILITY)[1]

Population Description	Independent Count Criteria	Validation Count and Reported Count Criteria
1 - Weeks Claimed	Count all dates when weeks were claimed within the month. Subtract duplicates, ineligible claims, special programs.	Validation Count: sum of subpopulations 1.1-1.6 Reported Count: ETA 5159, sum of lines 201-203, columns 9 and 12
2 - Final Payments	Recreate the logic used to count final payments.[2] Subtract special programs.	Validation Count: sum of subpopulations 2.1-2.4 Reported Count: sum of ETA 5159, line 303, columns 26-28
3/3a - Claims Filed	Count all claims filed dates within the month. Subtract duplicates, special programs, and filed dates for interstate agent claims (if the state maintains these dates).	Validation Count: sum of subpopulations 3.1-3.21, 3.25-3.27, 3.41-3.46 Reported Count: ETA 5159, lines 101-103, columns 2, 3, 4, 6, and 7
4 - Payments	Count all payment mailed dates within the month. Subtract replacement checks. Subtract duplicate week-ending dates but not duplicate mail dates (if the state pays biweekly).	Validation Count: sum of subpopulations 4.1-4.42, 4.52-4.53, columns 10-12 (dollars paid) Reported Count: ETA 5159, sum of line 302, columns 14, 17 (amounts compensated)
5 - Nonmonetary Determinations/ Redeterminations	Count all notice mailed dates within the quarter. For informal determinations without a mailed date, include determination date. Subtract issue codes that do not represent reportable nonmonetary determinations, duplicates, or special programs.	Validation Count: sum of subpopulations 5.1-5.70 Reported Count: sum of ETA 207, lines 101, 103, 105, column 1
6 - Appeals Filed, Lower Authority	Count all appeal filed dates within the month.	Validation Count: count of subpopulation 6.1 Reported Count: ETA 5130, line 200, column 8
7 - Appeals Filed, Higher Authority	Count all appeal filed dates within the month.	Validation Count: count of subpopulation 7.1 Reported Count: ETA 5130, line 200, column 9
8 - Appeals Decisions, Lower Authority	Count all decision mailed dates within the month being validated.	Validation Count: sum of subpopulations 8.1-8.52, 8.54-8.55 Reported Count: ETA 5130, line 100, columns 1,3,5
9 - Appeals Decisions, Higher Authority	Count all decision mailed dates within the month being validated.	Validation Count: sum of subpopulations 9.1-9.20, 9.22, 9.23 Reported Count: ETA 5130, line 100, columns 2,4,6
10 - Pending Appeals, Lower Authority	Count all appeals without a decision date at the end of the month.	
11 - Pending Appeals, Higher Authority	Count all appeals without a decision date at the end of the month.	
12 - Overpayments Established	Count all overpayments established dates within the quarter.	Validation Count: sum of subpopulations 12.1-12.16 Reported Count: ETA 227, lines 101-107, columns 1 and 2
13 - Overpayment Reconciliation Transactions	Count all reconciliation activities within the quarter.	Validation Count: sum of subpopulations 13.1-13.34 Reported Count: ETA 227, lines 202-207, columns 5-8
14 - Age of Overpayments	Count all overpayments with a balance greater than zero at the end of the quarter.	

[1]Populations 10, 11, and 14 cannot be reconstructed from a statistical file, so an independent count is not necessary.

[2]There are multiple ways to specify how to create an independent count of final payments.

C. METHODOLOGY (VALIDATION STAFF)

Task 1

The ADP staff generate counts from the main database, according to the specified independent count criteria (Table F.1). Compare the counts from the database with counts generated on the extract files used to create the federal reports.

Task 2

Either manually enter or have the ADP staff download the results onto the independent count summary spreadsheet. Also enter the corresponding validation counts and reported counts from the report validation summary spreadsheets onto the independent count summary spreadsheet.

Task 3

Compare the results of the independent count with the corresponding adjusted validation counts and reported counts.

Task 4

Calculate the % Differences by dividing both the reported count and the adjusted validation count by the independent count. **If the resulting figure is greater than plus or minus two percent, the population fails.**

D. EXAMPLE

Figure F.1 shows a sample of an independent count summary spreadsheet for lower authority appeals decisions. The columns for reported counts and adjusted validation counts are either manually completed or are downloaded from the report validation summary spreadsheet. The independent count is derived by generating a count of all lower authority appeals decision dates that fall within the period being validated. Percentage differences between the reported count and the independent count and between the adjusted validation count and the independent count are calculated according to the following formula:

Reported count or adjusted validation count minus the independent count divided by the independent count times 100 equals the % difference.

Example: (90-86)/86 * 100 = 4.65% (fail)
Figure F.1

FIGURE F.1

VALIDATION POPULATION 8

INDEPENDENT COUNT

SUMMARY SPREADSHEET

POPULATION	REPORT/RECONSTRUCTION DATA SOURCE	REPORTED COUNT	ADJUSTED VALIDATION COUNT	INDEPENDENT COUNT*	% DIFFERENCES		ADJUSTED INDEPENDENT COUNT	PASS/ FAIL	COMMENTS
					REPORTED COUNT/ INDEPENDENT COUNT	ADJUSTED VALIDATION COUNT/ INDEPENDENT COUNT			
1									
2									
3									
4									
5									
6									
7									
*8	extract file	90	90	86	4.65%	4.65%		FAIL	
9									
10									
11									
12									
13									
14									

*'The independent count may be higher than the validation count if it includes observations in issue codes not specified on the record layouts.

An adjusted validation count may be calculated in these circumstances, and should be explained in the comments column.

E. RESULTS

The results of this procedure are compared both with the reported count and the adjusted validation count from the report validation summary spreadsheet. The independent count may legitimately be higher than the validation count if it includes observations that deliberately had not been specified on the report validation files (e.g., certain issue codes or payment types that are not reported). Otherwise, if the differences in counts are within 2%, no action is required. If they are significant, research must be conducted to determine the source of the problem and the solution.

NOTE: Although the threshold is set at ±2% for each population as a whole, it is quite possible that there may be a significant percentage of transactions in a subpopulation that were either over-reported or under-reported. State and regional validation staff should investigate these occurrences and record the causes of such variances in the comments column of the summary spreadsheet.

APPENDIX G

DUPLICATION DETECTION CRITERIA

DUPLICATE DETECTION CRITERIA, BY POPULATION

States that do not have a unique ID for a population should not conduct duplicate detection for that population.

Population Description	Duplicate Detection Criteria	Data Elements
1 - Weeks Claimed	The **week ending date** of the week being claimed should not appear twice for identical SSNs.	SSN (Col. 2), Week-ending date of week claimed (Col. 1)
2 - Final Payments	The **SSN** should not appear twice (unless a final payment has been made for two different benefit years).	SSN (Col. 2), Mail date of final payment date (Col. 9)
3 - Claims Filed 3a - Additional Claims	For new claims (including new CWC claims), additional and reopened claims, and transitional claims, the same **SSN** should not appear twice with the same file date and/or separation date (for Population 3a).	SSN (Col. 1), Date claim filed (Col. 2), Type of claim (Col. 4), Separation Date (Col. 8)
4 - Payments	The **week ending date of the compensated week, dollar amount, and mail date** should not appear twice for identical SSNs (including CWC payments). Adjustments are not included: Subpopulations 4.33 – 4.42.	SSN (Col. 1), Dollar amount (Cols. 10-14), Week-ending date of week claimed (Col. 15), Mail date (Col. 16)
5 - Nonmonetary Determinations	If the State maintains a unique identifier for each issue, the **unique identifier** should not appear twice for the same SSN.[a]	SSN (Col. 1), Unique Identifier (Col. 2, if available)
12 - Overpayments Established	If the SSN appears twice, the **unique identifier** should not appear twice. If there is no unique ID, the **date the overpayment was established** should not be listed twice unless the **dollar amounts of the overpayments** are different.[b]	SSN (Col. 1), Unique Identifier (Col. 2, if available) Date overpayment established (Col. 7), Dollar amount (Cols. 8 and 9)
13 - Overpayment Reconciliation Activities	If the State maintains a unique identifier for each overpayment reconciliation activity, the **unique identifier** should not appear twice. Offsets will have unique identifiers in almost all States. For waivers and writeoffs, the same **SSN** should not appear twice (except for offsets).[b/c]	SSN (Col. 1), Unique Identifier (Col. 2, if available) Date of reconciliation activity (Col. 5), Type of reconciliation activity (Col. 6)
14 - Age of Overpayments	If the SSN appears twice, the **unique identifier** should not appear twice.[b]	SSN (Col. 1), Unique Identifier (Col. 2, if available)

[a] Otherwise, it is difficult to detect duplicates with certainty, because a state could legitimately issue multiple determinations for the same issue type, affecting the same week, detected and issued on the same day, to the same claimant. Validators should research such cases, however, to determine whether the system was double counting the same issue.

[b] If the state does not maintain a unique identifier, then duplicate detection is not possible.

[c] Otherwise, it is difficult to detect duplicates with certainty, because a state could process two payments from the same claimant, for the same amount on the same day. Validators should research such cases, however, to determine whether the system was double counting the same payment.