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UCFE INSTRUCTIONS FOR STATE AGENCIES

Chapter X - PROGRAM REVIEW, AUDIT And REPORTING

1. UCFE Programs of Verification, Visiting, and Internal Audit.

a. Verification of Information on Completed Forms ES-931. Effective administration of the UCFE program requires assurance that Federal agencies are completing Forms ES-931 correctly, and that they are properly reporting Federal civilian service and wages. State agencies are in the best position to carry out the major portion of a program by verifying the accuracy of Federal agency reporting of wage and separation information. One required method of verification is the submittal of verification requests to Federal agency payroll offices (Form ES-936).

b. Visits to Federal Agency Installations. SESA representatives should also visit Federal agency payroll and personnel offices, as needed, in order to ascertain whether prescribed procedures are being complied with and whether Federal agency staff understand their responsibilities with respect to the UCFE program (Form ES-939).

c. Internal Review of Federal Agency UCFE Operations. In addition to the verification and visiting programs, Federal agencies have been requested to include a review of UCFE activities in their internal inspection and audit programs. The U.S. General Accounting Office reviews the accuracy of wages reported to State agencies on Forms ES-931 as part of its regular site audits of Federal agency payroll accounts, and inspectors of the Office of Personnel Management periodically review, and report findings concerning, individual Federal agency personnel practices and procedures to ensure compliance with UCFE requirements.

2. Introduction to Form ES-936, Request for Verification of UCFE Wage and Separation Information Furnished on Form ES-931.

a. Purpose and Use. Form ES-936 is to be used to verify the accuracy of data recorded on Form ES-931 (or equivalent, e.g. IRS computer printout) by a Federal agency payroll office and to assist in determining whether the Federal agency payroll office is adequately carrying out its responsibilities with respect to the UCFE program. If SESA review of a completed Form ES-936 reveals inadequacies, a visit to the Federal installation by a SESA representative should be scheduled.

The verification program should be controlled by SESA's central office through use of its Form ES-931 file. A minimum of one Form ES-936 should be sent by a SESA to each Federal agency payroll office:

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(1) which is located in the State, outside the United States, or multistate payroll offices; and

(2) which has completed and returned one or more Forms ES-931 (or equivalent) during the latest 6-month period ending June 30 or December 31. The SESA may send more than one Form ES-936 request to an individual payroll office if there is a need for additional verification; however, no more than 10 such requests should be sent to a single payroll office in any 6-month period. For centralized (or multistate) payroll offices, each SESA's maximum should be limited to 3 such requests in any 6-month period. A SESA may also send Forms ES-936 to selected payroll offices located in other States.

The responsibility for verification, except for centralized payroll offices, is thus placed on the SESA of the State in which the payroll office is located.

The verification should be completed by the end of the first month following the latest 6-month period (e.g., for completed Forms ES-931 received during the January-June period, all Form ES-936 requests should have been sent in sufficient time to be returned to the SESA no later than July 31). A Form ES-936 should not be sent until at least 15 days after SESA received the corresponding completed Form ES-931 to avoid any possible confusion in the Federal agency caused by an earlier verification request. Item 1 of Form ES-936 may be modified by a SESA which requires information as to weeks of employment.

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b. Face of Form ES-936

**REQUEST FOR VERIFICATION OF UCFE WAGE
AND SEPARATION INFORMATION FURNISHED ON FORM ES-931**

(State Agency Name) Date New Claim Filed:
Local Office: Date of Request:
Contact:
Telephone:

SECTION I. IDENTIFICATION

1. Name (Last, First, Middle, Maiden (if any)) 2. Social Security Number 3. Birth Date (MM/DD\YY)

4. Position Title 5. Place of Employment (State, City or Country) 6. Separation Date (MM/DD\YY)

TO: (FEDERAL AGENCY, 3 DIGIT FEDERAL AGENCY CODE AND ADDRESS)

SIGNATURE STATE AGENCY REPRESENTATIVE TITLE DATE

INSTRUCTIONS: The U.S. Department of Labor has requested us to verify periodically the accuracy of information previously furnished by Federal Agencies on Form ES-931, Request for Wage and Separation Information-UCFE. Please have an authorized official personally review records from which the Form ES-931 cited above was completed in accordance with your agency's instructions pertaining to the Unemployment Compensation for Federal Employees program (5 U.S.C. 8501 et seq.).

SECTION II. FEDERAL AGENCY TO COMPLETE

1. Post "Total Employee Wages" from payroll record(s); do not copy from file copy of completed Form ES-931. If a pay record for any portion of the period covered has been sent to the National Personnel Records Center, it should be obtained before item 1b is completed and the State agency should be notified concerning the delay.

	<u>Yes</u>	<u>No</u>
a. Do you have payroll record(s) for this employee? If "NO", explain:	___	___
b. For the Base Period beginning _____ and ending _____ provide Total Employee Wages: \$ _____		
2. a. Do you have a copy of the Form ES-931?	___	___
b. Do you have a file to maintain completed Forms ES-931?	___	___
3. Was the State (or if outside the U.S., country) reported on Form ES-931, the same as shown on SF-50, "Duty Station" or, if SF-50 is not used, the same duty station or equivalent entry as shown on the separation document your agency uses?	___	___
4. Were (a) severance pay, or (b) lump sum payment for terminal annual leave, reported separately on Form ES-931, and not included as base-period wages?	___	___

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d. **Number of Copies and Distribution.** Sufficient copies of Form ES-936 will be prepared to provide the number necessary for SESA use and one copy for retention by the Federal agency; the original and at least one copy will be submitted to the appropriate Federal agency payroll office. The State office should retain at least one copy for follow-up purposes. The Federal agency will return the completed form in a window envelope to the address contained in the return-address space. **Indicia return envelopes should not be included in mailings to Federal agencies because they are required to use their own envelopes.** In addition, the SESAs, at their option, may use a transmittal letter when forwarding Form ES-936.

e. **Preparation.** All of the items in Section I, Identification, to be completed by SESA, are the same as those on Form ES-931. Except for the dates of the base period shown on the cited Form ES-931, to be entered by SESA in item 1b of Section II of Form ES-936, the Federal agency will complete Section II, continued on the reverse of the form.

f. **UCFE - SESA Action When Form ES-936 Is Not Returned.** A control file or record of pending Forms ES-936 will be maintained by the SESA. When a reply to the Form ES-936 request is not received within 20 days (30 days for verifications sent to locations outside the U.S.) after the verification request was sent, a follow-up Form ES-936, identical to the original form but marked "SECOND REQUEST" (underscored in red), should be sent.

If a reply to Form ES-936 has not been received after all reasonable efforts to obtain it have been exhausted, three partially completed copies of the form should be referred to the ETA Regional office for appropriate follow-up action.

g. **UCFE - SESA Action When Form ES-936 Is Returned.** Upon receipt of a completed Form ES-936, the data on Form ES-931 (or equivalent) and Form ES-936 should be compared. A review of completed Forms ES-936 will identify those Federal agency payroll offices which have failed to follow prescribed procedures. SESAs should not take exception to minor reporting deviations, such as a variation of a few dollars in the total amount of wages reported, as shown by the Federal agency on the two forms, where it would have no effect on the claimant's benefits rights.

If the total difference between the dollar amount on the Form ES-931 and the Form ES-936 is \$10.00 or less, resolution is not required.

Personal visits by a member of SESA staff should be made as a means of following up on those Federal agency payroll offices

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which are located within the State, if data on completed Forms ES-936 indicate a serious misunderstanding of the reporting requirements.

Examples of cases requiring a visit to a Federal agency are:

(1) the total amount of wages shown in item 1.b. of Form ES-936 differs significantly from the total reported on Form ES-931 (or equivalent) so that the error cannot be explained by a few days' difference in the period used, or the amount would affect the claimant's benefit rights had it been reported on Form ES-931 (or equivalent);

(2) the Federal agency indicates that it does not have instructions on the program;

(3) reasons for separation are not as adequate as the reasons shown on SF-50 (or equivalent separation document); or

(4) Federal agency requests a visit. If the payroll office is located outside the State but within one of the 50 States, the District of Columbia, the Commonwealth of Puerto Rico, or the Virgin Islands, procedures outlined in the following subchapter should be followed.

If the payroll office is located outside the United States and the data on the completed Form ES-936 indicate an area of misunderstanding, a full explanation should be sent by letter to the payroll office. If necessary, reconciliation or correction of Form ES-931 (or equivalent) should be obtained. If problems with payroll offices located outside the United States cannot be corrected, the facts should be submitted to the ETA Regional Office. That office will transmit the information to the ETA National Office so that correction can be obtained through the Federal agency's UCFE liaison officer. If a returned Form ES-936 indicates that a Form ES-931 (or equivalent) has not been completed by the payroll office for an employee, the SESA should investigate in person (if payroll office is in the State) to determine whether there has been an error in completion of the form or whether fraud has been committed with respect to the completion of Form ES-931 (or equivalent). A completed record of the results of such an investigation should be kept for review by ETA.

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3. **Sample of Form Letter Which May Be Sent with Verification Form ES-936.**

(DATE)

STATE (Name and address)

FEDERAL AGENCY (Name and address)

The Department of Labor has requested that we periodically mail the attached verification form, ES-936, to all Federal agencies. Please complete Section II of the form. Item 1.b. should be completed after checking your wage and personnel records for the individual named on the form so that we can verify the information you submitted at an earlier date on a Form ES-931, Request for Wage and Separation Information. If the total difference between the dollar amounts on the Form ES-931 and the Form ES-936 is \$10.00 or less, resolution will not be required.

Please complete and return the Form ES-936 within the required four workdays and return to the address as noted on the reverse of the form. Should you have any question, please contact me on ().

Sincerely,

(SESA OFFICIAL)

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4. Introduction to Form ES-939, UCFE Program - Federal Agency Visit Report.

A SESA may request the ETA Regional Office to arrange for a visit, in accordance with a. or b. below, to a Federal installation (including centralized or multistate Federal agency payroll offices) located elsewhere within the region, or in a different region, when the situation warrants such action.

The reason shown for the request should contain sufficient detail as to specific cases in which inadequacies occurred so that the SESA (or the ETA Regional Office) representative making the visit may review the particular problem cases with the appropriate official of the Federal installation visited.

a. **Federal Installation Located within the Region.** The ETA Regional Office will arrange for the SESA in the State in which the Federal installation is located to make the visit, or, if more practicable, will designate a Regional Office staff member to make the visit.

b. **Federal Installation Located in a Different Region.** The ETA Regional Office in the requesting State's region will transmit the request to the ETA Regional Office in the region in which the visit is to be made. That office will arrange for the SESA in the State in which the Federal installation is located to make the visit or, if more practicable, will designate a Regional Office staff member to make the visit.

c. **Preparation and Distribution of Forms ES-939.** The SESA (or the ETA Regional Office) making the visit will complete sufficient copies of Form ES-939 to provide one copy for the SESA initiating the request. The regular number of copies of Form ES-939 will be sent, by the visiting SESA, to the ETA Regional Office in that State's region at the end of the quarter, in accordance with the instructions in subchapter 4 of this Chapter. The extra copy will be sent to the requesting SESA via the ETA Regional Office from which the request was received. The transmittal of this copy should not be delayed to the end of the quarter but should be sent immediately after preparation.

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d. Page 1 of Form ES-939

(STATE AGENCY NAME)
UCFE PROGRAM-FEDERAL AGENCY VISIT REPORT

SECTION 1. IDENTIFICATION DATA

1. FEDERAL AGENCY NAME AND ADDRESS (PER STATE RECORDS) 2. CORRECT NAME AND ADDRESS (IF DIFFERENT)

3. VISIT MADE BY: (NAME, TITLE and DATE)

4. SPECIFIC REASON FOR VISIT

5. NAMES AND TITLES OF PERSONS CONTACTED

SECTION II. FEDERAL AGENCY FUNCTIONS

INSTRUCTIONS: Review the Federal Agencies UCFE Program based on the questions provided below. Any "NO" answers should be fully explained on sheet provided. If additional space is required provide a separate attachment.

		General Administration	
		YES	NO
1.	Does the Federal agency have a designated UCFE Program Manager responsible for the overall UCFE program?	—	—
2.	Were copies of instructions issued by the U.S. Department of Labor distributed to and executed by appropriate units at installations of the agency?	—	—
3.	Were current procedures and operating instructions issued by the Federal agency?	—	—
4.	Did the Federal agency by August 1, provide the name(s), title(s), address(es) and telephone number(s) of the designated UCFE Program Manager and the UCFE Liaison(s)?	—	—
5.	Does the Federal agency have an address to have claims sent when the Form SF-8 has not been presented by the claimant?	—	—
6.	Is the address to send UCFE bills, detailed listings and related correspondence current?	—	—
7.	Has the Federal agency provided copies of instructions and informational material to the U.S. Department of Labor prior to issuance?	—	—
8.	Did the Federal agency cooperate fully during the review?	—	—
9.	Did the Federal Agency administrative offices which prepares UCFE forms have copies of UCFE Instructions for Federal agencies?	—	—

If no, provide a copy.

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e. Page 2 of Form ES-939

- | | YES | NO |
|--|-----|----|
| 10. Did the Federal agency have an adequate supply of Forms SF-8? | — | — |
| 11. Were you able to observe a separation briefing where an SF-8 was provided? | — | — |
| 12. Review recently completed forms listed below and indicate the number reviewed.
ES-931 ___ ES-931A ___ ES-934 ___ ES-936 ___ | | |
| 13. Were the above listed forms completed within four workdays of receipt? | — | — |
| 14. Does the agency maintain a control record for incoming and outgoing forms? | — | — |
| 15. Were records requested from the National Personnel Records Center as required to complete UCFE Forms? | — | — |

ES-931/ES-931A/ES-934/ES-936

- | | YES | NO |
|---|-----|----|
| 1. Did the agency understand what constitutes Federal Civilian Service? | — | — |
| 2. Did the Federal agency copy of completed Forms ES-931 show the 3-Digit Federal Agency Code? | — | — |
| 3. Was the Duty Station correctly identified? | — | — |
| 4. Was date of separation or last day of active pay status entered correctly? | — | — |
| 5. Was reason for separation shown as complete as the SF-50 or equivalent? | — | — |
| 6. When separation information on the SF-50 is inadequate was adequate information provided on the ES-931? | — | — |
| 7. Are payroll records and the ES-931 consistent? | — | — |
| 8. Was non-pay status (not separated) explained? | — | — |
| 9. When wage reporting (when earned vs. when paid) is inconsistent with State reporting requirements, does the Federal agency advise the State? | — | — |
| 10. Were Forms ES-931 and ES-931A completed correctly? | — | — |
| 11. Did the Federal agency respond timely and accurately to the Form ES-936? | — | — |
| 12. Was the ES-936 completed and verified by other than the individual who completed the ES-931? | — | — |
| 13. Are ES-934's referred to appropriate party? | — | — |
| 14. Does the Federal agency notify the State Employment Security Office when a former federal employee refused and offer of employment? | — | — |

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f. **Page 3 of Form ES-939**

APPEALS

YES NO

- | | | | |
|----|--|---|---|
| 1. | Does the Federal agency appeal State Financial and Non-monetary determinations when the determination(s) are inconsistent with Federal Findings? | — | — |
| 2. | Are determinations and hearing notices referred to the appropriate office? | — | — |
| 3. | When not able to attend a scheduled appeal hearing does the Federal agency provide sufficient information to be included in the record to protect their interests? | — | — |

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g. **Page 4 of Form ES-939**

UCFE PROGRAM-FEDERAL AGENCY VISIT REPORT -CONTINUED

REMARKS: For each "NO" answer, list below by item number and indicate action taken by agency to comply with requirements, including correction of previous errors. If Federal agency visited had little or no UCFE activity, insure that agency understands it's responsibilities for each requirement and agrees to apply UCFE procedure to future activity.

PREPARED BY: (NAME) TITLE DATE

TIME SPENT IN TRAVELING TIME SPENT IN VISITING

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h. **Purpose and Use.** Form ES-939 is to be completed by a SESA or the ETA Regional Office representative, on each visit to a Federal agency installation in connection with the UCFE program. The form should be used when the visit is made, to denote a specific reason for the visit as well as when the visit is for general UCFE program purposes. The only time the form need not be completed is when:

(1) a visit report was completed within the immediately preceding 90 calendar days, and

(2) the previously completed form shows no significant inadequacy or the Federal agency has taken appropriate corrective action.

In addition to Federal agency installations which need, or request, SESA assistance, as determined by review of completed Forms ES-936, visits would be made to those Federal installations which:

(1) in many cases, do not issue SF-8's to their employees, as indicated by claimant's answers to the question which appears on each Form ES-931 and Form ES-931A;

(2) generally give inadequate information on Forms ES-931, ES-931A, or ES-934 or equivalent

(3) have refused to participate in the appeal process;

(4) are often slow in returning the UCFE forms; or

(5) frequently omit, or incorrectly answer, items on the various UCFE forms. Visits also would be made for the SESA of another State upon specific request of the ETA Regional Office.

Information on the status of the UCFE operations of a Federal installation will be useful to ETA, the Federal agency and SESA in evaluating how local installations are meeting their UCFE program responsibilities.

i. **Number of Copies and Distribution.** Sufficient copies of Form ES-939 will be prepared to provide the number necessary for SESA use plus one copy for the Federal installation visited and two copies for the ETA Regional Office. The Federal installation should be given a readable written copy of the completed report by the visitor before he/she leaves the installation, or a typed or reproduced copy should be sent to the Federal installation as soon as possible after the visit.

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SESA should send two copies of each completed Form ES-939 to the ETA Regional Office within 10 days after the end of the quarter in which the visit was made. The Regional office will include one of these copies in its quarterly transmittal of visit reports to the ETA National Office.

When a SESA makes a visit for the SESA of another State, an additional copy of the form will be prepared and sent to the requesting SESA via the appropriate ETA Regional Office.

If no Federal visits are conducted during a calendar quarter, a negative report should be submitted to the appropriate Regional office.

j. Preparation for Visit. Form ES-939 should be used as a checklist during the visit to ensure that each function related to UCFE program responsibility for payroll and personnel offices is covered. Each representative of the region and SESA should have available a copy of:

(1) "UCFE Instructions for Federal Agencies", published by the U.S. DOL; and

(2) FPM Supplement 296-31, "Separations" subtable (selected pages), of the Federal Personnel Manual.

Before visiting a Federal agency installation, the SESA representative should obtain proper clearance and approval, by telephone or in writing, from the supervisor or official in charge of the office or installation. UCFE program visits to civilian payroll and personnel offices on military posts or bases would be cleared with finance or personnel officers, or both; such officials usually hold a military rank. Visits to nonappropriated fund activities should receive approval of the custodians or managers of such funds or, for post or base exchanges, the exchange officer or equivalent official. In clearing such visits, the SESA representative should thoroughly explain the purpose of the visit.

If a Federal agency installation refuses to permit a SESA representative to make a UCFE visit, or does not allow the representative to review pertinent UCFE program documents, he/she should notify the appropriate ETA Regional Office, providing sufficient details and making reference to this Chapter. The ETA will make every effort to resolve the matter at the Regional or National Office level.

k. Instructions for Completion of Form and Conducting the Visit.

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(1). In Section I, "Identification Data," item 4, explain the specific reason for the visit; e.g., when the amount of wages shown on a verification Form ES-936 differs significantly from that reported on the corresponding Form ES-931. Under "Remarks" on page 4, explain the action taken or to be taken by the Federal installation to correct each inadequacy noted.

(2). All questions in Sections II, Federal agency functions are "yes" or "no" answers. Affirmative answers to all of the questions indicate that the Federal installation, at the time of the visit, is performing its UCFE functions satisfactorily. Explain negative answers to any of the questions under "Remarks."

(3). Answers to questions will be made on the basis of the conditions found in the payroll or personnel office when the visit is made. The explanation of negative answers under "Remarks" should specify the corrective action proposed or being taken.

(4). During each visit, the representative should determine whether the payroll and personnel offices are generally complying with UCFE instructions issued by the Federal agency for completing Forms ES-931, ES-931A, ES-934, and ES-936, issuing SF-8's and performing other UCFE program operations.

The representative should determine whether or not the payroll and personnel offices have available copies of the Federal agency's appropriate instructions; he/she should obtain a copy of the UCFE payroll instructions to assist in the review.

(5) The visitor will record separately, in the spaces provided on the lower portion of page 4 of the form the time spent:

- (a) traveling and
- (b) visiting.

The Form ES-939 questionnaire covers the Federal agency's basic UCFE program responsibilities and is used during the visit to record information pertaining to the Federal agency's discharge of its duties and to provide a report of findings.

During the review, DOL staff will attempt to determine if the SESA (local office) has adequately assisted the installation with respect to the UCFE Program and will provide technical assistance if necessary.

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5. **Introduction to Form ETA 8-32, Report of UCFE Activities**

The State agencies are to report to the ETA Regional office every 6 months on the verification activity and Federal agency visits.

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a. Form ETA 8-32

<i>(From Agency Meeting)</i>	
REPORT OF UCFE ACTIVITIES FOR THE 6-MONTH VERIFICATION PERIOD ENDING _____	
ACTIVITY	TOTAL NUMBER
1. Payroll offices in this State (or centralized/multistate offices listed in Guide) to which Forms ES-931 were sent	_____
2. Payroll offices outside U.S. to which Forms ES-931 were sent	_____
3. Forms ES-936 sent	_____
4. Forms ES-936 indicate-	
a. significant error in wage	_____
b. lack of an alphabetical-by-name file of Forms ES-931 or no copy of form in file	_____
c. misunderstanding as to reporting State (or country) of last employment (item 1b, Form ES-931)	_____
d. misunderstanding as to reporting (1) severance pay; or (2) lump-sum payment for terminal annual leave	_____
e. incomplete reason(s) for separation (item 3d, Form ES-931)	_____
f. lack of UCFE instructions	_____
g. desire to have a visit by State agency representative	_____
5. Based on the above verification activity-	
a. visits made during the 6-month period of this report	_____
b. visits scheduled (or made) for the next 6-month period following this report	_____
6. Visits which were made during the period of this report	_____
<i>(Note: reports are submitted quarterly to the appropriate ETA regional office; do not attach Forms ES 935 (MA 8 31) to this report.)</i>	

Use from June 30, 1988 to December 31, 1988.

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b. Number of Copies and Distribution. The SESA will send two copies of a report to the ETA Regional Office every 6 months on the verification activity and Federal agency visits conducted during the completed verification period. One copy of the report, which is due in the ETA Regional Office by the 15th day of the second month after the verification period, will be transferred to the ETA National Office. Thus, for the January 1 through June 30 verification period, the report is due on or before August 15; for the July 1 through December 31 verification period, the report is due on or before February 15.

c. Review of ETA 8-32. The ETA Regional Office will periodically review the reports and related data with the State agencies to determine:

(1) the effectiveness of the verification and Federal agency visiting program; and, when appropriate,

(2) the need for further action by the ETA.

6. Federal Agencies Contracting for UCFE Services.

Some Federal agencies have procured contractor services to handle their UCFE claims process. However, the Federal agency is responsible of ensuring that the UCFE claims process and other aspects of the program are handled in the same manner and thoroughness as the Secretary of Labor has prescribed. Federal agencies have been notified to monitor a contractor's performance as a part of their internal audit procedures. In addition, Federal agencies have been advised that:

a. A contractor should provide the Federal agency with a copy of all correspondence received from and to the SESA concerning the UCFE process. If a problem exists, it should be brought to the attention of the State Federal program coordinator and/or the National Office, Attn: TEUMI.

b. In most instances, a contractor cannot perform the requirements for the Form ES-936 verification process since the information must be obtained directly from the original records which are maintained at the Federal site. Therefore, a contractor must be instructed, by the SESA, upon receipt of a Form ES-936 verification report, to immediately send it to the appropriate staff member at the Federal agency for completion and return to the SESA.

c. While a contractor can suggest to a Federal agency which cases should be appealed, the final decision lies with the

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Federal agency staff. Though a contractor may attend a hearing, Federal representatives having first-hand knowledge of the situation must attend, give testimony, and present evidence to ensure that UCFE benefit payments are paid only those claimants who meet the eligibility requirements.

7. UCFE Records - Content, Identification, and Availability.

SESA records should contain enough information to substantiate all actions taken relating to determinations of entitlement for UCFE benefits. Accounting records should be in sufficient detail to permit proper accountability for UCFE funds provided to States for payment of UCFE benefits, and to provide the necessary information for the preparation of fiscal reports to the U.S. DOL. SESA records pertaining to the UCFE program should be identified as different from agency records pertaining to State UC benefits. SESA UCFE records must be available for inspection, examination, and audit by such Federal officers or employees as the Secretary of Labor may designate.

a. UCFE - Checks and Records of Payments.

(1) Data Supporting Payment. A payment from UCFE funds must be supported by a copy of the check or by a register or similar document clearly identifying the UCFE claimant by name, social security account number or control number used by the SESA and by the amount charged to UCFE funds. SESA records must be in sufficient detail to support the computation of the amount charged to such funds.

(2) Checks in Payment of Claims. Checks issued in payment of UCFE claims need not be identified especially as UCFE payments.

(3) Undelivered and Unclaimed Checks. Controls and records of undelivered and unclaimed UCFE checks returned to the SESA should identify checks paid from UCFE funds separately from other checks issued or authorized by the agency. Such controls and records should be in sufficient detail to permit proper accountability by SESA.

The SESA will cancel any check drawn by that State to pay UCFE benefits which has not been presented for payment within 1 year after the date of its issuance. The amount of the escheated check will be credited to the Federal agency account maintained by the SESA for UCFE funds. If, in accordance with State law, any claim for payment of UCFE benefits is made later, and UCFE

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benefits are paid, charges will be made to the State's UCFE Federal agency account.

When benefits are due a UCFE claimant at the time of his/her death, payment of the amount due should be made in accordance with the law and regulations governing the payment of State UC benefits due at the time of death.

(4) Disposal of UCFE and UCX Records. The USDOL has authorized transfer to SESA accountability records of the joint Federal-State UCFE and UCX programs. A request for transfer of UCFE and UCX records once made by each SESA, applies, unless revoked, to all UCFE and UCX records when transferable

The records listed below will be transferred to SESA accountability 3 years after final action (including appeals or court action) on the claim, or such records may be transferred in less than the 3-year period if reproduced in accordance with appropriate reproduction standards outline in this Chapter. With respect to overpayment records, fraudulent or nonfraudulent, the date the overpayment is written off is considered to be the date on which final action took place. After the transfer is completed, SESA will follow its State law for disposal of records identified as follows:

(a) Individual claim files consisting of new, additional, reopened, and continued claims for UC; determinations of entitlement; reports of interviews; claim record forms; and other related documents, records, and correspondence.

(b) Appeal records consisting of petitions appealing UC determinations; copies of subpoenas; notices and transcripts of hearing; exhibits; decisions; and other related documents, records, and correspondence.

(c) Claimant payment records consisting of benefit history files (e.g., ledger cards or sheets); canceled checks, copies of checks, and check registers or similar controls; records of overpayment, underpayment, and adjustments; and other related documents, records, and correspondence.

(d) Individual claim records relating to administrative penalties and criminal prosecution in cases of fraudulent claims.

8. UCFE/UCX - Standards for the Maintenance of Records.

The following standards apply to the maintenance of UCFE and

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UCX records:

a. **Standards.** When reproducing permanently valuable records, in order to dispose of the originals--

(1) The integrity of the original records will be preserved on the copies. This implies that the copies will be adequate substitutes for the original records in serving the purposes for which such records were created or maintained. More specifically, the term "integrity of the records" means that:

(a) The copies will be so arranged, identified, and indexed that an individual document or component or a record series can be located with reasonable facility; and

(b) The copies will contain all significant record detail needed for probable future reference.

(2) The method used will comply with the appropriate specifications for permanent records.

(3) The provisions for preserving, examining, and using the copies of the original records will be adequate.

b. **Safeguard.** The SESA should assure that the quality of records are maintained in accordance with the information provided above. The maintenance of UCFE records should be of the same quality as that required of other State UC records.

9. UCFE Reporting

a. The Unemployment Insurance Service (UIS) of the ETA National Office requires the State agencies to submit many of its reports electronically. Reporting requirements pertaining to UCFE electronic submittals are contained in ETA Handbook No.401.

It is the policy of the UIS to assure accuracy, uniformity, and comparability in the reporting of statistical data derived from State UC operations through State adherence to Federal definitions of reporting items, use of specific formats, observance of reporting due dates, and regular verification of reporting items.

b. UCFE claimant activity is submitted electronically by State agencies in the following reports:

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UCFE INSTRUCTIONS FOR STATE AGENCIES

- (1) **ETA 539 Report, Weekly Claims and Extended Benefits Trigger Data**
- (2) **ETA 5159 Claims and Payment Activities**
- (3) **ETA 5130 Benefit Appeals Report**
- (4) **ETA 207 Nonmonetary Determinations Report**
- (5) **ETA 218 Benefit Rights and Experience**

10. Frequency of Reports.

a. ETA 539 reports should be submitted by State agencies on a weekly basis to the ETA National Office by the opening of business Thursday following the week in which the claims were filed.

b. ETA 5159 reports should be submitted by State agencies to the ETA National Office on the 15th day of the month following each calendar month to which it relates.

c. ETA 5130 reports should be submitted by State agencies to the ETA National Office by the 20th day of the month following month to which it relates.

d. ETA 207 reports should be submitted by State agencies to the ETA National Office on the 15th day of the month following the quarter to which it relates.

e. ETA 218 reports should be submitted by State agencies to the ETA National Office on the 25th day of the first month following the quarter to which it relates.

f. Form ETA-227, Overpayment Detection/Recovery Activities. Form ETA-227 provides information on determinations, overpayments, recoveries of overpayments on intrastate and liable interstate claims under State UC and UCFE claims programs.

The SESA's accomplishments in principal detection areas of benefit payment control are shown in the ETA-227 report. The ETA and State agencies need such information to ensure that benefit payments are properly made. Data are provided for criminal and civil actions involving benefit overpayments obtained fraudulently, and an aging schedule of outstanding benefit overpayment accounts is included.

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(1). Frequency of the Form ETA 227 Report. The ETA-227 report is due quarterly.

<u>Report for Calendar Quarter Ending</u>	<u>Due</u>
March 31	May 1
June 30	August 1
September 30	November 1
December 31	February 1

(2). Submittal of the Form ETA 227 Report. One copy of the Form ETA-227 should be sent to the appropriate Regional Office; the original and one copy should be sent to:

U.S. Department of Labor
Employment and Training Administration
ATTN: TEURA-Reports, Room S-4519 FPB
200 Constitution Avenue, N.W.
Washington, D.C. 20210

NOTE: Detailed instructions for preparing Form ETA-227 may be found in ES Manual, Part III, Chapters 5600-5799 and Chapters 12400-12402.

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12. ETA 5159 Claims and Payment Activities

Claims and Payment Activities

U.S. Department of Labor
Employment and Training Administration



This report is required by the 28 U.S.C. 5159-5164. Failure to report can result in withholding of funds (28 U.S.C. 5159).

Program (F.T. approved below)
 Regular Seasonal Temporary Other

Section A. Claims Activities

Program	Total Num of Clms 3-4	New Unemployment Claims	Additional Claims	Increase Total As Appt Date	Total	Increase Reported As Liable Date
Date of	01					
UCFL No of	02					
UCI Clms	03					

Section B. Payment Activities

Date	Payment Base of Program	Weeks Completed		UCFL and UCI Programs	
		UCFL	UCI	UCFL	UCI
Number	01				
Amount	02				

Section C. Time Lapse in First Payments For Total Unemployment

Time Interval	Date of Program	UCFL & UCI Programs		Comments (if different from a "No" or "Yes")
		UCFL	UCI	
Yes	01			
1-30	02			
31-60	03			
61-90	04			
91-120	05			
121-150	06			
151-180	07			
181-210	08			
211-240	09			
241-270	10			
271-300	11			
301-330	12			
331-360	13			
361-390	14			
391-420	15			
421-450	16			
451-480	17			
481-510	18			
511-540	19			
541-570	20			
571-600	21			
601-630	22			
631-660	23			
661-690	24			
691-720	25			
721-750	26			
751-780	27			
781-810	28			
811-840	29			
841-870	30			
871-900	31			
901-930	32			
931-960	33			
961-990	34			
991-1020	35			
1021-1050	36			
1051-1080	37			
1081-1110	38			
1111-1140	39			
1141-1170	40			
1171-1200	41			
1201-1230	42			
1231-1260	43			
1261-1290	44			
1291-1320	45			
1321-1350	46			
1351-1380	47			
1381-1410	48			
1411-1440	49			
1441-1470	50			
1471-1500	51			
1501-1530	52			
1531-1560	53			
1561-1590	54			
1591-1620	55			
1621-1650	56			
1651-1680	57			
1681-1710	58			
1711-1740	59			
1741-1770	60			
1771-1800	61			
1801-1830	62			
1831-1860	63			
1861-1890	64			
1891-1920	65			
1921-1950	66			
1951-1980	67			
1981-2010	68			
2011-2040	69			
2041-2070	70			
2071-2100	71			
2101-2130	72			
2131-2160	73			
2161-2190	74			
2191-2220	75			
2221-2250	76			
2251-2280	77			
2281-2310	78			
2311-2340	79			
2341-2370	80			
2371-2400	81			
2401-2430	82			
2431-2460	83			
2461-2490	84			
2491-2520	85			
2521-2550	86			
2551-2580	87			
2581-2610	88			
2611-2640	89			
2641-2670	90			
2671-2700	91			
2701-2730	92			
2731-2760	93			
2761-2790	94			
2791-2820	95			
2821-2850	96			
2851-2880	97			
2881-2910	98			
2911-2940	99			
2941-2970	100			

This reporting burden for the collection of information is estimated to average 1.5 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and reviewing the data for accuracy of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to Washington Headquarters Service, Bureau of Economic Analysis, Department of Labor, Room 4120, 200 L Street, NE, Washington, DC 20002 and to the Office of Management and Budget, Paperwork Reduction Project (1270-0012), Washington, DC 20503.

1270-0012
Rev. Dec. 1982

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UCFE INSTRUCTIONS FOR STATE AGENCIES

13. ETA 5130 Benefit Appeals Report

Benefit Appeals

U.S. Department of Labor
Employment and Training Administration



OMB Approval No.: 1208-0172
Expires: 03/31/98

Report for Period Ending (Mo., Day, Year)	Region Code	State Name	Form Code
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LINE NO.	SECTION A. SINGLE CLAIMANT AND MULTICLAIMANT APPEALS CASE DECISION BY PROGRAM AND OTHER DISPOSITIONS					
	UI Decisions		UCFE - No UI Decisions		UCI Only Decisions	
	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority
	(1)	(2)	(3)	(4)	(5)	(6)
100	Cases Disposed of Other than by Decision			Appeals Hearings Held for Other States		
	(7)			(8)		
200						

LINE NO.	Status of Appeals	SECTION B. CLAIMANTS INVOLVED IN STATE UI APPEALS CASES BY STATUS OF APPEALS			
		Single-Claimant Appeals		Multi-Claimant Appeals	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(9)	(10)	(11)	(12)
300	Filed During Month				
310	Disposed of During Month				
320	Pending at End of Month				

LINE NO.	Time Lapse (in days)	SECTION C. TIME LAPSE ON STATE UI APPEALS DECISION (Time lapse between date of filing and date of making decision)					
		All UI Decisions		Interstate		Intrastate	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(13)	(14)	(15)	(16)	(17)	(18)
400	Total Cases						
410	0-30						
420	31-60						
430	61-90						
440	Over 90						

LINE NO.	UI Appeals Decisions	SECTION D. STATE UI APPEALS DECISIONS BY TYPE OF APPELLANT							
		All UI Decisions		Claimant		Employer		Other	
		Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority	Lower Authority	Higher Authority
		(19)	(20)	(21)	(22)	(23)	(24)	(25)	(26)
500	Total								
510	In Favor of Appellant								

LINE NO.	SECTION E. NUMBER OF LOWER AUTHORITY STATE UI APPEALS DECISIONS BY ISSUE						
	Total UI Decisions	Voluntary Quit	Miscellaneous	Refusal of Suitable Work	Not Able or Available	Labor Dispute	Other
	(27)	(28)	(29)	(30)	(31)	(32)	(33)
600							

SIGNATURE	TITLE	DATE
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Public reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Information Management, Department of Labor, Room N-1301, 200 Constitution Avenue, N.W., Washington, DC 20210, and to the Office of Management and Budget, Paperwork Reduction Project (1208-C-72), Washington, DC 20503.

MA 5-73: 11-1-93

UCFE INSTRUCTIONS FOR STATE AGENCIES

14. ETA 207 Nonmonetary Determinations Report

Nonmonetary Determination Activities

U.S. Department of Labor
Employment and Training Administration



OMB Approval No. 1207-0182
Expires

1. Covering Year	2. Report Code	3. ETA Code	4. Date
------------------	----------------	-------------	---------

A. Determinations, Redeterminations, and Denials

Item	LFE No.	Single-Claimant Year				Multiple-Claimant	
		Total Determinations and Redeterminations	Total Determinations	Total Redeterminations	Total Multiple-Claimant Determinations	Labor Status	Other
		1	2	3	4	5	6
State of	Determinations	101					
	Denials	102					
UCFE No. U	Determinations	103					
	Denials	104					
UCI City	Determinations	105					
	Denials	106					

B. Determinations Involving Separation Issues, Single-Claimant

Item	LFE No.	Total Separation Status	Voluntary Leaving (includes mutual but not other personal separations & students)	Discharge by Employer (includes "gross" or "aggravated" misconduct)	Other
		7	8	9	10
State of	Determinations	201			
	Denials	202			
UCFE No. U	Determinations	203			
	Denials	204			

C. Determinations Involving Nonseparation Issues, Single-Claimant

Item	LFE No.	Total Nonseparation Status (sum nos. 11 thru 15)	Disqualifying or Discharge Issues	Repeal of Substantive Work	Reporting Requirements (CFLRA and others)	Other (includes state agencies and other employees)
		11	12	13	14	15
State of	Determinations	301				
	Denials	302				

Comments: Administrative, Legal, and Economic Factors (Use reverse side, if necessary)

Signature	Title	Date
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ETA 207 reporting burden for this collection of information is estimated to average 4 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and reviewing the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (1207-0182), Washington, DC 20503 and to the Office of Management and Budget, Paperwork Reduction Project (1207-0182), Washington, DC 20503.

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15. ETA 218 Benefit Rights and Experience

Benefit Rights and Experience

U.S. Department of Labor
Employment and Training Administration



OMB Approval 1208-0177
Expires 01/31/93

A. REPORT FOR QUARTER ENDING (Mon. Day, Y.Y.)	B. REGION CODE	C. STATE CODE	D. STATE
---	----------------	---------------	----------

LINE NO.	SECTION A. MONETARY DETERMINATIONS ^{1/} DETERMINATIONS			CLAIMANT'S ESTABLISHED BENEFIT YEARS			PREDETERMINATIONS MADE BY REPORTING QUARTER ^{2/}	
	TOTAL (Sum of Col. 2 + 3)	WITH DEFICIENCY TRADE CREDITS	WITH SUFFICIENT TRADE CREDITS	TOTAL	ENTITLED TO MAXIMUM WEL.Y. BENEFIT	ENTITLED TO MAXIMUM WEL.Y. BENEFIT AMOUNT AND DURATION	TOTAL	BEGIN DATE OF BENEFIT YEAR TO WHICH PRE. DETERMINATION RELATE ^{3/}
	1	2	3	4	5	6	7	8
00								

LINE NO.	ITEM	NUMBER OF WEEKS OF DURATION						
		TOTAL (Sum of Col. 3 - 8)	LESS THAN 10 WEEKS	10 - 14 WEEKS	15 - 19 WEEKS	20 - 24 WEEKS	25 - 29 WEEKS	30 - 35 WEEKS
		0	10	11	12	13	14	15
01	POTENTIAL							
02	ACTUAL							

LINE NO.	ITEM	NUMBER OF WEEKS OF DURATION - Continued					NUMBER WITH MAXIMUM DURATION	AVERAGE WEEKS OF DURATION
		20 - 24 WEEKS	25 - 29 WEEKS	30 - 34 WEEKS	35 - 39 WEEKS	40 WEEKS AND OVER		
		16	17	18	19	20	21	22
03	POTENTIAL							
04	ACTUAL							

^{1/} Pre-determinations made by uniform benefit year States should be included for the quarter in which the benefit year concerned begins.
^{2/} To be reported by uniform benefit year States making pre-determinations.

COMMENTS

We estimate that it will take an average of _____ per response to complete this collection of information, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Management and Budget, Paperwork Reduction Project (1208-0177), Washington, DC 20503.

DO NOT SEND THE COMPLETED FORM TO EITHER OF THESE OFFICES

ETA 218
JF 1991

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UCFE INSTRUCTIONS FOR STATE AGENCIES

16. Form ETA-227, Overpayment Detection/Recovery Activities, Page 1.

Overpayment Detection/Recovery Activities		U.S. Department of Labor Employment and Training Administration		OMB Approval No. 1205-0175 Expires 03-20-01					
1. Region Code	2. State Code	3. Name of State	4. Report Period Dates (Month, Day, Year)						
SECTION A. NUMBER AND AMOUNTS OF OVERPAYMENTS ESTABLISHED									
Item	Line No.	Number of Cases		Dollar Amount					
		U	UCFLACK	U	UCFLACK				
		(1)	(2)	(3)	(4)				
Total Fraud Overpayments		101							
Nonfraud Overpayments									
Reverse LAYA	102								
MSA Error	103								
Employer Error	104								
Claimant Error	105								
Administrative Penalty	106								
Other	107								
Total Nonfraud Overpayments		108							
Total Fraud and Nonfraud Overpayments		109							
SECTION B. RECONCILIATION OF OVERPAYMENT ACTIVITIES									
Item	Line No.	Number of Cases				Dollar Amount			
		Fraud		Nonfraud		Fraud		Nonfraud	
		U	UCFLACK	U	UCFLACK	U	UCFLACK	U	UCFLACK
		(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
Overpayments									
Outstanding at Beginning of Period	201								
Recovered - CASH	202								
Recovered - OFFSET	203								
Waived	204								
Withdrawn	205								
Additions	206								
Subtractions	207								
Outstanding at End of Period	208								
Less Allowance for Doubtful Accounts	209								
Overpayments Considered Collectible at the End of Period	210								
Remarks:									

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UCFE INSTRUCTIONS FOR STATE AGENCIES

17. Form ETA-227, Overpayment Detection/Recovery Activities, Page 2.

Overpayment Detection/Recovery Activities -- Continued

1. Region Code	2. State Code	3. Name of State	4. Report Period Ended (Month, Day, Year)			
SECTION C. DETECTION ACTIVITIES AND RESULTS						
Activities Used To Detect Fraud and Overpayments	Line No.	No. Cases Opened	Number and Amount of Overpayments Established			
			Fraud		Non-Fraud	
			No. Cases	Dollars	No. Cases	Dollars
		(12)	(14)	(15)	(16)	(17)
Crossmatch of Benefit Payments with Wage Records	201					
Verification of Life Earnings	202					
Employer Process of Benefit Claims	203					
Tips and Leads from Outside Sources	204					
Verification of Return-to-Work Dates and Wages Earned	205					
Internal Crossmatch	206					
Quality Control	207					
Other Controllable Activities	208					
Other Noncontrollable Activities	209					
Fictitious Employer Cases	210					
TOTALS	211					
SECTION D. CRIMINAL/CIVIL ACTIONS						
Item	Line No.	STATE/LOCAL COURTS			U.S. SUP. OF DIST. CT.	
		U	LOCAL			
		(18)	(19)	(20)		
Number Fraud Cases Pending Prosecution at the Beginning of the Period	401					
Number Fraud Cases Returned for Prosecution During the Period	402					
Number Cases Prosecution Refused	403					
Number Convictions Obtained	404					
Number Cases Returned for Civil Action	405					
Number Civil Actions Obtained	406					

Remarks

4-7-93

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UCFE INSTRUCTIONS FOR STATE AGENCIES

18. Form ETA-227, Overpayment Detection/Recovery Activities, Page 3.

Overpayment Detection/Recovery Activities -- Continued

1. Region Code	2. State Code	3. Name of State	4. Report Period Ended (Month, Day, Year)
SECTION E. ADMIN BENEFIT OVERPAYMENT ACCOUNTS			
Accounts Receivable	Line No.	Dollar Amount	
		U	UC/PLACER
		(PT)	(SD)
90 days or less	001		
91 days - 180 days	002		
181 days - 270 days	003		
271 days - 360 days	004		
361 days - 450 days	005		
451 days or more	006		
Total Accounts Receivable	007		

Signature of Approving Official _____ Date _____

Public reporting burden for this collection of information is estimated to average 10 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Information Management, Department of Labor, Room N-301, 200 Constitution Avenue, N.W., Washington, D.C. 20540 and to the Office of Management and Budget, Paperwork Reduction Project (1205-0173), Washington, D.C. 20503.

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UCFE INSTRUCTIONS FOR STATE AGENCIES

CHAPTER XI - UCFE FUNDING and BILLING

1. UCFE Funding.

Public Law 96-499, the Omnibus Reconciliation Act of 1980, amended the UCFE law (5 U.S.C. 8509) and requires Federal agencies to reimburse the cost of UCFE for their former employees. One of the primary reasons for passage of this Act was to encourage Federal agencies to assume more responsibility for managing its UCFE expenditures. P.L. 96-499 also established within the Unemployment Trust Fund the "Federal Employees Compensation (FEC) Account." The FEC Account operates as a revolving account.

State agencies are required to requisition funds from the FEC Account to cover anticipated benefit payment needs for all UCFE claimants and reporting such payments for subsequent billing to Federal agencies. Refer to UIPL 17-81 for more detailed procedures on requisitioning UCFE funds.

2. UCFE Billing.

a. **Form ETA 191, Statement of Expenditures of Federal Funds for Unemployment Compensation for Federal Employees and Ex-servicemembers (UCFE/UCX).** Form ETA 191 is used by each SESA to report to the National Office (NO):

(1) the quarterly summary UCFE expenditures and adjustments (Section A); and

(2) the total amount of benefits paid by the SESA to claimants of specific agencies. Section B of the ETA 191 is the only source document used to bill agencies for the recovery of UCFE benefit expenditures.

Submitting the ETA 191 report timely has a major impact on maintaining the solvency of the FEC Account. In order that the Account operates successfully, it is dependent upon two of its major components--the SESA and the Federal agency. Each SESA withdraws resources from the FEC Account to cover the necessary UCFE benefit payments. Quarterly, UIS bills those Federal agencies based on the data contained in Section B of the ETA 191 report. Each Federal agency deposits into the FEC Account, on a quarterly basis, reimbursements of benefits that have been paid to their employees or former employees. After receipt of each quarterly ETA 191 report, the UIS/NO aggregates the benefit payments by individual Federal agencies and bills

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UCFE INSTRUCTIONS FOR STATE AGENCIES

each accordingly. Quarterly, the NO certifies to the U. S. Department of the Treasury the total amounts due from each Federal agency.

b. Due Date and Transmittal

(1) Within 25 days after the close of each quarter, Form ETA 191 is to be transmitted electronically to the DOL, Employment and Training Administration. If a SESA unable to transmit the Form ETA 191 electronically, it may be sent to the following address:

U. S. Department of Labor
Employment and Training Administration
Attn: TEURA--Reports
200 Constitution Avenue, N.W.
Rm. 4519
Washington, D.C. 20210

c. **Use of Computer Printouts.** A computer printed output may be used in place of supplied report forms if they are arranged in the same format and data items are clearly labeled. A computer printout page size of 8 1/2" x 11" is preferred, but sizes up to 11" x 14 3/4" are acceptable.

d. General Instructions

(1) **Requisitioning Funds from the Federal Employees Compensation Account.** State agencies are required to requisition funds from the FEC Account to cover anticipated benefit payment needs for all UCFE claimants. These electronic requests are received by the Financial Management Services, Funds Accounting Branch, U.S. Department of the Treasury. To prevent the build up of excessive balances in local banks, requisitions and transfers of funds should be made on a daily basis.

(2) **Providing Information to Federal Agencies.** Pursuant to the Secretary's authority in 5 USC 8509 (f), State agencies will continue to, for purposes of this Act, provide appropriate personnel/payroll offices of Federal agencies with a copy of all determination notices, including appeals, that are now provided to a private employer, as instructed by Sections 6662 and 8692, Part V of the ES Manual. The SESA should be prepared to furnish the Federal agencies, upon their request, with detailed benefit payment data, which supports the charges contained in Section B of Form ETA 191. State agencies will provide the certified documentation directly to those Federal agencies that have requested the benefit payment data. These

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UCFE INSTRUCTIONS FOR STATE AGENCIES

agencies are listed in the unemployment insurance program letter entitled, "Directory of Federal (Civilian) and Military Agencies Requesting Quarterly UCFE and UCX Detailed Benefit Payment Data."

(3) **Correcting Errors Made in a Prior Quarter.**

Corrections should be reported on the ETA 191 to UIS as soon as possible. A timeframe of 2 years, from the time that the error occurred, has been established as sufficient time for adjustments to be made. State agencies are to correct improper charges made to Federal agencies by increasing or decreasing the agency's charges in a subsequent ETA 191 report. In cases where there may not be charges in a following quarter, only the corrective entry should be reported. State agencies are not to submit more than one Form ETA 191 report per quarter.

e. **Item by Item Instructions**

(1) **Section A. Summary Statement of Expenditures and Adjustments**

(a) **Item 1. Benefit Expenditures.** Include in the appropriate columns all UCFE unemployment compensation benefits paid to eligible (as based on title 5 U. S. Code) former employees during the reported quarter. These expenditures should include "pure" UCFE (exclude State UI), joint, and supplemental benefit payments.

(b) **Item 2. Adjustments Assigned to Agencies**

(1) **(a) Cancellations.** Enter in the appropriate UCFE column the total amount of any checks canceled during the quarter which were reported as expenditures in prior quarters. Cancellations of checks drawn in the current quarter are to be reflected in Item 1. All check cancellations are to be reported as negative figures.

(2) **(b) Restoration of Overpayments.** Enter in the appropriate UCFE column the total amount of restorations made during the quarter of overpayment made in prior quarters. Restorations of overpayment received during this quarter and based on expenditures in the current quarter should be reflected in Item 1. All restorations of overpayment should be reported in as a negative figure.

(3) **(c) Other.** Enter the total of other adjustments in UCFE payments, such as over or understatement of UCFE expenditures reported in prior quarters. Submit

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UCFE INSTRUCTIONS FOR STATE AGENCIES

an explanation of items in the appropriate section of the Form ETA 191.

(c) Item 3. Total Assigned Expenditures and Adjustments. Enter in the appropriate columns, the total amounts of UCFE expenditures and adjustments that are being charged to Federal agencies during this reporting period. The figures entered in this item for UCFE are the results of Items 1, 2(a), 2(b), and 2(c). These totals must match the totals reported in Section B. The report cannot be sent electronically if the totals do not match.

(d) Item 4. Expenditures and Adjustments Not Assigned to Agencies.

(1) (a) Penalties and Interest. Enter the total amount of penalty and interest (P&I's) received by the SESA which results from any prior UCFE payments. These are to be shown as a negative figure. All recoupment resulting from P&I's are to be returned to the FEC Account. If the P&I's are based on an overpayment of benefits that was drawn from the Federal Unemployment Benefits and Allowances Account, such amounts are to be returned to the DOL.

(2) Other--Explain in Comments. Enter in the appropriate UCFE column any adjustments that were not included in Item 4(a). For example, list adjustments to a UCFE charge that occurred more than 2 years after the quarter in which the initial payment was made or an agency for which a 3-Digit Federal Agency Code has not been assigned. In the latter case, include in the comments section both, the agency name, and total amount of benefits for each agency.

(e) Item 5. Total Expenditures and Adjustments Not Assigned to Agencies. In the UCFE column, enter the results of Items 4(a) and 4(b).

(f) Item 6. Grand Total--Expenditures and Adjustments. Enter total expenditures for the quarter by calculating Item 3 and Item 5

(2) Section B. Statement of Expenditures

(a) Enter in Column 1 the 3-Digit Federal Agency Code which has been assigned to each Federal agency. For each agency, being charged during the reporting quarter, there should be a separate entry in this column. If the 3-Digit Federal Agency Code is unknown, report the benefits under Section A, Item 4(b).

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UCFE INSTRUCTIONS FOR STATE AGENCIES

Since the 3-Digit Federal Agency Codes are the major element used in billing Federal agencies, accuracy in this area is of paramount importance.

(b) Enter in Column 2 the name of the agency being charged. The name of the agency should correspond with the 3-Digit Federal Agency Code in Column 1.

(c) Enter in Column 4, the total amount of UCFE benefits being charged to the Federal agencies listed in Column 1. Charges to Federal agencies will include adjustments for restoration of Federal funds resulting from cancellation of checks, recoupment of overpayment, etc. Therefore, the sum of UCFE benefit charges must be equal the amount found in the UCFE column of Section A, Item 3 (UCFE).

f. Certification. The provision of part IV, section 7003, with respect to the certification of financial reports, applies equally to Form ETA 191. Pursuant to that provision, financial reports should be certified by an individual whose certificate of authorization is on file with the national office. Therefore, each SESA should provide UIS with amended or additional certifications as required in accordance with part IV, sections 0640-0649.

g. 3-Digit Federal Agency Codes. 3-Digit Federal Agency Codes identifying each Federal agency are listed on the following pages. Additional agencies with their corresponding 3-Digit Federal Agency Code will be added to the list as necessary. State agencies will use these 3-Digit Federal Agency Codes to identify all claim records and claim forms of claimants who performed Federal service in his/her base period. If, after using The United States Government Manual, and an agency cannot be identified with a code, the total amount of these expenditures should be reported as "not assigned," and included in the appropriate column of Item 4 (b). The name of the agency, and the total amount of benefits paid should be provided in the comments section.

NOTE: Refer to Part V, ES Manual, Section 9336, for more detailed reporting instructions for the ETA 191 Report.

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UCFE INSTRUCTIONS FOR STATE AGENCIES

h. Facsimile of Form ETA 191, Statement of Expenditures of Federal Funds for Unemployment Compensation for Federal Employees and Ex-servicemembers (UCFE/UCX), Page 1.

Statement of Expenditures and Adjustments of Federal Funds for Unemployment Compensation for Federal Employees and Ex-servicemembers

U. S. Department of Labor
Employment and Training Administration

Form ETA 191, UCFE/UCX
October 1982

Section 2. Summary Statement of Expenditures and Adjustments

	UCFE	UCX
1. Overall Expenditures	\$ _____	\$ _____
2. Adjustments Assigned to Agencies		
(a) Creditable	\$ (_____)	\$ (_____)
(b) Extension of Unemployment	\$ (_____)	\$ (_____)
(c) Over-Receipt to Government	\$ _____	\$ _____
3. Total Assigned Expenditures and Adjustments (Items 1 and 2. Does not include the total reported in Section 2.)	\$ _____	\$ _____
4. Expenditures and Adjustments Not Assigned to Agencies		
(a) Payroll and Interest	\$ (_____)	\$ (_____)
(b) Over-Receipt to Government	\$ _____	\$ _____
5. Total Expenditures and Adjustments Not Assigned to Agencies (Items 4a and 4b)	\$ _____	\$ _____
6. Grand Total--All Expenditures and Adjustments (Items 1 and 5)	\$ _____	\$ _____

7. Comments

I hereby certify that the amounts of expenditures and adjustments, including Sections 4 and 5, are necessary for payment of unemployment compensation to Federal employees and ex-servicemembers under an agreement pursuant to the U.S.C. of the Social Security Act, as amended.

Signature _____ Date _____

Typed Name/Title _____

Prepared by _____ Phone No. _____

Public Reporting Burden for this collection of information is estimated to average 6 hours per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing the burden, to the Office of Information Management, Bureau of Employment and Training, Department of Labor, Room 5120, 202 Constitution Avenue, N.W., Washington, D.C. 20540, and to the Office of Management and Budget, Paperwork Reduction Project (750-0187) Washington, D.C. 20503.

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