CHAPTER IV

TIMELINESS OF CASE COMPLETION

1. **Introduction.** Regional Office staff will monitor the timeliness of QC case completion in each SESA by analyzing case completion timeliness data available from the Regional Office BQC Federal Monitoring System. (See ET Handbook No. 404.) The purpose of monitoring timeliness is to foster prompt completion of QC cases. Prompt completion of QC investigations is important to ensure the integrity of the information being collected by questioning claimants and employers before the passage of time affects recollections.

Regional monitors will review timeliness performance of each SESA throughout the year in order to determine whether or not QC completion requirements are being met and to understand problems that may exist which hamper a SESA's efforts to complete cases timely. The outcomes of these reviews will be used in the annual assessment of SESA administration of QC, as detailed in Chapter VII.

2. **QC Requirements.** The following standards are established for completion of cases investigated during the year. (This includes all batches with week-ending dates in the calendar year.)

   - A minimum of 70 percent of cases must be completed within 60 days of the week-ending date of the batch, and 95 percent of cases must be completed within 90 days of the week ending date of the batch; and
   
   - A minimum of 98 percent of cases for the year must be completed within 120 days of the ending date of the calendar year.*

A case is complete when the investigation has been concluded, all official actions for the Key Week (except appeals) have been completed, the results have been entered into the computer, and the supervisor has signed off (review is optional). Beginning in Calendar Year 1993 a State initiated reopening of a case (code 3) will result in the reopen date becoming the date used for case completion and therefore the date used for calculation of case completion timelapse.

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*This standard is required to ensure the statistical reliability of SESA QC data presented in the Annual QC Report. This standard does not affect the Annual QC Administrative Determination.
If a SESA's timeliness rates for completion of cases sampled for investigation for any 12-month period ending December 31 do not meet the requirement, the Regional Office will determine if good cause existed for not achieving the requirement. Judgment as to what constitutes good cause will be based on individual circumstances, but generally will be considered the result of factors beyond the control of the SESA.

3. **Process.** The review process involves the following:

   a. Obtaining the timeliness data from the Regional Office BQC Federal Monitoring System. (Refer to ET Handbook No. 404. Select Standard Reports off the Benefits Quality Control menu.)

   b. Comparing the achievement of timeliness against the requirements and determining if the requirements are being met based on year-to-date information. The data for the 120-day requirement should also be monitored. It is important because it relates to the number of cases completed/included in the annual report. Performance related to this criterion can be monitored by the Regional Office during the year by examining the SESA's official time lapse report.

   c. If the requirements for timeliness are not being met in the aggregate for the year to date, the trends should be analyzed and the results discussed with the QC supervisor to determine what actions, if any, are needed to achieve the requirements by the end of the measurement period.

4. **Schedule.** Each calendar year is a separate measurement period. Progress reviews are made for the first three quarters of the calendar year. The final review is made for the completed calendar year. Each review (progress and final) covers an aggregate of all batches assigned from the beginning of the calendar year through the end of the respective calendar quarter or the calendar year. Regional Offices should identify and explain action being taken to address any failure of a State to meet the case completion timeliness criteria in the RO narrative quarterly report submittal.

The National Office will review case completion timeliness on the following schedule:

<table>
<thead>
<tr>
<th>Type of Review</th>
<th>Quarters</th>
<th>Dates</th>
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</thead>
<tbody>
<tr>
<td>Progress</td>
<td>1</td>
<td>August 1</td>
</tr>
<tr>
<td>Progress</td>
<td>1-2</td>
<td>November 1</td>
</tr>
<tr>
<td>Progress</td>
<td>1-3</td>
<td>February 1’</td>
</tr>
<tr>
<td>Final</td>
<td>1-4</td>
<td>May 1’</td>
</tr>
</tbody>
</table>

'Subsequent program year.
In order to capture complete data for all batches in the designated quarters, the case completion timeliness report must not be run until 90 days after the end of the quarter.

If the timeliness requirements are not being met, Regional staff should track timeliness more frequently (monthly or weekly). It may be useful to isolate batches for selected time periods in order to identify and analyze the cause(s) of the problem.