Unemployment Insurance
Quality Control:
A Review Paper On Possible Data Elements
For The Quality Control Program

Unemployment Insurance Service
Employment and Training Administration
U.S. Department of Labor
August 27, 1984
NOTE TO THE REVIEWER:

This paper is to obtain your response to the attached proposed Quality Control data elements as part of UIS QC design process prior to UIS and Departmental clearance and OMB submittal.

Sampling techniques will be addressed separately at another time.

This paper is divided into three sections which contain the data elements proposed for each record type (QC Data, Longitudinal Wage Data, Longitudinal Payment Data). The QC Data section is further divided into 12 Parts which address specific areas of the Quality Control process. Each element within a section is presented on a separate page with its respective definition, field size, source, response source and usage.

Please comment on these elements and their descriptors as they relate to your agency and operations. Also note additional elements and descriptors which you believe would be useful in achieving Quality Control objectives.
INTRODUCTION

This paper is the third in a series of papers that will be used to develop the data elements for the Unemployment Insurance (UI) Quality Control (QC) program. As each paper is prepared, it will be reviewed by a larger, more diverse audience including, for instance, UI staff and representatives of other parts of the Department, SESAs, and OMB. The final product of this extensive process will be forwarded to OMB for official review and ultimate approval. The main objective in this paper is to list data elements which should prove useful to meet the goals and objectives of the QC program. This paper will serve as a focal point for the next round of review. Yet to be added is the statistical section necessary for OMB approval.

The prior papers -- primarily QC task force working documents -- carefully reviewed data elements currently collected in the Random Audit (RA) program and CWBH. Each data element was reviewed to determine its usefulness for QC and the likelihood that it would produce something useful for analysis or operations. Data elements failing to meet either criterion were excluded.

In this paper the results of the prior papers are supplemented by the addition of data elements designed to improve the ability of QC to:

1. measure multiple errors in the process,
2. develop elements which may be useful for special studies (e.g. Error Prone Profile),
3. target in on portions of the process which were not measured in Random Audit, and finally,
4. begin the process of establishing a longitudinal data series to develop a base for studying the impact of seasonal and cyclical variations on the UI system.

This paper also incorporates suggestions made by a workgroup of State Administrators and UI Directors, as well as research, Random Audit, and data processing staff.
LEGISLATIVE AUTHORITY

Authority for the Secretary of Labor to require States to provide certain data elements is located in Sections 302 and 303, Social Security Act (SSA). Section 302 provides that the Secretary of Labor shall certify payment of amounts determined to be necessary for the proper and efficient administration of State UI systems. This determination will be based on:

(1) the population of the State;
(2) an estimate of the number of persons covered by the State law and of the cost of proper and efficient administration of such law; and
(3) such other factors as the Secretary of Labor finds relevant.

In Section 303 (a) (6), SSA, the Secretary of Labor is required to certify that the State law includes provision for-

The making of such reports, in such form and containing such information, as the Secretary of Labor may from time to time require, and compliance with such provisions as the Secretary of Labor may from time to time find necessary to assure the correctness and verification of such reports;

BACKGROUND--General Discussion

Data elements proposed for the QC program will be collected from a variety of data sources within the State UI system. Most of the proposed data elements are already collected and assembled by the States for their own use; others may be derived by combining various files, with little ongoing effort required to continue supplying the data; but some will be newly reported elements. While all States will be required to collect the data, the data for the most part will be supplied for only those claimants selected by the QC sampling process. This sample size (n) is quite small (averaging 600/year/State to begin with, increasing to 1200-1600/year/State within three years). This small n, in conjunction with a relatively small number of data elements, leads to a conservative overall data requirement when compared with the expected gain to be received from the data and with the data collected for all claimants in order to pay claims.

While most of the data elements will be collected during the selection and case review period in a manner similar to that proven in the RA program, an additional concept used in RA is also being proposed. This concept is to build a longitudinal file for those claimants selected in the QC sample.
By creating a cumulative file of claimants selected for QC and updating this file after the initial QC review by extracting current data on each from the State's computer system, a longitudinal file for specific data elements will be created. To the extent possible, the State would pass the continued data to the QC computer system where the actual file maintenance would occur. Data collected in the initial review may be updated as part of the Extended Benefit or other supplemental program review to further enhance the capability of the longitudinal file to determine impact of legislative, administrative, seasonal, or cyclical variations in the UI program.

BACKGROUND--Criteria for Selection of Data Elements for QC

QC data will be used to establish error rates, dollar error levels, and error causes. Based on the data analyses, States will have the capability to formulate Corrective Action Plans (CAPS) and assess the plans' effectiveness. Data will also be used for the design of error-prone profiles, possible replacement of one or more presently required reports and other ancillary purposes. Data elements to be included in the QC nationwide data system, accordingly, must meet the following general criteria set forth in the decision paper on QC data categories:

1. Information to be obtained directly from respondents must be clearly relevant to analytic objectives.

2. Collection and processing must be cost-effective. To the maximum extent possible, data should be obtained from existing sources, especially State agency files and operational information.

3. Planning and implementing the data collection must not significantly delay implementation of the QC process.

Data needed for the principal purposes of QC will be given first priority. Data for ancillary purposes of QC will be more rigorously evaluated in terms of the criteria.

As part of the decision process, each data element included in the RA program is being reviewed on the basis of the stated criteria. Additionally, the following more specific criteria are being applied:

1. Elements will be excluded from the reporting system if they are only useful for the error detection process but are not needed for analyses of errors, formulation or review of CAPS, or for ancillary purposes of QC.
2. Where several data elements represent similar information obtained at different points in the QC verification process, and the earlier information is not needed for analytic purposes, only the element providing the final verified information will be included in the reporting system.

3. Elements are combined if the information they contain can be logically recorded by the addition of a new response code.

4. Elements may be excluded if their frequency of occurrence in the RA survey has been so low that, even with larger sample sizes, these elements may not be useful for analytical purposes. The frequency of occurrence of some items in the RA survey is being further examined to aid in deciding whether they should be included in QC.

DATA ELEMENTS -- General

As discussed above, the data element design started with a review of the Random Audit Coding Sheet and then recommended deletions and modifications, as well as a number of new data elements. The elements are numbered sequentially by Part. If the number is followed by another number in parentheses, that number corresponds to the Random Audit coding. Elements with no parenthetical number are new data elements.

The Quality Control data elements are contained in Record Type One and are divided into twelve (12) parts. Longitudinal data of wage information are contained in Record Type Two. Longitudinal data of UI payments are contained in Record Type Three.

Record Type One

Part I - Control Information

This part contains the data necessary to maintain control of information collected, such as State, week, and claimant identifiers.

These elements will be used to assure data is grouped properly by State and week sampled prior to analysis and error rate calculation. Elements such as Social Security Number, Local Office, Investigator ID, and week ending date will be used for tracking and managing status of investigation and sources for needed information.
Other data will be used to maintain the integrity of sampling techniques and to identify potential QC investigative problems. In addition, data from this portion of the DCI combined with other QC data provide a basis for a variety of analyses showing trends, patterns and variations by region, labor market, seasonal employment, or other external factors.

Part II - Claimant Information

In this part the data collected pertains to the individual claimant and covers characteristics and demographic information for statistical and longitudinal purposes.

These elements are necessary to respond to Congressional, legislative or other inquiries regarding the impact of current or proposed legislation on specific socio-economic groups. This information will also be used to assure the statistical validity of the sample population to the claimant population of the State as a whole. Statistical adjustments to the error rates are possible when the sample characteristics differ significantly from the universe. Analysis of this information in conjunction with other QC data can lead to the identification of high risk (error prone) claimants.

Part III - Claim Information

Data for the specific claim involved in the QC sampling is gathered in this part. Information such as amount, program, and effective dates are recorded.

These elements will be used to provide a basis for analyses of current agency claims filing procedures or activities and their relationship to proper payments. Analyses of proposed procedural changes could be accomplished using these data in conjunction with other QC data. In addition, these data elements identify if special types of claims (e.g. Combined Wage, UCFE) which require separate claim processing procedures relate to payment errors detected by the investigation.

Part IV - Monetary Eligibility

This part covers the specifics of the monetary entitlement of the particular claim selected, including wage and employer data.

These elements allow comparison and analysis of monetary changes which result from the QC investigation and are useful for both managerial and analytic purposes in developing action plans. Analysis of the employer industry, maximum benefit amount, remaining balance and their relation to payment errors is possible using these data elements.
In addition, when analyzed with other QC data (e.g., type of claim, number of unemployment spells, separation causes) the nature of payment errors is clearer and problems can be more specifically defined and addressed in action plans.

**Part V - Separation Information**

This part addresses the information regarding claimants' last employer and factors affecting eligibility based on the reasons for being separated from that employer.

These elements will be used to determine if the quality of employer responses impact significantly on the proper payment of benefits. The recall status elements coupled with work search elements inform the agency of the adequacy of existing law or policy regarding claimant availability for work. These elements can also assist agencies contemplating changes to their law or policy as the proper corrective action needed.

**Part VI - Duration**

Payment and claim information is collected in this part allowing for the development of a longitudinal data series in order to study fluctuations in the UI process and relationship of claim duration to error rates. In addition, this data will allow for profiling and statistical reporting.

These elements will be used to analyze the relationship of claimant unemployment patterns and general economic environment with improper payments. They also permit analysis of length of unemployment on the findings and its relation to payment errors. With other QC data, the agency can assess the effectiveness of existing law and policy and develop more specific corrective action plans.

**Part VII Adjustments to Monetary Award**

This part gathers data reflecting various factors affecting initial monetary entitlement, such as earnings and pensions, enabling QC to measure their implications on payment error rates.

These elements will be used to determine the effectiveness of agency adjustments to the weekly benefit amount. They will be used to review procedures and policies that were used in making the adjustment as well as the methods employed in obtaining the information.
Part VIII - Registration for Work

In this part QC will gather the claimant information concerning the requirements for work registration with various types of referral agencies.

These elements will be used to assess the effectiveness of various types of referral agencies. Analysis of referral agency use as a means of obtaining employment and meeting agency work search requirements by industry or occupation code is possible. Also when coupled with other QC data, analyses of any relationships with the length of unemployment, type of work referred to, UI-ES coordination, DOT accuracy, etc. can be made. Verification of referrals may uncover previously undetected refusal of suitable work issues.

Part IX - Work Search Efforts/Eligibility

This part will enable QC to record and measure the activities associated with claimants' efforts to seek work and issues involving these efforts.

These elements provide a tool to compare and analyze a claimant's search for work in relation to rules, laws and policies governing this activity. Comparisons can be drawn between what is required and what has actually occurred regarding attempts to seek reemployment. These elements also provide information concerning the agency's effectiveness in enforcing its own work search policies. These elements assist in corrective action planning and can be developed for specific sectors or segments of the unemployed when compared and/or analyzed with data in other parts such as occupation and industry. Existing law and policy can be related to proposals or plans for legislative or procedural changes in this area.

Part X - Overpayment/Underpayment History

Data regarding previous over/underpayments will be collected for use in analyzing if payment errors continue with claimants having errors in the past. This information is valuable in developing an Error Prone Profile. Over/underpayment results of the Key Week (KW) investigation are accumulated for the entire claim series. These data elements can be used by management to determine the scope of investigation findings because total mispaid dollars are recorded rather than simply the amount mispaid for the KW only.
XI - Classification

Results of QC investigations are recorded in this part. Up to three possible issues can be included with responsibility, cause, and amounts being reflected for each. Provision has been made for State-specific coding in certain areas to enhance the use of these elements as a management tool. These elements identify whether or not the proper amount was paid to the claimant.

The data in this part provide managers with specific information regarding the findings of the investigation and make possible error rate calculations. With other QC data, an agency can identify processes which are operating properly. Where payment errors are found, these elements identify if fraud was involved, what caused the error, and where in the claims process the error occurred. This information is vital for analytic purposes as well as for formulating appropriate action in response to the findings.

XII - State Option Information

This part is established to record data that is unique to only certain States, i.e., dependents and to provide for State use data items.

Record Type Two

The second record contains Wage Information (longitudinal) similar to CWBH Record Type One.

These elements provide information about employment patterns of the individuals in the QC sample. They will be used primarily for research purposes, such as analysis of industry recovery patterns following a change in the economic environment, or studies regarding claimant occupational stability or displacement. Other analyses can be used to assess the impact of current or proposed Federal or State law.

Record Type Three

The third record contains UI Payment Information (longitudinal) similar to CWBH Record Type Four.

These elements provide information about unemployment patterns of individuals in the QC sample. Combined with the other QC data it will be possible to assess over varying economic cycles the impact of types of errors detected, adequacy of prior corrective action and the general state of the economy. Independent studies or studies focused on specific Federal or State provisions, such as what happens to exhaustees, or return to work patterns, can be obtained using this data.
RECORD ONE
QUALITY CONTROL DATA COLLECTION INSTRUMENT
1.(1) **State_Id Code:**

Enter State identification code (Numeric FIPS Code).

**Field Size:** __2__ Digits

**Source:**

- Agency Files (Automated) __2__ Number of States
- (Manual) ______ Number of States
- CC Investigation File ______ Yes or NC

**Response Source:**

- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Wage:**

- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Profile
- ___ Research

**Description of Wage:**
2. (2) **Batch Number:**

Enter number provided as output from computer program that selects all sample cases - indicates calendar year and week of year (YWW).

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___52___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item:
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
3.(3) **Social Security Number:**

Enter Social Security Number of claimant selected.

**Field Size:** ___9___ Digits

**Source:**
- Agency Files (Automated) ___22___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
4.(4) Commissable_Week_Ending_Date_of_Year_Week (KW):

Enter year, month, and day (YYMMDD) of commissable week ending date of key week (e.g., March 6, 1985 coded as 050306). This date is provided as output from computer program that selects all sample cases.

Field Size: ___6___ Digits

Source:
- Agency Files (Automated) ___51___ Number of States
- QC Investigation File ___4___ Number of States
- QC Investigation File ___5___ Yes or No

Response Source:
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

Usage:
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

Description of Usage:
5.(6) **Local Office Number**: Enter SESA local office or itinerant point number where key week claim was filed.

**Field Size**: ___4___ Digits

**Source**: Agency Files (Automated) ___2__ Number of States
             (Manual)   ___4___ Number of States
             QC Investigation File    ___ Yes or NO

**Response Source**: ___ Claimant
                     ___ Employer
                     ___ Work Search Employer
                     ___ Agency
                     ___ Other

**Usage**: ___ X ___ Control Item
            ___ Payment Error Rate Determination
            Problem Area Analysis
            ___ Monetary Determination
            ___ Separation Issue
            ___ Active Work Search
            ___ Other Eligibility
            ___ Payment Adjustment
            ___ Error Prone Profile
            ___ Research

**Description of Usage**: 

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(DRAFT) - VERSION III - (3/27/84)
6.(9) **Investigator Identification Code:**

Enter code of investigator who had primary responsibility for most of the work on this case.

Quality Control supervisor is to assign these codes.

If more than one investigator works on case, enter code of investigator who determines whether claimant was correctly or incorrectly paid for key week.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) _____ Number of States
- (Manual) _____ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- _X_ Agency
- ___ Other

**Usage:**
- _X_ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
7. (30) **Primary Method by which Claimant QC Information Obtained:**

Enter method by which information was obtained regarding claimant:

1 = In-person interview
2 = Telephone interview
3 = Computer assisted telephone interview
4 = Mail
9 = Not obtained

**Field Size:** __1__ Digit

**Source:**

Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___ Y_ Yes or NG

**Response Source:**

___ Claimant
___ Employer
___ Work Search Employer
X_ Agency
___ Other

**Usage:**

X_ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
X_ Research

**Description of Usage:**
PART I -- CONTROL INFORMATION

8. (68) Status of Investigation:

Enter appropriate code from below:

1 = COMPLETE. This status code is used only when case investigation is complete (excluding potential appeals).

2 = INCOMPLETE -- ENOUGH INFORMATION FOR CODING A PAYMENT ERROR. This status code is used when investigation is incomplete, but either an overpayment or underpayment has been detected.

3 = INCOMPLETE -- NOT ENOUGH INFORMATION FOR CODING. This status code is used in all incomplete cases where there is insufficient information to determine that key week payment is improper. By default all cases coded as a 3 are counted as proper for preparation of rates.

Field Size: ___1___ Digit

Source:

Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States

QC Investigation File ___ Y__ Yes or N__

Response Source:

___ Claimant
___ Employer
___ Work Search Employer
X Agency
___ Other

Usage:

X Control Item
X Payment Error Rate Determination
Problem Area Analysis

___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment

___ Error Prone Profile
X Research

Description of Usage:

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(DRAFT) -- VERSION III -- (9/27/84)
9. Date Investigation Completed:

Enter date that investigation was completed. Completed means after the investigator has finished all field work, reports, determinations and coding. Appeals of QC determinations are considered as after case completion.

Field Size: ___6___ Digits

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___ Y_ Yes or NO

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
___ X_ Agency
___ Other

Usage:
___ X_ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description of Usage:
1.31 Date of Birth:

Enter Date of Birth (YYMM).

Enter 9, if date unknown.

Field Size: ___4___ Digits

Source:
Agency Files (Automated) ___2___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:
___X__Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X__Error Prone Profile
___X__Research

Description of Usage:
PART II - CLAIMANT INFORMATION

2.(32) Sex:

Enter appropriate code:
1 = Male
2 = Female
8 = INA (not available from any source)

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___49___ Number of States
(Manual) ______ Number of States
CC Investigation File ______ Yes or NO

Response Source:
___X___Claimant
___Employer
___Work Search Employer
___X___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X___ Error Prone Profile
___X___ Research

Description of Usage:
3. (33) **Ethnic Classification:**

Enter proper code (From observation during interview or agency files):

1 = White, not Hispanic  
2 = Black, not Hispanic  
3 = Hispanic  
4 = American Indian or Alaskan Native  
5 = Asian or Pacific Islander  
6 = Other  
8 = INA (not available from any source)

**Field size:** ___1___ Digit

**Source:**

Agency Files (Automated) ___42___ Number of States  
(Manual) _______ Number of States  
QC Investigation File ______ Yes or No

**Response Source:**

___X___ Claimant  
___ ___ Employer  
___ ___ Work Search Employer  
___X___ Agency  
___ ___ Other

**Usage:**

___ ___ Control Item  
___ ___ Payment Error Rate Determination  
Problem Area Analysis  
___ ___ Monetary Determination  
___ ___ Separation Issue  
___ ___ Active Work Search  
___ ___ Other Eligibility  
___ ___ Payment Adjustment  
___X___ Error Prone Profile  
___X___ Research

**Description of Usage:**
4.(34) U.S. Citizen:

Enter appropriate code:
1 = Yes
2 = No - Legal Alien
3 = No - Illegal Alien
6 = INA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___19___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
___X_Clamant
___Employer
___Work Search Employer
___X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___X_Other Eligibility
___Payment Adjustment
___X_Error Prone Profile
___X_ Research

Description of Usage:
5. Disability:

Enter appropriate code:
1 = Yes
2 = No
8 = INA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ____ Number of States
(Manual) _____ Number of States
QC Investigation File ____Y_ Yes or NO

Response Source: ___X_Claimant
___Employer
___Work Search Employer
___X_Agency
___Other

Usage: ___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___X_Other Eligibility
___Payment Adjustment
___X_Error Prone Profile
___X_ Research

Description of Usage:
6. Veteran:

Enter appropriate code:
1 = Yes
2 = No
8 = INA

Field_Size: ___1___Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y_ Yes or NO

Response_Source:
_X_Claimant
___Employer
___Work Search Employer
_X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
_X_Other Eligibility
___Payment Adjustment
_X_Error Prone Profile
_X_Research

Description_of_Usage:
PART II - CLAIMANT INFORMATION

7. (40) highest Grade Completed:
Enter highest level of achievement i.e.:
00 = never attended school
01 thru 12 (12 = high school graduate or GED)
13 = Vocational or Technical certificate
14 = Some college (1-3 years but no degree)
15 = Associate's degree
16 = BA or BS Degree
20 = Graduate Degree (Masters, MD, PHD, JD)
98 = INA

Field Size: ___2___ Digits

Source:
Agency Files (Automated) _22_ Number of States
(Manual) ______ Number of States
GC Investigation File ______ Yes or NO

Response Source:
___X__ Claimant
___ Employer
___ Work Search Employer
___X__ Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___X Error Prone Profile
___X Research

Description of Usage:

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(DRAFT) - VERSION III - (8/27/84)
8. Currently in Training:

Enter appropriate code:
1 = Yes
2 = No
8 = INA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___ Yes or NO

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
___ Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description of Usage:
*** PART II - CLAIMANT INFORMATION ***

9.(47) **Primary Occupation Code:**


**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___42___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- _X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- _X_Active Work Search
- _X_Other Eligibility
- ___Payment Adjustment
- _X_Error Prone Profile
- _X_Research

**Description of Usage:**

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(DRAFT) - VERSION III - (3/27/84)
### PART II: CLAIMANT INFORMATION ###

10. **Occupation Code (Last Job Prior to Most Recent Initial Claim):**


**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___Y_ Yes or No

**Response Source:**
- _X_ Claimant
- ___Employer
- ___Work Search Employer
- _X_ Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
  - ___Monetary Determination
  - ___Separation Issue
  - _X_ Active Work Search
  - _X_ Other Eligibility
  - ___Payment Adjustment
- _X_ Error Prone Profile
- _X_ Research

**Description of Usage:**
**PART II.--CLAIMANT INFORMATION**

11. Occupation Code (Seeking work):

Enter major occupation group code for type of work that
claimant is seeking. (Source: Dictionary of Occupational

Field Size: _2_ Digits

Source:

Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File _Y_ Yes or NO

Response Source:

_ X_ Claimant

_ _ Employer

_ _ Work Search Employer

_ X_ Agency

_ _ Other

Usage:

_ _ Control Item
_ _ Payment Error Rate Determination
Problem Area Analysis

_ _ Monetary Determination
_ _ Separation Issue
_ X_ Active Work Search
X_ Other Eligibility
_ _ Payment Adjustment
_ X_ Error Prone Profile
_ X_ Research

Description of Usage:

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(DRAFT) -- VERSION III -- (9/27/84)
PART II: CLAIMANT INFORMATION

12. (44) Normal Wages, Usual Job:

Enter normal hourly wage for claimant in normal occupation.

Express in dollars and cents per hour, e.g., $5.00 per hour is coded as 00500. If rate of pay is expressed in terms of dollars per week, or dollars per month:
(a) Divide dollars per week by 40 to estimate dollars and cents per hour; or
(b) Divide dollars per month by 172 (i.e., 40 hours X 4.3 weeks) to estimate dollars and cents per hour.

Enter 8 if claimant did not know or information not available
Enter 9 if this question not applicable for this claimant.

Field Size: ___5___ Digits

Source:
Agency Files (Automated) ______ Number of States
Manual ______ Number of States
SC Investigation File ______ Yes or No

Response Source:
___X___ Claimant
___X___ Employer
___X___ Work Search Employer
___X___ Agency
___X___ Other

Usage:
___X___ Control Item
___X___ Payment Error Rate Determination
___X___ Problem Area Analysis
___X___ Monetary Determination
___X___ Separation Issue
___X___ Active Work Search
___X___ Other Eligibility
___X___ Payment Adjustment
___X___ Error Prone Profile
___X___ Research

Description of Usage:

II-12

(DRAFT) - VERSION III - (3/27/84)
13. (45) **Lowest Acceptable Wage:**

Enter lowest acceptable hourly wage that claimant is willing to accept.

Express in dollars and cents per hour. Use computation in item 12 for converting weekly and monthly figures to hourly.

Enter 8 if information not available (INA).

Enter 9 if not applicable (NA - e.g. return to work, piece work).

**Field Size:** 5-Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ____ Number of States
- QC Investigation File _Y_ Yes or NC

**Response Source:**
- _X_Claimant
- ___Employer
- ___Work Search Employer
- _X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- _X_Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- _X_Error Prone Profile
- _X_ Research

**Description of Usage:**
14. Marital Status:

Enter marital status of claimant at time of filing for KW.
1 = Never Married
2 = Married - Spouse working
3 = Married - Spouse not working
4 = Divorced
5 = Separated
6 = Widowed
8 = INA

Field Size: __1___Digit

Source:
Agency Files (Automated) __21___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:
__X__Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
__X__Error Prone Profile
__X__Research

Description of Usage:
15. Family Status:

Enter one of the following codes:
1 = Single head of household
2 = Parent in two parent family
3 = Other family member
9 = NA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ______ Number of States
QC Investigation File ___Y_ Yes or NC

Response Source:
___X_Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X_Error Prone Profile
___X_Research

Description of Usage:
16. **Number of Dependents:**

Enter total number of individuals dependent upon claimant.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___2___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
17. **Household Income:**

Enter whole dollar amount of last year's household income.

- 1 = $0 to $5,000
- 2 = $5,001 to $10,000
- 3 = $10,001 to $15,000
- 4 = $15,001 to $20,000
- 5 = $20,001 to $30,000
- 6 = $30,001 to $40,000
- 7 = $40,001 to $50,000
- 8 = more than $50,000
- 9 = INA

**Field Size:** 1 Digit

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Y Yes or NC

**Response Source:**
- X Claimant
- _ Employer
- _ Work Search Employer
- _ Agency
- _ Other

**Usage:**
- _ Control Item
- _ Payment Error Rate Determination
- _ Problem Area Analysis
  - _ Monetary Determination
  - _ Separation Issue
  - _ Active Work Search
  - _ Other Eligibility
  - _ Payment Adjustment
- X Error Prone Profile
- X Research

**Restriction of Usage:**

II-17

(DRAFT) - VERSION III - (3/27/84)
18. Food Stamp Recipient:

Enter appropriate code from below:
1 = Yes
2 = No
8 = INA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y___ Yes or NO

Response Source:
__X__ Claimant
___ Employer
___ Work Search Employer
___ Agency
__X__ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
__X__ Error Prone Profile
__X__ Research

Description of Usage:
19. Welfare Recipients:

Enter appropriate code from below:
1 = Yes
2 = No
8 = INA

Field_Size: ___1___Digit

Source:
Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File _____ Yes or No

Response_Sources:
_X_Claimant
___Employer
___Work Search Employer
___Agency
_X_Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
_X_Error Prone Profile
_X_Research

Description of Usage:
*** PART III. --- CLAIM INFORMATION ***

1.(5) Original_Amount_Paid_and/or_Offset_for_KW:

Enter original amount paid and/or offset for key week.
Express in whole dollars (e.g., $98.00 coded as 098).

Field Size: _2_ Digits

Source:
Agency Files (Automated) _2_ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
___ Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description of Usage:

III-1

(DRAFT) - VERSION III - (6/27/84)
2.(7) Program Code:

Enter appropriate program code:
1 = UI
2 = UI-UCFE
3 = UI-UCX
4 = UI-UCFE-UCX
5 = UCFE
6 = UCFE-UCX
7 = UCX
8 = Other

Field Size: ___l___ Digit

Source:
Agency Files (Automated) ___22___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:
3. (22) **Combined_Wage_Claim:**

Enter combined wage claim indicator for key week:
1 = Yes
2 = No

**Field_Size:** ___1__ Digit

**Source:**
- Agency Files (Automated) ___8__ Number of States
- (Manual) _____ Number of States
- QC Investigation File _____ Yes or NO

**Response Source:**
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

**Usage:**
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

**Description of Usage:**
4.(18) **Benefit Year Beginning:**

Enter effective date of most recent new claim, not reopened or additional (YMMDD).

**Field Size:** __5__ Digits

**Source:**
- Agency Files (Automated)  __52__ Number of States
- (Manual)  _____ Number of States
- QC Investigation File  _____ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Uses:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Uses:**
*** PART III - CLAIM INFORMATION ***

5. Initial Claim filing method:

Enter filing method for Initial Claim:
1 = Mail Claim
2 = In-person Claim
3 = Telephone Claim
4 = Employer Filed
5 = Other

Field Size: ___1__ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
GC Investigation File ___ Yes or No

Response Source:
Claimant ___
Employer ___
Work Search Employer ___
Agency ___
Other ___

Usage:
Control Item ___
Payment Error Rate Determination ___
Problem Area Analysis ___
Monetary Determination ___
Separation Issue ___
Active Work Search ___
Other Eligibility ___
Payment Adjustment ___
Error Prone Profile ___
Research ___

Description of Usage:

III-5

(DRAFT) - VERSION III - (8/27/84)
*** PART III --- CLAIM INFORMATION ***

6. **First Compensable Week Ending Date:**

Enter Week Ending Date of first compensable week paid in benefit year (YMMDD).

**Field Size:**  _5_ Digits

**Source:**
- Agency Files (Automated)  _5_ Number of States
- (Manual)  ___ Number of States
- QC Investigation File  ___ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- _X_ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- _X_ Monetary Determination
- _X_ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- _X_ Error Prone Profile
- _X_ Research

**Description of Usage:**

III-6

(DRAFT) - VERSION III - (8/27/84)
*** PART III --- CLAIM INFORMATION ***

7. Date of First Payment:

Enter date payment was made for first compensable week (YMMDD).

Field Size: __5__ Digits

Source:
Agency Files (Automated) __31__ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
___Claimant
___Employer
___Work Search Employer
_X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
_X_Error Prone Profile
_X_Research

Description of Usage:
*** PART_III---CLAIM_INFORMATION ***

8.(23) **KW_Filing_Method:**

Enter filing method for Key Week Claim:
1 = Mail Claim
2 = In-person Claim
3 = Employer filed (i.e. partial)

**Field_Size:** __1__-Digit

**Source:**
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___X Yes or NO

**Response_Source:**
___Claimant
___Employer
___Work Search Employer
___X_Agency
___Other

**Usage:**
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
---Monetary Determination
---Separation Issue
---X_Active Work Search
---X_Other Eligibility
---Payment Adjustment
___X_Error Prone Profile
___X_Research

**Description_of_Usage:**
*** PART III -- CLAIM INFORMATION ***

9. **Key_Week_Certification:**

Enter appropriate code:
1 = Weekly
2 = Bi-weekly
3 = Other

**Field_Size:** 1 Digit

**Source:**
- Agency Files (Automated) ______ Number of States
  - (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response_Source:**
- Claimant
- Employer
- Work Search Employer
- Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
  - Monetary Determination
  - Separation Issue
- Active Work Search
- Other Eligibility
- Payment Adjustment
- Error Prone Profile
- Research

**Description of Usage:**

III-9

(CRAFT) - VERSION III - (8/27/84)
*** PART III --- CLAIM INFORMATION ***

10. Benefit_Rights_Given:

Enter method of giving claimant's Benefit Rights:
1 = In-person Interview
2 = Booklet/Pamphlet
3 = Slides/movie
4 = 1 & 2
5 = 1 & 3
6 = 2 & 3
7 = 1, 2 & 3
8 = given in prior claim
9 = Not Given
0 = INA

Field_Size: __1__Digit

Source:
Agency Files (Automated) ___ Number of States
___ Number of States
QA Investigation File ___ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
 Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description_of_Usage:

III-10
(DRAFT) ---- VERSION III ---- (8/27/84)
*** PART III --- CLAIM INFORMATION ***

11. **Number of ERPs Held - Current Benefit Year:**

Enter number of ERPs held during the claimant's current benefit year.

**Field Size:** 2 Digits

**Source:**
- Agency Files (Automated) 18 Number of States
- Manual  Number of States
- GC Investigation File Yes or NO

**Response Source:**
- Claimant
- Employer
- Work Search Employer
- Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- Active Work Search
- Other Eligibility
- Payment Adjustment
- Error Prone Profile
- Research

**Description of Usage:**

III-11
(DRAFT) - VERSION III - (8/27/84)
*** PART III *** CLAIM INFORMATION ***

12. Last ERP Date:

Enter date (YMMDD) of claimant's most recent ERP.
Enter 8 if INA
Enter 9 if NA.
Field Size: ___ 5 ___ Digits

Source:
Agency Files (Automated) ___ 12 ___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
___ Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description of Usage:

III-12
(DRAFT) - VERSION III - (8/27/84)
13. **Number_of_New_or_Additional_Claims_in_last_XX_months**

Enter number of new or additional claims filed by claimant in the XX months prior to and including the KW.

Exclude EB and FSC.

**Field Size:**  _2_ Digits

**Source:**
- Agency Files (Automated)  _28_ Number of States
- (Manual)  _____ Number of States
- QC Investigation File  _____ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- X  Error Prone Profile
- X  Research

**Description of Usage:**
*** PART IV --- MONETARY ELIGIBILITY ***

1.(21) **Number of Base Period Employers Used in Calculating WRA and MRA Before Investigation:**

Enter number of base period employers used in calculating monetary determination before investigation.

Include seasonal employers if they might effect monetary determination at any time.

Field Size: ___2___ Digits

Source:
Agency Files (Automated) ___2___ Number of States
ifar (Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:
___Claimant
___Employer
___Work Search Employer
X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
X_Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
X_Error prone Profile
X_Research

Description of Usage:
PART IV — MONETARY ELIGIBILITY

2.(10) Base Period Wages Before Investigation:

Enter total amount of wages earned/paid in base period, before investigation.

Express in whole dollars.

Include seasonal employment if it might affect monetary determination at any time.

Field Size: ___6___ Digits

Source:

Agency Files (Automated) ___6___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO.

Response Source:

___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:

___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___X Research

Description of Usage:
3. (48) **Industry Code (primary base period employer):**

Enter four digit industry code for claimant's primary base period employer (employer from whom the most wages were earned).

Enter 8 if INA.

**Field Size:** ___4___ Digits

**Source:**
- Agency Files (Automated) ___44___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
### PART IV — MONETARY ELIGIBILITY

#### 4. Ownable Code:

Enter one of the following codes:

1 = Federal Government  
2 = State Government  
3 = Local Government  
4 = International, Foreign Government  
5 = Private Sector (Required if 6 or 7 are INA)  
6 = Private Sector, Corporation (Optional)  
7 = Private Sector, Non-Corporation (Optional)  
8 = INA

**Field Size:** ___1___ Digit

**Source:**

- Agency Files (Automated) ___ Number of States  
- Manual) ___ Number of States  
- QC Investigation File ___ Yes or No

**Response Source:**

- Claimant  
- Employer  
- Work Search Employer  
- X Agency  
- Other

**Usage:**

- Control Item  
- Payment Error Rate Determination  
- Problem Area Analysis  
- X Monetary Determination  
- X Separation Issue  
- X Active Work Search  
- Other Eligibility  
- X Payment Adjustment  
- X Error Prone Profile  
- X Research

**Description of Usage:**

IV-4

(DRAFT) — VERSION III — (8/27/84)
5. **high Quarter Earnings before Investigation:**

Enter whole dollar amount of highest quarter earnings (before investigation) that claimant had in current Base Period.

Complete this item if available in state file, (i.e. required for monetary).

Enter zero if NA.

**Field Size:** ___E___ Digits

**Source:**
- Agency Files (Automated) ___46___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or No

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
6. **Number of Weeks Worked in Base Period Before Investigation:**

Enter number of weeks claimant worked in Base Period before investigation.

Complete this item if available in state file (i.e. required for monetary).

Enter '9 if weeks of work are not recorded.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___18___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO:

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
### PART IV—MONETARY ELIGIBILITY ###

7.(11) **Weekly Benefit Amount (WBA) Before Investigation:**

Enter maximum WBA that could have been paid to claimant during key week, based on monetary determination which applied to key week at time original payment for key week was made.

Exclude dependents' allowance, pension reductions, or key week earnings (if any).

Express in whole dollars.

Include seasonal employment if applicable.

Do not use adjusted WBA's on monetary re-determinations made as a result of non-monetary issues (i.e. a separation issue).

**Field Size:** ___3__ Digits

**Source:**
- Agency Files (Automated) ___2__ Number of States
- Manual __________ Number of States
- QC Investigation File __________ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- X_Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- X_Error Prone Profile
- X_Research

**Description of Usage:**

IV-7

(DRAFT) — VERSION III — (3/27/84)
*** PART IV --- MONETARY ELIGIBILITY ***

8.(12) **Maximum Benefit Amount (MBA) Before Investigation:**

Enter maximum regular benefit amount, based on monetary determination which applied to key week at time original payment for key-week was made.

Express in whole dollars.

Disregard any EB or FSC benefit entitlement, dependents' allowances, and any pension deductions.

Include seasonal employment if applicable.

Do not use adjusted MBA's on monetary redeterminations made as a result of non-monetary issues (i.e. a separation issue).

Field Size: ___4___ Digits

Source:

Agency Files (Automated) ___51___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:

___Claimant
___Employer
___Work Search Employer
___X_Agency
___Other

Usage:

___Control Item
___Payment Error Rate Determination Problem Area Analysis
___X_Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___X_ Research

Description of Usage:
*** PART IV --- MONETARY ELIGIBILITY ***

9. Monetary Redetermination Before Investigation:

Enter appropriate code which indicates if agency redetermined claimant's monetary eligibility.
1 = Yes
2 = No
9 = NA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___46___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:

IV-9

(CRAFT) - VERSION III - (8/27/84)
PART IV - MONETARY ELIGIBILITY

10. (19) Remaining Balance (KW) As of Date KW Payment Claimed:

Enter total whole dollar amount of benefits available to claimant after KW payment was claimed.
Enter zero if balance is exhausted.

Field Size: _______ Digits

Source:
Agency Files (Automated) _______ Number of States
(MANUAL) _______ Number of States
QC Investigation File _______ Yes or NO

Response Source:
Claimant
Employer
Work Search Employer
Agency
Other

Usage:
Control Item
Payment Error Rate Determination
Problem Area Analysis
Monetary Determination
Separation Issue
Active Work Search
Other Eligibility
Payment Adjustment
Error Prone Profile
Research

Description of Usage:
*** PART IV — MONETARY ELIGIBILITY ***

11. (60) **Number of Base Period Employers Contacted:**

Enter number of base period employers from whom investigators were able to secure wage and/or separation information either in person or by mail.

Enter zero if no base period employers provided information.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ______ Number of States
- (Manual) ______ Number of States
- GC Investigation File ______ Yes or No

**Response Source:**
- Claimant
- Employer ______
- Work Search Employer
- Agency
- Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
12. (49) **Number of Base Period Employers After Investigation:**

Enter correct number of base period employers used to calculate claimant's monetary determination (WBA and MBA) after investigation.

Enter zero if an ineligible monetary determination is issued as a result of the investigation.

**Field Size:** __2__ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**
- Claimant
- Employer ___
- Work Search Employer ___
- Agency ___
- Other ___

**Usage:**
- Control Item ___
- Payment Error Rate Determination ___
- Problem Area Analysis ___
- Monetary Determination ___
- Separation Issue ___
- Active Work Search ___
- Other Eligibility ___
- Payment Adjustment ___
- Error Prone Profile ___
- Research ___

**Description of Usage:**
*** PART IV --- MONETARY ELIGIBILITY ***

13. (50) **Base Period Wages After Investigation:**

Enter correct total amount of wages earned/paid in base period, after investigation.

Express in whole dollars.

Enter zero if item 12 is zero.

**Field Size:** ___2__ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___X__ Yes or No

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___X__Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___ Research

**Description of Usage:**

IV-13

(DRAFT) - VERSION III - (3/27/84)
14. **High Quarter Earnings After Investigation:**

Enter whole dollar amount of highest quarter of earnings (after the investigation) that claimant had in current Base Period.

Complete this item if available in state file (i.e. required for monetary).

Enter zero if NA or if item 12 is zero.

**Field Size:** 5 Digits

**Source:**
- Agency Files (Automated)
- (Manual)
- QC Investigation File

**Response Source:**
- Claimant
- Employer
- Work Search Employer
- Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- Active Work Search
- Other Eligibility
- Payment Adjustment
- Error Prone Profile
- Research

**Description of Usage:**
*** PART IV - MONETARY ELIGIBILITY ***

15. Number of Weeks Worked in Base Period After Investigation:

Enter number of weeks claimant worked in Base Period, after investigation.

Complete this item if available in state file (i.e. required for monetary).

Enter 9 if weeks of work are not recorded.

Enter zero if item 12 is zero.

Field Size: ___2___ Digits

Source:
Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File ___Y__ Yes or No

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:
### PART IV --- MONETARY ELIGIBILITY ###

16. (51) **WBA After Investigation:**

Enter correct maximum WBA that could have been paid to claimant during key week based on monetary determination using correct base period wages.

Exclude dependents' allowance, pension reductions, or key week earnings (if any).

Express in whole dollars.

Include seasonal employment if applicable.

Do not use adjusted WBA's on monetary redeterminations made as a result of nonmonetary issues (i.e., a separation issue).

Enter zero if items 12 and 13 are zero.

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Y__ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error prone Profile
- ___ Research

**Description of Usage:**

---

IV-16

(DRAFT) - VERSION III - (8/27/84)
*** PART IV - MONETARY ELIGIBILITY ***

17. (55) MBA After Investigation:

Enter maximum regular benefit award based on correct monetary determination which applied or should have applied to key week at time original payment for key week was made.

Express in whole dollars.

Disregard any EB, FSC entitlement or dependents' allowance and pension deduction.

Include seasonal employment, if applicable.

Do not use adjusted MBA's on monetary redeterminations made as a result of nonmonetary issues (i.e., a separation issue).

Enter zero if item 12 is zero.

Field size: ___4___ Digits

Source:

Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File ___Y Yes or NO

Response Source:

___Claimant
___Employer
___Work Search Employer
___Y Agency
___Other

Usage:

___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:

IV-17

(DRAFT) - VERSION III - (3/27/84)
*** PART V --- SEPARATION INFORMATION ***

NOTE: In this part the last employer, as defined by State law, is the employer whose reason for separating the claimant could affect eligibility for KW benefits.
*** PART V --- SEPARATION INFORMATION ***

1. Date of Separation from Last Employer:

   Enter date of separation from last employer (YMMD)

Field Size: ___2___ Digits

Source:
   Agency Files (Automated) ___24__ Number of States
   (Manual) ______ Number of States
   GC Investigation File ______ Yes or No

Response Source:
   ___Claimant
   ___Employer
   ___Work Search Employer
   ___Agency
   ___Other

Usage:
   ___Control Item
   ___Payment Error Rate Determination
   ___Problem Area Analysis
   ___Monetary Determination
   X Separation Issue
   ___Active Work Search
   ___Other Eligibility
   ___Payment Adjustment
   ___Error Prone Profile
   X Research

Description of Usage:

---

V-2

(DRAFT) - VERSION III - (8/27/94)
2.(17) **Reason_for_Separation_before_Investigation:**

Enter one of the following codes based on agency record of claimant's reason for separation from last employer at time key week payment was made. Reason for separation should be from claimant's last employer prior to filing most recent new or additional claim.

1 = Lack of Work
2 = Voluntary Quit
3 = Discharge
4 = Labor Dispute
5 = Other
6 = Not separated

**Field_Size:** ___1___Digit

**Source:**
Agency Files (Automated) ___33___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

**Response_Source:**
___Claimant
___Employer
___Work Search Employer
X_Agency
___Other

**Usage:**
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
X_Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
X_Error Prone Profile
X_Research

**Description_of_Use:**
*** PART_V___SEPARATION_INFORMATION ***

3. Recall_Status_Before_Investigation:

Enter lowest numbered code which applied at time of KW:
1 = Definite recall date with a specific employer
2 = Indefinite recall with a specific employer
3 = Indefinite recall to industry/occupation code
4 = Indefinite recall through union
9 = N/A

Field_Size: ___1___ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y___ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
___Y_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___X_Separation Issue
___X_Active Work Search
___Other Eligibility
___Payment Adjustment
___X_Error Prone Profile
___X_Research

Description_of_Usage:
4. **Date_of_Recall_Before_Investigation:**
Enter date of expected recall as of KW (YMMDD).
Enter 0 if no recall or recall date.

**Field_Size:** ___5___Digits

**Source:**
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y___ Yes or No

**Response_Source:**
_X___Claimant
___Employer
___Work Search Employer
_X___Agency
___Other

**Usage:**
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
_X___Active Work Search
___Other Eligibility
___Payment Adjustment
_X___Error Prone Profile
_X___Research

**Description_of_Usage:**
PART V - SEPARATION INFORMATION

5. **Tax Rate for Last Employer:**

Enter last separating employer's UI tax rate in effect when claimant's monetary determination was issued.

**Field Size:** 3 Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- CC Investigation File ___ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- X Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- X Monetary Determination
- X Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- X Error Prone Profile
- X Research

**Description of Usage:**
6. **Industry Code (Separating Employer):**

Enter four digit industry code (SIC) for the claimant's separating employer.

Enter 8 if INA.

**Field Size:** ___4___ Digits

**Source:**

- Agency Files (Automated) ___ Number of States
  (Manual) ___ Number of States
- GC Investigation File ___X_ Yes or NO

**Response Source:**

- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**

- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___X_Monetary Determination
- ___X_Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___X_Error Prone Profile
- ___X_Research

**Description of Usage:**

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(CRAFT) - VERSION III - (8/27/94)
*** PART V - SEPARATION INFORMATION ***

7. **Ownership Code (Separating Employer):**

Enter one of the following codes:
1 = Federal Government  
2 = State Government  
3 = Local Government  
4 = International, Foreign Government  
5 = Private Sector (Required if 6 or 7 are INA)  
6 = Private Sector, Corporation (Optional)  
7 = Private Sector, Non-Corporation (Optional)  
8 = INA

**Field Size:** ___1___ Digit

**Source:**
- Agency Files (Automated) ___ Number of States  
- (Manual) ___ Number of States  
- QC Investigation File ___ Y_ Yes or NC

**Response Source:**
- ___ Claimant  
- ___ Employer  
- ___ Work Search Employer  
- X_Agency  
- ___ Other

**Usage:**
- ___ Control Item  
- ___ Payment Error Rate Determination  
- ___ Problem Area Analysis  
- X_Monetary Determination  
- X_Separation Issue  
- ___ Active Work Search  
- ___ Other Eligibility  
- ___ Payment Adjustment  
- X_Error Prone Profile  
- X_ Research

**Description of Usage:**
III PARI-V-___ SEPARATION_INFORMATION ***

8. Reason_for_Separation_After_Investigation:

Enter one of the following codes, based on results of GC investigation concerning claimant's reason for separation at time key week payment was made. Reason for separation should be from claimant's last employer prior to filing most recent new or additional claim.

1 = Lack of Work
2 = Voluntary Quit
3 = Discharge
4 = Labor Dispute
5 = Other
6 = Not Separated

Field_Size: ___1___ Digit

Source:
- Agency Files (Automated) ___ Number of States
  (Manual) ___ Number of States
- GC Investigation File ___Y___ Yes or NC

Response_Source:
- X_Claimant
- X_Employer
- Work Search Employer
- Agency
- Other

Usage:
- X_Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- X_Active Work Search
- Other Eligibility
- Payment Adjustment
- X_Error Prone Profile
- X_Research

Description_of_Usage:

V-9

(DRAFT) - VERSION III - (9/27/84)
9. **Recall Status After Investigation:**

Enter correct status if investigation showed different recall status as of KW.

Enter lowest numbered code which applied at time of KW:

Enter same code used in Part V-Item 3, if no change required:

1 = Definite recall date with a specific employer
2 = Indefinite recall with a specific employer
3 = Indefinite recall to industry/occupation code
4 = Indefinite recall through union
9 = N/A

**Field Size:** ___1___ Digit

**Source:**
- Agency Files (Automated) ___ Number of States
- Manual File (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**

- X Claimant
- X Employer
- Work Search Employer
- Agency
- X Other

**Usage:**

- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- X Separation Issue
- X Active Work Search
- Other Eligibility
- Payment Adjustment
- X Error Prone Profile
- X Research

**Association of Usage:**
10. Date of Recall After Investigation:

Enter correct date (YMDMD), if investigation showed different date of recall for KW.

Enter same date as Part V-Item 4, if no change.

Enter zero if no recall.

Field Size: ___5___Digits

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
GC Investigation File ___Y___ Yes or NO

Response Source:
___X___Claimant
___X___Employer
___Y___Work Search Employer
___Agency
___X___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X___Error Prone Profile
___X___Research

Description of Usage:
11. **Number of Prior Separation Issues:**

Enter number of prior separation determinations issued during current Benefit Year (past XX Months or claims).

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- QC Investigation File ___ Y___ Yes or NO
- Manual) ___ Number of States

**Response Source:**
- ___X__ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Y__ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ X___ Error Prone Profile
- ___ Research

**Description of Usage:**
PART V --- SEPARATION INFORMATION

12. Number of Prior Disqualifying Separations:

Enter number of prior disqualifying separations during current benefit year (past XX months)

Field Size: ___2___ Digits

Source:
- Agency Files (Automated) ___33___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

Response Source:
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___X_Agency
- ___Other

Usage:
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___X_Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___X_Error Prone Profile
- ___Research

Description of Usage:
1. (16) **Effective_Date_of_Most_Recent_New/Additional_Claim:**

Enter effective date of most recent new or additional (not reopened) claim (YMMDD).

Enter effective date (YMMDD) of most recent additional claim in prior benefit year, if key week occurs in a transitional claim (see page VI-2).

**Field_Size:** ___5____Digits

**Source:**
- Agency Files (Automated) ___37____ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
  - ___Monetary Determination
  - ___Separation Issue
  - ___Active Work Search
  - ___Other Eligibility
  - ___Payment Adjustment
- ___Error Prone Profile
- X Research

**Description_of_Usage:**

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VI-1

(CRAFT) - VERSION III - (8/27/84)
*** PART VI - DURATION ***

2. (15) **Effective_Date_within_Transitional_Claim:**

1 = Yes (If key week was paid/offset as a result of a continuation of a series of unemployment claims that began in a prior benefit year and continued into current benefit year. Key week must have occurred in current benefit year.)

2 = No (i.e. If key week occurs as a result of an additional claim which breaks transitional series).

**Field Size:** ___1___ Digit

**Source:**
- Agency Files (Automated) ___22___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___ Error Prone Profile
- X Research

**Description of Usage:**
3. **Number_of_Weeks_Claimed_in_Current_Series:**

Enter number of weeks claimed during current series. This includes waiting weeks, pended weeks, disqualified weeks (if filed for), part-total weeks, and weeks paid.

**Field_Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) _37_ Number of States
- (Manual) _____ Number of States
- QC Investigation File _____ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control_Item
- ___Payment_Error_Rate_Determination
- Problem Area Analysis
- ___Monetary_Determination
- ___Separation_Issue
- X_Active_Work_Search
- X_Other_Eligibility
- ___Payment_Adjustment
- X_Error_Prone_Profile
- X_Research

**Description_of_Usage:**
*** PART VI --- DURATION ***

4. **Number of Weeks Paid in Current Series:**
Enter number of weeks paid to claimant during current claim series.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___51___ Number of States
- (Manual) ___51___ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
___Claimant
___Employer
___Work Search Employer
___X_Agency
___Other

**Usage:**
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X_Error Prone Profile
___X_ Research

**Description of Usage:**

__VI-4__

(DRAFT) - VERSION III - (8/27/84)
5. **Number of Weeks in Current Series With Earnings:**

Enter number of weeks claimed during current series that had earnings of any amount.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___28___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- X_Claimant
- X_Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
  - ___Monetary Determination
  - ___Separation Issue
  - ___Active Work Search
- X_Other Eligibility
- ___Payment Adjustment
- X_Error Prone Profile
- X_ Research

**Description of Usage:**
6. Number_of_Weeks_Claimed_in_Last_XX_Months:

Enter number of weeks claimed by claimant during last XX months. This includes waiting weeks, pended weeks, disqualified weeks (if filed for), part total weeks, and weeks paid.

Field_Size: ___2___ Digits

Source:
- Agency Files (Automated) ___37___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NC

Response_Source:
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

Usage:
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

Description_of_Usage:
7. Number of weeks paid in last XX months:
Enter number of weeks paid to claimant during last XX months.

Field Size: ___3___ Digits

Source:
- Agency Files (Automated) ___51___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

Response Source:
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- __ Agency
- ___ Other

Usage:
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

Description of Usage:
*** PART VI --- DURATION ***

8. **Number of Weeks in Last XX Months with Earnings:**

Enter number of weeks claimed during last XX months that had earnings of any amount.

*Field Size:* ___2___ Digits

*Source:*
- Agency Files (Automated) ___40___ Number of States
- (Manual) _______ Number of States
- QC Investigation File ______ Yes or NO

*Response Source:*
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

*Usage:*
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

*Description of Usage:*
**PART VI - DURATION**

9. (20) **Number of Periods of Compensated UI in Prior XX Months (Including Key Week):**

Enter number of different periods of compensated UI in effect during past XX months resulting from filing of a new or additional claim. (Exclude compensated periods resulting from transitional or re-open claims).

Count compensated periods falling into XX months even though beginning (effective) date of the period may be prior to the XX month time span.

This number must be at least 1.

Measure past 12 months as of week ending date of key week.

Enter 9, if INA.

**Field Size:** 2 Digits

**Source:**
- Agency Files (Automated) Number of States
- Manual Number of States
- QC Investigation File Yes or NC

**Response Source:**
- Claimant
- Employer
- Work Search Employer
- Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- Active Work Search
- Other Eligibility
- Payment Adjustment
- Error Prone Profile
- Research

**Description of Usage:**
*** PART VII --- ADJUSTMENTS TO MONETARY AWARD ***

1. Total Amount of Pension Before Investigation:
   Enter whole dollar amount of any pension for Key Week.
Enter 0, if none.

   Field Size: ___3___ Digits

   Source:
   Agency Files (Automated) ___ Number of States
   (Manual) ___ Number of States
   QC Investigation File ___ Yes or NO

   Response Source:
   ___ Claimant
   ___ Employer
   ___ Work Search Employer
   ___ Agency
   ___ Other

   Usage:
   ___ Control Item
   ___ Payment Error Rate Determination
   ___ Problem Area Analysis
   ___ Monetary Determination
   ___ Separation Issue
   ___ Active Work Search
   ___ Other Eligibility
   ___ Payment Adjustment
   ___ Error Prone Profile
   ___ Research

   Description of Usage:

VII-1

(DRAFT) - VERSION III - (3/27/84)
*** PART VII --- ADJUSTMENTS TO MONETARY AWARD ***

2.(14) **Pension Deduction Before Investigation:**

Enter actual amount deducted from WBA due to a pension deduction before investigation of key week.

If deduction is applicable and was deducted, express in whole dollars.

Enter 0 if pension deduction is not applicable to or was not reported by claimant.

Enter 9 if NA.

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___43___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NC

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- X_Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
*** PART_VII_-_ADJUSTMENTS_TO_MONETARY_AWARD ***

3. **Total_Earnings_for_Week_Before_Investigation:**
   Enter whole dollar amount of earnings during KW.
   Enter 0 if none.

**Field_Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response_Source:**
- Claimant
- Employer
- Work Search Employer
- X Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- Active Work Search
- Other Eligibility
- X Payment Adjustment
- X Error Prone Profile
- ___ Research

**Description_of_Usage:**
PART VII---ADJUSTMENTS TO MONETARY AWARD

4.(26) Earnings Deduction Before Investigation:

Enter actual amount deducted from WBA because of earnings. This amount should also include amount deducted for vacation and/or holiday pay.

Express in whole dollars, when applicable.

Note: This amount may be less than amount reported on the certification by claimant because of earnings disregarded by law in computation of amount deducted.

Enter 9 if no earnings deduction.

Field Size: ___3___ Digits

Source:
Agency Files (Automated) __50__ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NC

Response Source:
___Claimant
___Employer
___Work Search Employer
__X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___X_Payment Adjustment
__X_Error Prone Profile
___ Research

Description of Usage:
5. (35) **Total Disability Received for Key Week:**

Enter all amounts of disability for key week regardless of effect on WBA or amount paid for key week.

Express in whole dollars.

Enter 8 if claimant did not know amount for key week.

Enter zero if none. Do not leave blank.

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Y_ Yes or NO

**Response Source:**
- X_Claimant
- ___ Employer
- ___ Work Search Employer
- X_Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- X_Other Eligibility
- X_Payment Adjustment
- X_Error Prone Profile
- ___ Research

**Description of Usage:**
6. *Total_Pension_After_Investigation*:

Enter whole dollar amount of any pension for Key Week.

Enter 0 if none.

**Field Size:** 3 Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
*** PART VII --- ADJUSTMENTS TO MONETARY AWARD ***

7. (54) Pension_Deduction_After_Investigation:

Enter correct amount that should have been deducted from WBA due to a pension deduction for key week.

If the deduction is applicable, express in whole dollars.

Enter 0, if pension deduction is not applicable to claimant.

Field_Size: ___3___ Digits

Source:
Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File ___Y___ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description_of_Usage:
9. Total Earnings for Key Week After Investigation:
Enter whole dollar amount of any earnings for Key Week.
Enter 0 if none.
Field Size: ___3___ Digits
Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y___ Yes or NO
Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:
9. (52) **Earnings Deduction After Investigation:**

Enter correct amount that should have been deducted from WBA because of earnings (including vacation and holiday pay) during key week.

Express in whole dollars.

Enter 0 if no deduction.

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) _____ Number of States
- (Manual) _____ Number of States
- QC Investigation File _____ Yes or No

**Response Source:**
- ___Claimant
- ___Employer
- ___work Search Employer
- ___Agency
- ___ Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active work Search
- ___Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
1. (28) **Job_Service_Registration_Required**

Claimant required to register with Job Service:

1 = Yes

2 = No Enter only if there is written law/policy that provides for non-registration under certain circumstances (e.g., temporary lay-off, union membership), and such non-registration policy is applicable to claimant.

**Field Size:** ___1___ Digit

**Source:**
- Agency Files (Automated) ___ Number of States
- Manual) ___ Number of States
- QC Investigation File ___Y___ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- __X__ Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- __X__ Error Prone Profile
- __X__ Research

**Description of Usage:**

---

VIII-1

(DRAFT) - VERSION III - (8/27/84)
2. Reason_ JS_ Registration Deferred:

Enter appropriate code:
1 = Union member
2 = Job attached
3 = Partial
4 = Seasonal
5 = Approved training
9 = NA

Field Size: ___1____Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y___ Yes or NO

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___X__ Error Prone Profile
___X__ Research

Description of Usage:
*** Part VIII --- JOB SERVICE/UNION REGISTRATION ***

3.(61) Mat_Technical_Requirement_for_Registration_with_Job_Service:

Enter:
1 = YES, if claimant has satisfied provisions of written law/policy for Job Service registration, even if claimant could not have been referred to a job by Job Service office during key week, (i.e., initial or continued claim form contains a statement, "I hereby register for work and file a claim for unemployment benefits" or where partial applications are used to register claimants who will not receive services).

2 = NO, if claimant did not satisfy provisions of written law/policy for Job Service registration for key week.

Use INA or NA code if appropriate.

8 = INA

9 = NA

Field Size: ___1____ Digit

Source:
Agency Files (Automated) ______ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response Source:
____Claimant
____Employer
____Work Search Employer
_____Agency
______Other

Usage:
____Control Item
____Payment Error Rate Determination
Problems Area Analysis
____Monetary Determination
____Separation Issue
_____Active Work Search
_____Other Eligibility
____Payment Adjustment
_____Error Prone Profile
_____Research

Description of Usage:
4. (62) **Actively/Currently Registered with Job Service as of Kw:**

Enter:

1 = YES  If claimant could have been referred to a job by Job Service during key week.

2 = NO   If such referral could not have occurred, even if claimant met technical requirement for Job Service registration for key week (item 61 above).

Use INA or NA code if appropriate.

8 = INA

9 = NA

Field Size: ___1___Digit

Source:
Agency Files (Automated)  _18_ Number of States
(Manual)  ______ Number of States
QC Investigation File  ______ Yes or NO

Response Source:
---Claimant
---Employer
---Work Search Employer
_X_Agency
---Other

Usage:
---Control Item
---Payment Error Rate Determination
---Problem Area Analysis
---Monetary Determination
---Separation Issue
_X_Active Work Search
_X_Other Eligibility
---Payment Adjustment
_X_Error prone profile
_X_Research

Description of Usage:

---VIII-4

(DRAFT) - VERSION III - (3/27/84)
5. **Number of Job Service Referrals:**

Enter number of times Job Service referred claimant for employment during current Benefit Year.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ____ Number of States
- QC Investigation File ____ Y_ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**
6. Registered with Private Employment Agency as of KW:

Enter appropriate code:
1 = Yes
2 = No
8 = INA
9 = NA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) _____ Number of States
(Manual) ______ Number of States
QC Investigation File ___Y__ Yes or NO

Response Source:
_X_Claimant
___Employer
___Work Search Employer
___Agency
_X_Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
_X_Active Work Search
_X_Other Eligibility
___Payment Adjustment
_X_Error Prone Profile
_X_ Research

Description of Usage:

VIII-6

(DRAFT) - VERSION III - (8/27/84)
7. **Number of Private Employment Agency Referrals:**

Enter number of times a Private Employment Agency referred claimant for employment during current Benefit Year.

*Field Size:* ___2___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___Y_ Yes or NO

**Response Source:**
- _X_ Claimant
  ___ Employer
  ___ Work Search Employer
  ___ Agency
  ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- _X_ Active Work Search
- _X_ Other Eligibility
- ___ Payment Adjustment
- _X_ Error Prone Profile
- _X_ Research

**Description of Usage:**
8. (12) Active Union Member as of KW:

Enter appropriate code if claimant belongs to a Union with a hiring hall

1 = Yes
2 = No
8 = INA

Field Size: ___1___Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File ___Y_ Yes or NC

Response Source: _X_Claimant
___Employer
___Work Search Employer
__X_Agency
__X_Other

Usage: ___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
__X_Active Work Search
__X_Other Eligibility
___Payment Adjustment
__X_Error Prone Profile
__X_ Research

Description of Usage:
9. (63) **Met Requirement to Register with Union:**

Enter appropriate code:

1 = YES If claimant was an active union member in good standing and was able to be referred by the union during key week.

2 = NO

6 = INA

9 = NA

Field Size: ___1___ Digit

Source:

Agency Files (Automated)  ____ Number of States

(Manual) __ Number of States

QC Investigation File ___Y_ Yes or NO

Response Source:

_ _ Claimant

___Employer

___Work Search Employer

_X_Agency

_X_Other

Usage:

___Control Item

___Payment Error Rate Determination

Problem Area Analysis

___Monetary Determination

___Separation Issue

_X_Active Work Search

_X_Other Eligibility

___Payment Adjustment

_X_Error Prone Profile

_X_ Research

Description of Usage:
10. **Number of Union Referrals:**

   Enter number of times a Union referred claimant for employment during current Benefit Year.

   **Field Size:** ____2____ Digits

   **Source:**
   - Agency Files (Automated) ______ Number of States
   - QC Investigation File ______ Yes or No
   - Manual ______ Number of States

   **Response Source:**
   - X_Claimant
   - Employer
   - Work Search Employer
   - Agency
   - X_Other

   **Usage:**
   - Control Item
   - Payment Error Rate Determination
   - Problem Area Analysis
   - Monetary Determination
   - Separation Issue
   - X_Active Work Search
   - X_Other Eligibility
   - Payment Adjustment
   - X_Error Prone Profile
   - X_Research

   **Description of Usage:**
1. Claimant Required to Actively Seek Work:

Enter appropriate code:

1 = Yes
2 = Yes, but a written directive was in effect that temporarily suspended or altered normal eligibility requirements of State's written law/policy; and this suspension/alteration affected claimant's eligibility during key week.
3 = Yes, but verbal directive in effect (applies to suspensions due to natural disasters, etc., not to temporary layoffs and/or partials)
4 = Union deferred
5 = Disability deferred
6 = School deferred
7 = Other
9 = NA

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QI Investigation File ___ Y ___ Yes or NO

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
___ X Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ X Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ X Error Prone Profile
___ X Research

Description of Usage:

IX-1

(DRAFT) - VERSION III - (8/27/84)
2. (46) **Number_of_Job_Contacts_listed_for_KW:**

Enter number of key week job contacts indicated by claimant (from any source).

Enter zero, if no contacts were indicated or claimant does not know.

Enter 8 if INA.

Enter 9 if not required to seek work

**Field_Size:** __2__ Digits

**Source:**
- Agency Files (Automated) __Number_of_States
- (Manual) __Number_of_States
- QC Investigation File __Y__ Yes or NC

**Response_Source:** __X__ Claimant
- Employer
- Work Search Employer
- Agency
- __Other__

**Usage:**
- __Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- __Monetary Determination
- Separation Issue
- __Active Work Search
- __Other Eligibility
- Payment Adjustment
- __Error Prone Profile
- __Research

**Description_of_Usage:**
**Part IX—WORK SEARCH EFFORTS/ELIGIBILITY**

3. (56) **Number of KW Work Search Contacts Investigated:**

Enter total number of work-search contacts investigated by Quality Control unit, whether or not investigation resulted in such contacts being verified as acceptable, unacceptable, or being classified in that "grey" area in which it was not possible to obtain definite evidence as to whether or not a work-search contact was acceptable.

Do not include here any work-search contacts that were not investigated by Quality Control unit.

Enter zero if no job contacts were investigated, and make items 4, 5, and 6 zero. The number entered here cannot exceed number entered in item 2 and must equal the sum of items 4, 5, and 6.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

**Description of Usage:**
4. (57) **Number_of_KW_Work_Search_Contacts_Verified_as_Acceptable:**

This number must be less or equal to number of job contacts actually investigated by QC unit, as specified on page IX-3 above.

Include only work search contacts for which written documentation exists in KW file that such contacts were made by claimant and were acceptable contacts within State's WRITTEN law/policy on active search for work.

Documentation should be sufficient to permit a third party to determine basis for QC decision that work search contacts were acceptable.

Enter zero if item 3 is equal to zero.

**Field_Size:** ___2___ Digits

**Source:**
- Agency Files (Automated) ______ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NC

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profiles
- ___Research

**Description_of_Usage:**

IX-4

(DRAFT) - VERSION III - (3/27/84)
*** Part IX. --- WORK SEARCH EFFORTS/ELIGIBILITY ***

5. (58) Number of KW Work Search Contacts Verified as Unacceptable:

This number must be less than or equal to number of job contacts actually investigated by QC, as specified on page IX-3 above.

Include only job contacts for which written documentation exists in KW file that such contacts were not made at all by claimant and/or were made but are unacceptable work search contacts within the framework of State's WRITTEN law/policy on active search for work.

Documentation should be sufficient to allow a third party to determine basis of QC decision that work-search contacts were unacceptable. Contacts made outside KW are considered acceptable.

Enter zero if item 3 is equal to zero.

Field Size: 2 Digits

Source:
Agency Files (Automated) Number of States
(Manual) Number of States
QC Investigation File Yes or NC

Response Source:
Claimant
Employer
Work Search Employer
Agency
Other

Usage:
Control Item
Payment Error Rate Determination
Problem Area Analysis
Monetary Determination
Separation Issue
Active Work Search
Other Eligibility
Payment Adjustment
Error Prone Profile
Research

Description of Usage:
6 (59) **Number_of_Work_Search_Contacts_for_KEY=WEEK.That.Could\nNot.Be Verified.as.Either.Acceptable.or.Unacceptable:**

This number must be less than or equal to number of job contacts investigated, as entered on page IX-3 above. Include only job contacts for which definite evidence could not be obtained to show that such contacts were either made or not made by claimant and, therefore, were neither verified as acceptable or unacceptable contacts within framework of State's WRITTEN law/policy on active search for work.

Enter zero if item 3 equals zero.

**Field_Size:** ___2___Digits

**Source:**
- Agency Files (Automated)  ___ Number of States
- (Manual)  ___ Number of States
- QC Investigation File  ___Y___ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___X__ Work Search Employer
- ___X__ Agency
- ___X__ Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___X__ Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___X__ Error Prone Profile
- ___X__ Research

**Description_of_Usage:**
*** Part IX --- WORK SEARCH ERRORS/ELIGIBILITY ***

7. Number_of_Prior_Nonseparation_Issues:
   Enter number of prior nonseparation determinations issued (past XX Months). This includes both formal and informal determinations.

   Field_Size: ___2__ Digits

   Source:
   Agency Files (Automated) ___2__ Number of States
   (Manual) ______ Number of States
   QC Investigation File ______ Yes or NO

   Response_Source:
   ___Claimant
   ___Employer
   ___Work Search Employer
   _X_Agency
   ___Other

   Usage:
   ___Control Item
   ___Payment Error Rate Determination
   Problem Area Analysis
   ___Monetary Determination
   ___Separation Issue
   ___Active Work Search
   ___Other Eligibility
   ___Payment Adjustment
   _X_Error Prone Profile
   ___Research

   Description_of_Usage:
**Part IX — Work Search Efforts/Eligibility**

8. *Number of Prior Nonseparation Issues That Were Disqualifying:*

   Enter number of prior disqualifying nonseparations (past XX months).

   **Field Size:** ___2___ Digits

   **Source:**
   - Agency Files (Automated) _33_ Number of States
   - (Manual) ______ Number of States
   - QC Investigation File ______ Yes or NO

   **Response Source:**
   - ___Claimant
   - ___Employer
   - ___Work Search Employer
   - ___Agency
   - ___Other

   **Usage:**
   - ___Control Item
   - ___Payment Error Rate Determination
   - Problem Area Analysis
   - ___Monetary Determination
   - ___Separation Issue
   - X Active Work Search
   - X Other Eligibility
   - ___Payment Adjustment
   - X Error Prone Profile
   - X Research

**Description of Usage:**
1.(24) **Weeks of Overpayments Already Established Past 24 Months:**

Enter number of weeks of recoverable or nonrecoverable overpayments/voided offsets already established by agency in prior 24 months immediately preceding beginning date of key week.

Include UI, UCFE, and UCX programs.

Enter 8 if number of weeks is unknown.

Enter zero if there were no overpayments/voided offsets already established.

Field Size: ___3___ Digits

Source:
- Agency Files (Automated) ___47___ Number of States
  (Manual) _______ Number of States
- CC Investigation File ______ Yes or NO

Response Source:
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

Usage:
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

Description of Usage:
*** PART X -- OVERPAYMENT/UNDERPAYMENT HISTORY ***

2. (25) **Amount_of_Prior_Overpayments (OP) in Past 24 Months:**

Enter total dollar amount for established weeks (overpayment/voided offsets) in item 1.

Express in whole dollars.

Leave blank if item 1 is blank.

Enter zero if item 1 is zero.

**Field Size:** ___6___ Digits

**Source:**
- Agency Files (Automated) ___42___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- X_Error Profile
- ___Research

**Description of Usage:**
3. **Weeks_of_Prior_Fraud:**

Enter number of weeks of fraud overpayments/voided offsets *already established by the agency* in the prior 24 months immediately preceding the beginning date of the Key Week.

Include UI, UCFE, and UCX programs.

Enter 8 if number of weeks is unknown.

Enter zero if there were no fraud overpayments/voided offsets already established.

**Field Size:** ___3___ Digits

**Source:**

- Agency Files (Automated) ___47___ Number of States
- (Manual) ----- Number of States
- CC Investigation File ----- Yes or NC

**Response Source:**

- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**

- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- X_Error Prone Profile
- ___Research

**Description of Usage:**
4. Prior_Fraud_Dollar.OP:

Enter total dollar amount for established fraud weeks (overpayment/voided offsets) in above item 3.

Express in whole dollars.

Exclude any amount due to application of interest or penalty.

Enter 8 if item 3 is 8.
Enter zero if item 3 is zero.

Field_Size: ___6___ Digits

Source:
Agency Files (Automated) ___4___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response_Source:
___Claimant
___Employer
___Work Search Employer
X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
X_Error Prone Profile
X_Research

Description_of_Use:
5. (84) **Total_Week's_Amount_of_Overpayments (include_KW):**

Enter whole dollar amount of all overpayments, voided offsets, or adjustments (to either the WBA or MBA), including key week, *officially_established_as_a_result_of_QC_investigation*.

Include in this figure only overpayments, etc., *officially_established_for_weeks_actually_claimed*.

Exclude any prospective savings relating to weeks not claimed and any penalty or interest amount.

Appeal reversals issued after the end of the report period in which the issue arose do not affect this figure.

Express in whole dollars.

Note: This item applies only to claimant selected by QC.

**Field_Size:** ___6___Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or NC

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Yes_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description_of_Usage:**

X-5

(DRAFT) - VERSION III - (3/27/84)
6.(85) **Total whole $ Amount of UBs (include Kw):**

Enter whole dollar amount of all underpayments, offsets applied, or adjustment (to either WBA or MBA), including key week, established as a result of QC investigation.

Include in this figure only underpayments, etc., established for weeks actually claimed.

Exclude any prospective errors relating to weeks not claimed.

Appeal reversals after the end of the report period in which the issue arose do not affect this figure.

Express in whole dollars.

Note: This item applies only to claimant selected by QC.

**Field Size:** ___6___ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___X Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___X Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___X Error Prone Profile
- ___ Research

**Description of Usage:**

X-6

(DRAFT) - VERSION III - (9/27/84)
ISSUE NUMBER 1:

1. Key Week Action:

Enter appropriate code. If correct payment (01), all following items will automatically be zero filled.

01 Correct Payment/Offset
10 Fraud Overpayment/Voided Offset
11 Nonfraud Recoverable Overpayment/Voided Offset
12 Nonfraud Nonrecoverable Overpayment or Decrease in WBA, KWDA Entitlement, MBA, or RE

13 Payment "technically" proper due to finality rules: QC determines payment would be to large in absence of finality rules

14 Payment "technically" proper due to law/rules requiring formal warnings concerning unacceptable work search efforts: QC determines that payment would MGT BE CORRECT in the absence of the formal warning rule that prohibits/prevents official action

15 Payment "technically" proper due to rules other than finality: QC determines payment would be to large in absence of these rules other than finality

16 Overpayment established or WBA, KWDA entitlement, MBA, or RE decreased but "officially" reversed, revised, adjusted or modified: QC disagrees with "official" action

20 Supplemental Check Issued/Offset Applied or Increase in WBA, KWDA entitlement, MBA, or RE

21 Payment "technically" proper due to finality rules: QC determines payment would be to small in absence of finality rules

22 Payment "technically" proper due to rules other than finality: QC determines payment would be to small in absence of these rules other than finality

23 Supplemental check issued/offset applied: Original payment correct according to QC but "officially" reversed, revised, adjusted, or modified: QC disagrees with "official" action
*** PART XI_ERROR CLASSIFICATION ***

Field Size: ___2__ Digits

Source:
- Agency Files (Automated) ___ Number of States
- (Manual) ______ Number of States
- QC Investigation File __Y__ Yes or NO

Response Source:
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- X__ Agency
- ___ Other

Usage:
- ___ Control Item
- X__ Payment Error Rate Determination
- Problem Area Analysis
- X__ Monetary Determination
- X__ Separation Issue
- X__ Active Work Search
- X__ Other Eligibility
- X__ Payment Adjustment
- X__ Error Prone Profile
- X__ Research

Description of Usage:

XI-2

(CRAFT) - VERSION III - (3/27/84)
2. Error Responsibility:

Enter appropriate code from below:
01 Claimant
02 Employer
03 Agency
04 Other SESA
05 Claimant and Employer
06 Claimant, Employer and Other SESA
07 Claimant and Agency
08 Claimant, Agency and Other SESA
09 Employer and Agency
10 Claimant, Employer, and Agency
11 Claimant, Employer, Other SESA and Agency

Field Size: ___2___ Digits

Source:
Agency Files (Automated) ___ Number of States
(Manual) ___ Number of States
QC Investigation File _Y_ Yes or NC

Response Source:
___ Claimant
___ Employer
___ Work Search Employer
__X Agency
___ Other

Usage:
___ Control Item
__X Payment Error Rate Determination
Problem Area Analysis
__X Monetary Determination
__X Separation Issue
__X Active Work Search
__X Other Eligibility
__X Payment Adjustment
__X Error Prone Profile
__X Research

Description of Usage:

XI-3

(DRAFT) - VERSION III - (8/27/84)
3 Error Cause:

Enter appropriate code from below. The last digit of this code is reserved for State use to provide greater detail as to cause of error.

UNREPORTED OR ERRORS IN REPORTING/RECORDING EARNINGS OR DAYS/HOURS OF WORK FOR THE KEY WEEK DUE TO:

100 Unreported earnings or days/hours of work
110 Earnings or days/hours of work incorrectly estimated/reported/recorded or deducted
120 Errors in reporting or unreported Severence Pay
130 Errors in reporting or unreported Vacation Pay
140 Errors in reporting or unreported Social Security or Pension Benefits
150 Other causes related to reporting or recording of earnings or days/hours of work for key week

ERRORS IN REPORTING/RECORDING EARNINGS OR WEEKS/DAYS/HOURS OF WORK FOR THE BASE PERIOD DUE TO:

200 Earnings or weeks/days/hours of work incorrectly estimated/reported/recorded
210 One or more base period employers not reported by claimant
220 Other causes related to errors in reporting or recording earnings or weeks/days/hours of work for base period

SEPARATION ISSUES DUE TO:

300 Voluntary Quits
310 Discharges
320 Other causes related to separation issues

ELIGIBILITY ISSUES DUE TO:

400 Ability to work
410 Availability for work
420 Active work search
430 Refusal of suitable work
440 Self-employment
450 Illegal Alien Status
460 Other causes related to eligibility issues

DEPENDENTS ALLOWANCE INCORRECT DUE TO:

500 Dependents information incorrectly reported/recorded or allowance incorrectly calculated
510 Other causes related to dependents allowances
*** PART XI ERROR CLASSIFICATION ***

OTHER CAUSES DUE TO:

600 Benefits paid during a period of disqualification, even though a stop-pay order was in effect
610 Redetermination (at deputy level) or Reversal (appeal or higher authority)
620 Back Pay Award
630 All other causes

Field Size: ___3__ Digits

Source:
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

Response Source:
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- X ___ Agency
- ___ Other

Usage:
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- X ___ Monetary Determination
- X ___ Separation Issue
- X ___ Active Work Search
- X ___ Other Eligibility
- X ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

Description of Usage:

XI-5

(DRAFT) - VERSION III - (8/27/84)
4. Detection Point:

Enter appropriate code from below. The last digit of this code is reserved for state use in providing greater detail as to point where error was detected.

10 Employer verification of work search contact
20 Employer verification of wages and/or separation
30 Claimant Interview
40 Verification of eligibility information with 3rd Parties
50 UI Records
60 Job Service Records
70 Union verification

Field Size: ___2___ Digits

Source:

Agency Files (Automated) ___ Number of States
                (Manual) ___ Number of States
QC Investigation File ___ Yes or No

Response Source:

___ Claimant
___ Employer
___ Work Search Employer
___ Agency
___ Other

Usage:

___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description of Usage:
5. Prior Agency Action:
Enter appropriate code from below. The last digit is reserved for State use to provide greater detail regarding prior action.

<table>
<thead>
<tr>
<th>Code</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>10</td>
<td>Agency initiated action on KW issue after KW was selected for QC examination</td>
</tr>
<tr>
<td>20</td>
<td>Agency was in the process of resolving KW issue when KW was selected for QC review</td>
</tr>
<tr>
<td>30</td>
<td>Agency identified KW issue prior to KW selection but took incorrect action</td>
</tr>
<tr>
<td>40</td>
<td>Agency had insufficient information to identify that there was a KW issue but did not take action to resolve</td>
</tr>
<tr>
<td>50</td>
<td>Official procedures had been followed and forms had been fully completed but KW issue was not detected by normal procedures</td>
</tr>
<tr>
<td>60</td>
<td>Official procedures had not been followed and/or forms had not been fully completed which if done correctly may have detected the existence of KW issue</td>
</tr>
</tbody>
</table>

Field Size: __2__ Digits

Source:
Agency Files (Automated) ______ Number of States
(Manual) ______ Number of States
QC Investigation File ___Yes or NC

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
__X_Payment Error Rate Determination
Problem Area Analysis
__X_Miscellaneous Determination
__X_Separation Issue
__X_Active Work Search
__X_Other Eligibility
__X_Payment Adjustment
__X_Error Prone Profile
___Research

Description of Usage:

XI-7

(DRAFT) - VERSION III - (3/27/84)
6. **Employer_Action:**

Enter appropriate code from below. The last digit is reserved for State use to provide greater detail regarding employer actions.

- 10 Employer provided adequate information to agency in a timely manner for determination
- 20 Employer provided adequate information after due date for determination
- 30 Employer provided inadequate information in a timely manner for determination
- 40 Employer provided inadequate information after due date for determination
- 50 Employer did not respond to request for information
- 60 Employer was not requested to provide information for determination

**Field_Size:** __2__ Digits

**Source:**
- Agency Files (Automated) ______ Number of States
- (Manual) ______ Number of States
- QC Investigation File ___Y___ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error PRone Profile
- ___Research

**Description_of_Usage:**
7. **CC_Amount_of_Error:**

Enter total amount of error as determined by CC investigation.

**Field_Size:** ___3__ Digits

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ______ Number of States
- CC Investigation File ___Y_ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description_of_Usage:**
*** PART XI_ERROR_CLASSIFICATION ***

8. QC_Action_Appealed:

Enter appropriate code from below:
1 Claimant appealed QC determination and employer was an interested party.
2 Claimant appealed QC determination and employer was not an interested party.
3 Employer appealed QC determination and claimant was an interested party.
4 Both claimant and employer appealed QC determination.
5 Agency appealed QC determination.
6 No appeal filled against payment error.
9 No payment error to appeal. (KW properly paid).

Field_Size: ___1___Digit

Source:
Agency Files (Automated) ______ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NC

Response_Source:
___Claimant
___Employer
___Work Search Employer
__X_Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
__X_ Research

Description_of_Usage:

XI-10

(DRAFT) - VERSION III - (8/27/84)
9. Adjusted_Amount_of_Error (Appeals):

Enter adjusted whole dollar amount of error if an appeal changed QC amount.

Enter zero if no change was made as a result of appeal or there was no appeal.

Field_Size: ___3___ Digits

Source:
Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File ___Y___ Yes or No

Response_Source:
___Claimant
___Employer
___Work Search Employer
__X_Agency
___Other

Usage:
___Control Item
__X_Payment Error Rate Determination
Problem Area Analysis
__X_Monetary Determination
__X_Separation Issue
__X_Active Work Search
__X_Other Eligibility
__X_Payment Adjustment
__X_Error Prone Profile
__X_Research

Description_of_Usage:

XI-11

(CRAFT) - VERSION III - (8/27/94)
ISSUE_NUMBER_2
1. Key_Week_Action: Same as Issue 1 - Item 1.
2. Error_Responsibility: Same as Issue 1 - Item 2.
3. Error_Cause: Same as Issue 1 - Item 3.
4. Detection_Point: Same as Issue 1 - Item 4.
5. Prior_Agency_Action: Same as Issue 1 - Item 5.
7. GC_Amount_of_Error: Same as Issue 1 - Item 7.
8. GC_Action_Appealed: Same as Issue 1 - Item 8.

ISSUE_NUMBER_3
1. Key_Week_Action: Same as Issue 1 - Item 1.
2. Error_Responsibility: Same as Issue 1 - Item 2.
3. Error_Cause: Same as Issue 1 - Item 3.
4. Detection_Point: Same as Issue 1 - Item 4.
5. Prior_Agency_Action: Same as Issue 1 - Item 5.
7. GC_Amount_of_Error: Same as Issue 1 - Item 7.
8. GC_Action_Appealed: Same as Issue 1 - Item 8.
*** Part XII --- STATE OPTION INFORMATION ***

Items 1-4 below are to be utilized by all States that have laws which provide for dependents' allowances.

1. **Number of Dependents Claimed Before Investigation:**

   Enter the number of dependents claimed.

   **Field Size:** ___3___ Digits

   **Source:**
   - Agency Files (Automated) ___42___ Number of States
   - (Manual) ___42___ Number of States
   - QC Investigation File ___42___ Yes or No

   **Response Source:**
   - ___Claimant
   - ___Employer
   - ___Work Search Employer
   - ___Agency
   - ___Other

   **Usage:**
   - ___Control Item
   - ___Rate Calculation
   - Problem Area Analysis
     - ___Monetary Determination
     - ___Separation Issue
     - ___Active Work Search
     - ___Other Eligibility
     - ___Payment Adjustment
   - ___Error Prone Profile
   - ___Research

**Description of Usage:**
2. (13) **Dependents' Allowance Before Investigation:**

Enter whole dollar amount of dependents' allowance, before investigation, if any, that was paid to claimant for key week.

Enter zero if the allowance is not applicable for this claimant.

**Field Size:** __3__ Digits

**Source:**
- Agency Files (Automated) __52__ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- Claimant
- Employer
- Work Search Employer __X__ Agency
- Other

**Usage:**
- __X__ Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- __X__ Monetary Determination
- __X__ Separation Issue
- __X__ Active Work Search
- __X__ Other Eligibility
- __X__ Payment Adjustment
- __X__ Error Prone Profile
- __X__ Research

**Description of Usage:**
3. Number of Dependents Claimed After Investigation:
Enter number of dependents that should be claimed.

Field Size: ___2___ Digits

Source:

- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___Y___ Yes or NO

Response Source:

- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___X Agency
- ___ Other

Usage:

- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___X Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___X Error Prone Profile
- ___X Research

Description of Usage:
4. (53) **Dependent's Allowance After Investigation:**

Enter correct amount in whole dollars of dependent's allowance that should have been paid to claimant during key week.

Enter zero if the allowance is not applicable for this claimant.

**Field Size:** ___2___ Digits

**Source:**
- Agency Files (Automated)  ___ Number of States
- (Manual)  ___ Number of States
- QC Investigation File  ___ Yes or No.

**Response Source:**  ___ Claimant
- Employer
- Work Search Employer
- X Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- Problem Area Analysis
- X Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- X Error Prone Profile
- X Research

**Description of Usage:**
Items 5-9 contain some items that the States may wish to use for their own internal management purposes. They provide information that States have requested from Random Audit. Data from these items will not be included in the nationwide QC database. States may delete, modify, or add other items as they see fit.

5. (36) Received_UI_Info: Yes or No
6. (37) Problem_with_UI_Claim: Yes or No
7. (38) Policy_treatment: Yes or No
8. (39) Monetary_determination_correct: Yes or No
9. (64) Local_Office_(LO)_Manager_Agrees_with_Disposition_of_Case:

Enter appropriate code:
1 = YES If local office manager reviewed case and agreed with QC disposition of case.
2 = NO If local office manager reviewed case and disagreed with QC disposition of case.
6 = INA If local office manager asked to review case but did not or has not responded.
9 = NA If local office manager not asked to review case.
RECORD TWO

LONGITUDINAL WAGE DATA
*** RECORD_TYPE_2 --- WAGE_INFORMATION ***

(LONGITUDINAL_DATA)

1. Social_Security_Number:

   **Field_Size:** ___3___ Digits

   **Source:**
   - Agency Files (Automated) ___52___ Number of States
   - (Manual) _______ Number of States
   - QC Investigation File ______ Yes or NO

   **Response_Source:**
   - _X_Claimant
   - ___Employer
   - ___Work Search Employer
   - ___Agency
   - ___Other

   **Usage:**
   - _X_Control_Item
   - ___Payment Error Rate Determination
   - ___Problem Area Analysis
   - ___Monetary Determination
   - ___Separation Issue
   - ___Active Work Search
   - ___Other Eligibility
   - ___Payment Adjustment
   - ___Error Prone Profile
   - ___Research

   **Description_of_Usage:**

---
2. Year/Quarter of Wages:

Enter number for calendar year and quarter in which wages were reported, (i.e., calendar year 1984 - 1st Quarter = 841).

Field Size: ___3___ Digits

Source:
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or NO

Response Source:
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

Usage:
- ___ Control Item
- ___ Payment Error Rate Determination
- ___ Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active Work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error Prone Profile
- ___ Research

Description of Usage:
*** RECORD_TYPE_2 === WAGE_INFORMATION ***

(LONGITUDINAL_DATA)

3. Amount_of_wages_Reported_by_Employer:

Enter total whole dollar amount of wages reported by employer as paid/earned by individual for quarter.

Field_Size: ____5____ Digits

Source:
- Agency Files (Automated) ____46____ Number of States
- (Manual) ____7____ Number of States
- CC Investigation File ____ Yes or NO

Response_Source:
- ____Claimant
- ____Employer
- ____Work Search Employer
- ____Agency
- ____Other

Usage:
- ____Control Item
- ____Payment Error Rate Determination
- Problem Area Analysis
- ____Monetary Determination
- ____Separation Issue
- ____Active Work Search
- ____Other Eligibility
- ____Payment Adjustment
- ____Error Prone Profile
- ____Research

Description_of_Usage:
*** RECORD TYPE 2-4 ** Wage Information ***

(Longitudinal Data)

4. Number_of_Weeks_Worked_Reported_by_Employer:

Enter number of weeks claimant worked in quarter.

Complete this item if readily available in state file (i.e. required for monetary).

Enter 9 if weeks of work are not recorded

Field Size: ___2___ Digits

Source:

Agency Files (Automated) ___12___ Number of States
(Manual) ___ Number of States
QC Investigation File ___ Yes or NO

Response Source:

___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:

___Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:
5. **Standard_Industrial_Classification_Code:**

Enter four digit industry code (SIC) for employer.

Enter 8, if INA.

**Field Size:** ___4___ Digits

**Source:**
- Agency Files (Automated) ___44___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- X_ Error Prone Profile
- X_ Research

**Description of Usage:**
*** RECORD_TYPE_2 --- WAGE_INFORMATION ***

(LONGITUDINAL_DATA)

6. Ownership Code:

Enter one of the following codes:
1 = Federal Government
2 = State Government
3 = Local Government
4 = International, Foreign Government
5 = Private Sector (required if 6 or 7 are INA)
6 = Private Sector, Corporation (optional)
7 = Private Sector, Non-Corporation (optional)
8 = INA

Field Size: ___1___ Digit

Source:

Agency Files (Automated) ___ Number of States
    (Manual) ______ Number of States
    GC Investigation File ___ Yes or No

Response Source:

___Claimant
___Employer
___Work Search Employer
X Agency
___Other

Usage:

___Control Item
___Payment Error Rate Determination
Problem Area Analysis
    ___Monetary Determination
    ___Separation Issue
    ___Active Work Search
    ___Other Eligibility
    ___Payment Adjustment
X Error Prone Profile
X Research

Description of Usage:
7. **Federal_Employer_Identification_Number:**

Enter six digit Federal Employer Identification Number (FEIN) for employer.

**Field Size:** ___6___ Digits

**Source:**
- Agency Files (Automated) ____ Number of States
- (Manual) ____ Number of States
- QC Investigation File ____ Yes or NO

**Response Source:**
- ___ Claimant
- ___ Employer
- ___ Work Search Employer
- ___ Agency
- ___ Other

**Usage:**
- ___ Control Item
- ___ Payment Error Rate Determination
- Problem Area Analysis
- ___ Monetary Determination
- ___ Separation Issue
- ___ Active work Search
- ___ Other Eligibility
- ___ Payment Adjustment
- ___ Error prone Profile
- ___ Research

**Description of Usage:**
*** RECORD_TYPE_2---WAGE_INFORMATION ***

LONITUDINAL_DATA

8. State_Employer_Account_Number:
Enter State Employer Account Number for employer.

Field_Size: _2222._Digits

Source:
   Agency Files (Automated) ______ Number of States
   (Manual) ______ Number of States
   QC Investigation File ______ Yes or NO

Response_Source:
   ___Claimant
   ___Employer
   ___Work Search Employer
   ___Agency
   ___Other

Usage:
   ___Control Item
   ___Payment Error Rate Determination
   ___Problem Area Analysis
   ___Monetary Determination
   ___Separation Issue
   ___Active work Search
   ___Other Eligibility
   ___Payment Adjustment
   ___Error Prone Profile
   ___Research

Description_of_Usage:
*** RECORD_TYPE_2—WAGE_INFORMATION ***

(LONGITUDINAL_DATA)

9. Quarterly_Iax_Rate:

Enter quarterly UI tax rate in effect for this quarter.

Field_Size: _2__ Digits

Source:
Agency Files (Automated) ______ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NC

Response_Source:
___ Claimant
___ Employer
___ Work Search Employer
___ Agency
___ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
___ Error Prone Profile
___ Research

Description_of_Usage:
RECORD THREE
LONGITUDINAL UI PAYMENT HISTORIES
*** RECORD_TYPE_3---PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

1. Social_Security_Number:

Field_Size: ___9___ Digits

Source:
- Agency Files (Automated) ___52___ Number of States
- (Manual) _______ Number of States
- QC Investigation File ______ Yes or NO

Response_Source:
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

Usage:
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

Description_of_Usage:
*** RECORD_TYPE_3___PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

2. Week_Ending_Date_for_Week_Claimed:

Enter week ending date, (i.e. September 29, 1984 would be entered as 840929).

Field_Size: ____6____ Digits

Source:

Agency Files (Automated)  ____EL____ Number of States
(Manual)  ________ Number of States
QC Investigation File  ________ Yes or NO

Response_Source:

____Claimant
____Employer
____Work Search Employer
_X_Agency
____Other

Usage:

_X_Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
_X_ Research

Description_of_Use:

RECORD_TYPE_3-2

(DRAFT) - VERSION III - (8/27/84)
*** RECORD_TYPE_3---PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

3. Type_of_Week_Claimed:

Enter one of the following codes:

Select proper code from appropriate column depending on whether claim is paid or pended

<table>
<thead>
<tr>
<th>Waiting week</th>
<th>Paid</th>
<th>Pended</th>
</tr>
</thead>
<tbody>
<tr>
<td>11</td>
<td></td>
<td></td>
</tr>
<tr>
<td>First payment</td>
<td>12</td>
<td>21</td>
</tr>
<tr>
<td>Regular week</td>
<td>13</td>
<td>22</td>
</tr>
<tr>
<td>Partial week (earnings)</td>
<td>14</td>
<td>23</td>
</tr>
<tr>
<td>Part total</td>
<td>15</td>
<td>24</td>
</tr>
<tr>
<td>Final payment</td>
<td>16</td>
<td>25</td>
</tr>
<tr>
<td>Offset (for overpayment)</td>
<td>17</td>
<td>26</td>
</tr>
<tr>
<td>Offset (other, i.e. support)</td>
<td>18</td>
<td></td>
</tr>
</tbody>
</table>

Field_Size: ___2___ Digits

Source:
Agency Files (Automated) ______ Number of States
(Manual) ______ Number of States
2C Investigation File ______ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
---Problem Area Analysis
---Monetary Determination
---Separation Issue
---Active Work Search
---Other Eligibility
---Payment Adjustment
___Error Prone Profile
___Research

Description_of_Usage:
*** RECORD_TYPE_3---PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

4. Date_Paid:

Enter Date Paid i.e. 941005 for October 5, 1984.
Enter zero if week is pended, not paid.

Field_Size: ___6___ Digits

Source:
Agency Files (Automated) ___51___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
_X_Agency
___Other

Usage:
___X_Control Item
___Payment Error Rate Determination
Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
_X_ Research

Description_of_Usage:
5. **Amount_Paid_and/or_Offset**:

Enter original amount paid and/or offset.

Express in whole dollars (e.g., $98.00 coded as 098).

Enter zero if week is pended, not paid.

**Field_Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___2___ Number of States
  - (Manual) ______ Number of States
  - GC Investigation File ______ Yes or NO

**Response_Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- X_Agency
- ___Other

**Usage:**
- X_Control Item
- Payment Error Rate Determination
  - Problem Area Analysis
  - Monetary Determination
  - Separation Issue
  - Active Work Search
  - Other Eligibility
  - Payment Adjustment
  - Error Prone Profile
- X_Research

**Description_of_Usage:**

**RECORD_TYPE 3-5**

(DRAFT) - VERSION III - (8/27/84)
*** RECORD_TYPE_3---PAYMENT_INFORMATION ***

{LONGITUDINAL_DATA}

6. Program_Code_in_Effect_at_Time_Week_was_Claimed:

Enter one of following program codes:
1 = UI
2 = UI-UCFE
3 = UI-UCX
4 = UI-UCFE-UCX
5 = UCFE
6 = UCFE-UCX
7 = UCX
8 = Other

Field_Size: ___1__Digit

Source:
Agency Files (Automated)  ___2__ Number of States
___4__ Number of States
QC Investigation File  ___4__ Yes or NO

Response_Source:
___Claimant
___Employer
___Work Search Employer
X_Agency
___Other

Usage:
X_Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
X_Error Prone Profile
X_Research

Description_of_Usage:

RECORD_TYPE_3-6

(DRAFT) - VERSION III - (8/27/84)
7. **Duration Code:**

Enter one of the following duration codes:
1 = Regular duration
2 = Extended Benefits
3 = Other Federal Extended Programs

**Field Size:** 1 Digit

**Source:**
- Agency Files (Automated) 21 Number of States
- Manual 1 Number of States
- QC Investigation File 2 Yes or NO

**Response Source:**
- Claimant
- Employer
- Work Search Employer
- Agency
- Other

**Usage:**
- Control Item
- Payment Error Rate Determination
- Problem Area Analysis
- Monetary Determination
- Separation Issue
- Active Work Search
- Other Eligibility
- Payment Adjustment
- Error Prone Profile
- Research

**Description of Usage:**
record_type_3---payment_information

(longitudinal_data)

8. Filing Status:
   Enter one of the following codes:
   1 = Intrastate
   2 = Interstate

   Field Size: ___1__ Digit

   Source:
   Agency Files (Automated) ___21__ Number of States
   (Manual) ___21__ Number of States
   QC Investigation File ___2__ Yes or No

   Response Source:
   ___Claimant
   ___Employer
   ___Work Search Employer
   ___Agency
   ___Other

   Usage:
   ___X_Control Item
   ___Payment Error Rate Determination
   ___Problem Area Analysis
   ___Monetary Determination
   ___Separation Issue
   ___Active Work Search
   ___Other Eligibility
   ___Payment Adjustment
   ___X_Error Prone Profile
   ___X_Research

   Description of Usage:
*** RECORD_TYPE 3-9 PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

9. Combined Wage Claim:

Enter if claim for week is a combined wage claim:
1 = Yes
2 = No

Field Size: ___1___ Digit

Source:
Agency Files (Automated) ___36___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or No

Response Source:
___Claimant
___Employer
___Work Search Employer
___Agency
___Other

Usage:
___Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___Research

Description of Usage:

RECORD TYPE 3-9

(DRAFT) - VERSION III - (8/27/84)
10. Earnings_for_Week:

Enter total whole dollar amount of earnings for week.

Field_Size: ___4___ Digits

Source:
Agency Files (Automated) ___44___ Number of States
(Manual) ______ Number of States
QC Investigation File ______ Yes or NO

Response_Source:
_X_ Claimant
__ Employer
__ Work Search Employer
__ Agency
__ Other

Usage:
___ Control Item
___ Payment Error Rate Determination
___ Problem Area Analysis
___ Monetary Determination
___ Separation Issue
___ Active Work Search
___ Other Eligibility
___ Payment Adjustment
__ Error Prone Profile
__X_ Research

Description_of_Usage:
11. **Pension for Week:**

Enter amount of pension deducted for Week in whole dollars.

**Field Size:** ___3___ Digits

**Source:**
- Agency Files (Automated) ___48___ Number of States
- (Manual) ______ Number of States
- QC Investigation File ______ Yes or NO

**Response Source:**
- ___X___ Claimant
- ___Employer
- ___Work Search Employer
- ___X___ Agency
- ___X___ Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active Work Search
- ___X___ Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___X___ Research

**Description of Usage:**

MAY CHANGE THIS ITEM TO TOTAL PENSION RECEIVED
DEPENDING ON WHICH IS EASIER TO OBTAIN.
12. **Offset Amount:**

   Enter amount of any offset taken for week in whole dollars.

   **Field Size:** ___3___ Digits

   **Source:**
   - Agency Files (Automated) ___ Number of States
   - (Manual) ___ Number of States
   - QC Investigation File ___ Yes or NO

   **Response Source:**
   - ___ Claimant
   - ___ Employer
   - ___ Work Search Employer
   - ___ Agency
   - ___ Other

   **Usage:**
   - ___ Control Item
   - ___ Payment Error Rate Determination
   - ___ Problem Area Analysis
     - ___ Monetary Determination
     - ___ Separation Issue
     - ___ Active Work Search
     - ___ Other Eligibility
     - ___ Payment Adjustment
     - ___ Error Prone Profile
   - ___ Research

   **Description of Usage:**
13. **Adjustment Indicator:**

Enter whether or not payment for week has been adjusted.
1 = Payment adjusted
2 = Payment not adjusted

**Field Size:** ___1___ Digit

**Source:**
- Agency Files (Automated) ___ Number of States
- (Manual) ___ Number of States
- QC Investigation File ___ Yes or No

**Response Source:**
- ___Claimant
- ___Employer
- ___Work Search Employer
- ___Agency
- ___Other

**Usage:**
- ___Control Item
- ___Payment Error Rate Determination
- ___Problem Area Analysis
- ___Monetary Determination
- ___Separation Issue
- ___Active work Search
- ___Other Eligibility
- ___Payment Adjustment
- ___Error Prone Profile
- ___Research

**Description of Usage:**

USE OF THIS ITEM DEPENDS ON FINAL SYSTEM DESIGN.
*** RECORD_TYPE_3---PAYMENT_INFORMATION ***

(LONGITUDINAL_DATA)

14. **Key_Week_Indicator:**

Enter 1 if this payment is the one selected as Key Week.
Enter 0 if not Key Week payment.

**Field_Size:** ___1___ Digit

**Source:**
Agency Files (Automated) _____ Number of States
(Manual) _____ Number of States
QC Investigation File _____ Yes or No

**Response_Source:**
___Claimant
___Employer
___Work Search Employer
___X_Agency
___Other

**Usage:**
___X_Control Item
___Payment Error Rate Determination
___Problem Area Analysis
___Monetary Determination
___Separation Issue
___Active Work Search
___Other Eligibility
___Payment Adjustment
___Error Prone Profile
___X_ Research

**Description_of_Usage:**

USE OF THIS ITEM DEPENDS ON FINAL SYSTEM DESIGN.