

EMPLOYMENT AND TRAINING ADMINISTRATION ADVISORY SYSTEM U.S. DEPARTMENT OF LABOR Washington, D. C. 20210	CLASSIFICATION
	OWS/UI
	CORRESPONDENCE SYMBOL
	DUIO
RESCISSIONS	ISSUE DATE
	August 16, 2004
None	EXPIRATION DATE
	August 31, 2005

ADVISORY : UNEMPLOYMENT INSURANCE PROGRAM LETTER NO. 31-04

TO : STATE WORKFORCE AGENCIES

**FROM : CHERYL ATKINSON s/s
 Administrator
 Office of Workforce Security**

SUBJECT : Handbook for Interstate Overpayment Recovery

- Purpose.** To advise state workforce agencies (SWAs) of a new format for the Handbook for Interstate Overpayment Recovery and request submission of the states' updated sections concerning their overpayment recovery procedures and contact information.
- Reference.** Interstate Benefit Payment Plan; Interstate Reciprocal Overpayment Recovery Arrangement; [ET Handbook No. 392.](#)
- Background.** The Handbook for Interstate Overpayment Recovery is a compilation of procedural instructions and contact information that each state wishes other states to follow to obtain assistance with overpayment recoupment, civil actions, and/or prosecutions. In preparation for automation of the handbook in Fiscal Year 2005, the National Association of State Workforce Agencies' (NASWA) Interstate Benefits (IB) Committee recently finalized the new format after consideration of all recommendations made by the states concerning the handbook and its format.

In preparation for making the handbook available electronically, updated information in the new format is needed to populate the database for the initial automated handbook and for issuance prior to automation. Attached are new instructions for completing each handbook section, including examples and a blank outline of the pages, to assist states in providing updated information.

When the handbook is compiled, states will be able to access it electronically on the NASWA Workforce ATM website www.naswa.com listed under "Interstate Committee."

4. **Action Required.** State agencies are requested to review the attached information, prepare the state's handbook section in a Word document following the provided format, and transmit it as an email attachment to Connie.Oneal@state.tn.us by August 27, 2004.

5. **Attachments.** [Attachment A. Completion Instructions for Handbook for Interstate Overpayment Recovery;](#)
[and,](#)
[Attachment B. Blank outline of the handbook sections.](#)

COMPLETION INSTRUCTIONS FOR THE HANDBOOK FOR INTERSTATE
OVERPAYMENT RECOVERY

1. Introduction. This handbook is a compilation of state information prepared in a uniform format and contained in separate sections to inform all states of the procedural instructions for overpayment recovery. It provides references for states to use to request cross-matching of records, assistance with overpayment recovery, civil actions, and/or prosecutions. Each state is responsible to keep current information in the handbook and update the information when state laws, policies, or procedures change. When information is revised, states will place an asterisk (*) next to the last revised material and remove the asterisk(s) identifying earlier revision(s).

2. Format. Each state's section of the handbook will be organized under the state's postal abbreviation in the format provided in Attachment B. Below are instructions for completing each page/item followed by an example of a completed page or item:

a. Page A - Address/Telephone Numbers. For collection activities, the state will provide identification of: 1) the office and address where requests, restitution transmittals, and related correspondence are to be sent, and 2) the name, telephone number, FAX number and e-mail address of the person that other states are to contact for information, when necessary, and as appropriate.

For prosecution activities, the state will also provide: 1) the name and address where requests for prosecution and related correspondence are to be sent, and 2) the name, telephone number, FAX number and e-mail address of the person that other states are to contact for information, when necessary, and as appropriate.

Example:

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY
ADDRESS AND TELEPHONE NUMBERS

TN - A

DATE: Mo/Day/Yr

Collection Activities: Mail request, inquiries, and/or restitution transmittals for benefit overpayment collections to:

Benefit Payment Control
500 James Robertson Pkwy, 10th Fl
Nashville, TN 37245
Contact Person: John Doe
Telephone No: 615-444-4444
Fax Number: 615-555-5555

Prosecution Activities: Mail requests for prosecutions and related material to:

Benefit Payment Control
500 James Robertson Pkwy, 10th Fl
Nashville, TN 37245
Contact Person: Susie Doe
Telephone No: 615-333-3333
Fax Number: 615-666-6666

b. Page B - Summary Page. This page contains a summary of detailed information about the state's procedures for

overpayment recovery. States should complete the information by entering "yes" or "no" to indicate their participation in each of the recovery activities listed. For example, for information related to the quarterly Interstate Crossmatch and Claimant Locator activity, each state will enter "yes" or "no" in the spaces provided to indicate the files against which the crossmatch records and locator records are matched.

Example:

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY
SUMMARY PAGE

TN - B

DATE: Mo/Day/Yr

INFORMATION AT A GLANCE

- | | | | |
|---|------------|--------------------------------------|------------|
| 1. Interstate Crossmatch: | | 2. Interstate Claimant Locator: | |
| A. Match with Wage Files | <u>YES</u> | A. Match with Wage Files | <u>YES</u> |
| B. Match with Benefit Files | <u>YES</u> | B. Match with Benefit Files | <u>YES</u> |
| 3. Overpayment Recovery: | Assistance | Offset | |
| A. Active Claims | <u>YES</u> | <u>YES</u> | |
| B. Inactive Claims/No Claim | <u>NO</u> | <u>NO</u> | |
| C. OP Due to CWC Withdrawal | <u>YES</u> | <u>YES</u> | |
| D. OP in Transferring State | <u>YES</u> | <u>YES</u> | |
| 4. Civil Action for other states: | <u>NO</u> | 5. Prosecution for other states: | <u>YES</u> |
| 6. IRORA Participant: | <u>YES</u> | 7. Cross-Program Offset Participant: | <u>YES</u> |
| 8. Bulletin Board: (This is an area that allows the state to provide additional narrative information.) | | | |

c. Regular Pages. The "regular pages" display information pertaining to the assistance offered by the state, and provide procedural instructions for states requesting assistance. Each page should have a header that includes the name of the handbook, state postal code and the date the page was prepared as indicated below:

Example:

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY

TN

DATE: Mo/Day/Yr

Information concerning the following topics, numbered 1-8, is needed from each state.

(1) Crossmatch of Wage and Benefit Files.

(A) Wage Files. Indicate if the state maintains a wage file and whether the state participates in the quarterly interstate crossmatch/claimant locator. Also, indicate if the state matches both, crossmatch and locator requests against the wage file.

(B) Benefit Files. Indicate if the state matches both, crossmatch and locator, requests against benefit files. Also indicate whether the state matches locator requests against current benefit years only - or current and prior years.

Example:

1. CROSSMATCH OF WAGE AND BENEFIT FILES

A. WAGE FILES

Match both crossmatch and locator requests against wage file to obtain employer(s) name(s) and address(es) for any claimant claiming weeks of unemployment in the match quarter whenever requests are received from another state.

Requesting state should follow Interstate Crossmatch/Locator procedures to request crossmatching.

B. BENEFIT FILES

Match both crossmatch and locator requests against Benefit file to obtain employer(s) name(s) and address(es) for any claimant claiming weeks of unemployment in the match quarter whenever requests are received from another state.

Requesting state should follow Interstate Crossmatch/Locator procedures to request crossmatching.

(2) Crossmatch of Other Files. Describe other record sources that the state agency uses to crossmatch the interstate locator (Type 3) requests in an effort to locate the individuals (i.e., motor vehicle registration records, etc.).

Example:

2. CROSSMATCH OF OTHER FILES

State does not match crossmatch or locator records against files other than wage and benefit files.

(3) Overpayment Recovery - Active Claims (Not Combined-Wage-Claims). Indicate the type of assistance the agency will provide to recover the overpayment. Specify the documentation needed to initiate the action.

Example:

3. OVERPAYMENT RECOVERY – ACTIVE CLAIMS (NOT CWC)

When a state requests assistance, the overpaid amount is offset against benefits due for weeks claimed. When the full amount of the OP has been recovered or when the claimant stops filing, the collected amount is forwarded to the state.

To request assistance, send a Form IB 8606, a copy of the overpayment decision, information regarding the weeks overpaid, and the amount of the overpayment balance.

(4) Overpayment Recovery Inactive Claim/No Claim on File. Indicate the type(s) of assistance the agency will provide when the claimant is not in active claim status or has no claim on file, but is a resident of the state and wages are being reported. Specify documentation needed to initiate the action, procedures that should be followed, and to whom assistance requests are to be sent.

Example:

4. OVERPAYMENT RECOVERY INACTIVE CLAIM/NO CLAIM ON FILE

No action will be taken if claim is inactive or there is no claim on file.

(5) Overpayment Recovery - Combined Wage Claim. Requirements of Federal regulations 20 CFR 616 apply.

(A) Withdrawal of CWC After Benefits Have Been Paid. Indicate whether or not the agency, as a liable state accepting a substitute claim, will offset any overpayment created by the withdrawal of a combined claim. Indicate if the overpayment will be offset in total before any benefits are released to the claimant, or if only a percentage of the weekly benefit amount will be offset. Specify procedures to be followed and provide the name, address, telephone number, fax number and e-mail address of the contact person.

(B) Recovery of Outstanding Overpayment in Transferring State. Describe to what extent the agency recovers uncollected overpayments for transferring states (indicate if the total overpayment will be offset prior to the release of payment to the claimant; a percentage of the WBA will be offset each week; or, only the percentage of the WBA attributable to the transferred wages will be offset each week, etc.) Specify procedures to be followed and provide the name, address, telephone number, fax number and e-mail address of the contact person.

Example:

5. OVERPAYMENT RECOVERY – COMBINED WAGE CLAIMS

(A) WITHDRAWAL OF CWC AFTER BENEFITS HAVE BEEN PAID

When a state requests assistance, the overpaid amount is offset against benefits due for weeks claimed. When the full amount of the OP has been recovered or when the claimant stops filing, the collected amount is forwarded to the state.

To request assistance, send a Form IB 8606, a copy of the overpayment decision, a copy of the claimant's request to withdraw the claim, information regarding the weeks overpaid and the amount of the overpayment balance. Forward the request to the Combined Wage Unit at the address shown on address page. Contact person: Jane Doe 615-222-2222

(B) RECOVERY OF OUTSTANDING OVERPAYMENT IN TRANSFERRING STATE

When a state requests assistance, the overpaid amount is offset against benefits due for weeks claimed. When the full amount of the OP has been recovered or when the claimant stops filing, the collected amount is forwarded to the state.

To request assistance, send a Form IB 8606, a copy of the overpayment decision, a copy of the claimant's request to withdraw the claim, information regarding the weeks overpaid and the amount of the overpayment balance. Enter a notice in the comments section of the IB4 wage transfer to alert TN of the overpayment request being sent. Forward the request to the Combined Wage Unit at the address shown on address page. Contact person: Jane Doe 615-222-2222

(6) Civil Action. Describe under what circumstances the agency will pursue civil action to collect an overpayment for another state, including any timely referral requirements. Specify the documentation needed to initiate actions, procedures requesting state should follow, and provide the name, address and telephone number of the contact person.

Example:

6. CIVIL ACTION

No civil action will be taken on behalf of other states.

(7) Prosecutions.

(A) Minimum Criteria. Indicate the minimum amount of the overpayment and/or number of weeks overpaid needed to initiate action, and provide any timely referral requirements.

(B) Documentation Required. Describe the documentation required and indicate if the documents must be originals and certified or if photocopies and uncertified documents are acceptable. Specify procedures to be followed and provide the name, address and telephone number of the contact person.

Example:

7. PROSECUTIONS

(A) MINIMUM CRITERIA

Will assist other state with prosecution if offense occurred in TN, the amount overpaid is at least \$500 and the request for prosecution is received within 1 year of the date of the offense.

(B) DOCUMENTATION REQUIRED

Evidence of certifications, copies of cashed checks and copies of employer payroll records. Records must be certified by the custodian of records.

Send written request together with the above documentation to the address shown on Page A.

(8) Interstate Reciprocal Overpayment Recovery Arrangement (IRORA). Indicate if your state participates in the IRORA. Under what conditions, does the state collect overpayments for other states?

Example:

8. INTERSTATE RECIPROCAL OVERPAYMENT RECOVERY ARRANGEMENT (IRORA).

Will offset an overpayment for another state when the overpayment and the current claim are the same program (State or Federal). If the requesting state is a participant in the Cross-Program Offset Agreement, will offset cross-program.

To request assistance, send a Form IB 8606, a copy of the overpayment decision, information regarding the weeks overpaid, and the amount of the overpayment balance.

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY
ADDRESS AND TELEPHONE

(State Abbreviation) - A

DATE: Mo/Day/Yr

Collections Activity: Mail requests, inquiries, and/or restitution transmittals for benefit overpayment collection to:

- Agency Name:
- Address:
- Address:
- Contact Person:
- Telephone No:
- Fax Number:

Prosecution Activity: Mail request(s) for prosecution(s) and related material to:

- Agency Name:
- Address:
- Address:
- Contact Person:
- Telephone No:
- Fax Number:

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY
SUMMARY PAGE

(State Abbreviation) - B

DATE: Mo/Day/Yr

A. INFORMATION AT A GLANCE (Indicate Yes or No for the activity/participation)

- | | | | |
|---|------------|-------------------------------------|-----|
| 1. Interstate Crossmatch: | | 2. Interstate Claimant Locator: | |
| A. Match with Wage Files | ___ | A. Match with Wage Files | ___ |
| B. Match with Benefit Files | ___ | B. Match with Benefit Files | ___ |
| 3. Overpayment Recovery: | Assistance | Offset | |
| A. Active Claims | ___ | ___ | |
| B. Inactive Claims/No Claim | ___ | ___ | |
| C. Combined Wage Claim | ___ | ___ | |
| D. Transferring State | ___ | ___ | |
| 4. Civil Action for other states: | ___ | 5. Prosecution for other states: | ___ |
| 6. IRORA Participant | ___ | 7. Cross-Program Offset Participant | ___ |
| 8. Bulletin Board (Narrative information) | | | |

HANDBOOK FOR INTERSTATE OVERPAYMENT RECOVERY

State Abbreviation

DATE: Mo/Day/Yr

1. CROSSMATCH OF WAGE AND BENEFIT FILES

A. WAGE FILES

B. BENEFIT FILES

2. CROSSMATCH OF OTHER FILES.

3. OVERPAYMENT RECOVERY - ACTIVE CLAIMS (NOT CWC).

4. OVERPAYMENT RECOVERY INACTIVE CLAIM/NO CLAIM ON FILE.

5. OVERPAYMENT RECOVERY - COMBINED WAGE CLAIM.

A. WITHDRAWAL OF CWC AFTER BENEFITS HAVE BEEN PAID.

B. RECOVERY OF OUTSTANDING OVERPAYMENT IN TRANSFERRING STATE.

6. CIVIL ACTION.

7. PROSECUTIONS.

A. MINIMUM CRITERIA.

B. DOCUMENTATION REQUIRED.

8. INTERSTATE RECIPROCAL OVERPAYMENT RECOVERY ARRANGEMENT (IRORA).