

Claims Specialist Training

Detecting Issues

Part 1: At the Time of the Initial claim

Trainee Workbook
Created by UI OPS Technicians
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Issue Detection

A Claims Specialist's job involves recognizing issues. Issues are any circumstances which, if true, can jeopardize a claimant's past, present or future benefit rights. We call these "non-monetary" issues. Once an issue is identified, it must go through the adjudication process where an adjudicator will gather facts and, on the basis of those facts, make a decision to allow or deny/disqualify benefits.

A claimant may be eligible for benefits if s/he is out of work due to no fault of his/her own. This means the claimant was discharged but not for misconduct, voluntarily left work with good cause, is still working but less than 40 hours a week and is making less than his/her WBA, or is laid off due to lack of work.

Discharges, suspensions and voluntary leaving work are **separation** issues. We also investigate **non-separation** issues. These include able, available, actively seeking work, job refusals, failure to apply, deductible income, and reporting requirements. The most common type of non-separation issues we address are *availability* issues.

Availability issues can put a claimant's benefits in jeopardy. Anything that prevents a claimant from meeting all of the eligibility requirements is an issue that must be reviewed. Examples include: lack of childcare or transportation, wanting to work only part time, attending school, being out of the labor market, and restricting his/her availability to certain days or hours.

Some issues, although identified in the UI Center, are actually decided in Central Office (CO). These include labor disputes, professional athletes, alien (wages and availability/legal to work status), and apprenticeship training.

Availability (AAA) Issues

In addition to being out of work due to no fault of their own, a number of other requirements must be met <u>each week</u> benefits are claimed in order for a claimant to be eligible for payment or waiting week credit.

Laws and Rules:

ORS 657.155(1) states "An unemployed individual shall be eligible to receive benefits with respect to any week only if the Director of the Employment Department finds that:

(c) the individual is **able to work, is available for work, and is actively seeking** and unable to obtain suitable work.

We refer to this as our AAA requirement. As you may have notices, the statute is somewhat vague in describing what is meant by each of the eligibility criteria.

Fortunately, **OAR 471-030-0036** provides more detail about each of these eligibility requirements:

Able

Section (2) states in part, "an individual shall be considered **able** to work in a particular week only if physically and mentally capable of performing the work he or she actually is seeking during all of the week except:

- "(a) An occasional and temporary disability for less than half of a week shall not result in a finding that the individual is unable to work for that week; and
- "(b) An individual with a permanent or long term "physical or mental impairment" (as defined at 29 CFR 1630.2(h)) which prevents the individual from working full time or during particular shifts shall not be deemed unable to work solely on that basis so long as the individual remains available for some work."

This means the claimant must be able to perform the type of work s/he is seeking. Claimants also need to be able to work full time. If a claimant tells you he has a broken leg and is seeking construction work, there is an issue. If a claimant is on a medical leave of absence, there is an issue. If s/he is sick or in the hospital, there is a potential issue

Section (a) provides for situations where a claimant is sick and unable to work for less than half the week. If we determine a claimant was sick for less than half the week (3 and ½ days), there is no issue as long as the individual did not miss an opportunity to work. While in training, please check with your trainer if you see this type of scenario and believe there is no issue.

Section **(b)** allows for those individuals who cannot work full time due to a permanent or long-term disability. Although the claimant might still be eligible for benefits, it is an issue that must be reviewed.

A <u>permanent</u> physical or mental impairment is exactly that, permanent. It's a condition that continues despite treatment that might lessen the severity of symptoms or pain and has no expected end date. Examples of permanent conditions include any terminal illness, degenerative disc disease, and bi-polar or anxiety disorders.

What do we mean by a long-term physical or mental impairment?

By "long- term" we mean any condition that has no foreseeable end. Serious conditions such as cancer or rheumatoid arthritis, for example, could be considered long term because even though treatment might be available, there is no assurance the conditions will end. On the other hand, pregnancy, broken bones, and things like recovering from an injury or a surgical procedure would not be considered long term.

Let's test your knowledge about potential able issues:

While filing a TIC, the claimant tells you he had to quit his job because of a medical issue. He waited two months before filing his claim because he wanted to have a full release from his doctor in case we asked for it. Issue? Yes No
When claimant files her IC, she indicates she cannot begin full-time work immediately because she is undergoing chemotherapy treatment for cancer. Issue? Yes No
At the time of an IC, claimant tells you he is on a medical leave of absence because he broke his leg snowboarding. He works as a roofer, but also has experience as a customer service rep in a call center and is seeking that work. Issue? Yes No
During a TIC call, the claimant tells you he is recuperating from major back surgery. He can only sit or stand for one hour at a time. He is seeking cashiering and retail sales work. Issue? Yes No
When filing her initial claim on Thursday, Nov 19, the claimant tells you she was discharged the day before on Wednesday, Nov 18 after missing work due to the flu on Monday and Tuesday of that week. Issue? Yes No

<u>Available</u>

Section (3) states in part, "an individual shall be considered **available** for work if, at a minimum, he or she is:

- "(a) Willing to work full time, part time, and accept temporary work opportunities, during all of the usual hours and days of the week customary for the work being sought, unless such part time or temporary opportunities would substantially interfere with return to the individual's regular employment; and
- "(b) Capable of accepting and reporting for any suitable work opportunities within the labor market in which work is being sought, including temporary and part time opportunities; and
- "(c) Not imposing conditions which substantially reduce the individual's opportunities to return to work at the earliest possible time, and
- "(d) Physically present in the normal labor market area as defined by section (6) of this rule every day of the week unless:
 - (A) The individual is actively seeking work outside his or her normal labor market area; or
 - (B) The individual is infrequently absent from the normal labor market area for reasons unrelated to work search, for less than half of the week and no opportunity to work or referral to work was missed by such absence.
- "(e) An individual with a permanent or long-term physical or mental impairment (as defined at 29 CFR 1630.2(h)) which prevents the individual from working full time or during particular shifts shall not be deemed unavailable for work solely on that basis so long as the individual remains available for some work.
- "(f) For the purposes of ORS 657.155(1)(c), an individual is not available for work in any week claimed in which the individual has an opportunity to perform suitable work and fails to accept or report for such work due to illness, injury, or other temporary physical or mental incapacity."
- "(g) An individual will be considered not available for work if he or she fails or refuses to seek the type of work required by the Director pursuant to section (1) of this rule."

Let's break each of these criteria down.

Section (3)(a) covers two different components related to availability.

First, the claimant must be willing to work full time, part time, and be willing to accept temporary work. This means a claimant cannot place restrictions or conditions on the work s/he is willing to seek and accept. Despite a preference for permanent work, s/he must be willing to seek and accept temporary work. Despite a preference for full-time work, s/he must also be willing to seek and accept part-time employment opportunities. If s/he is not, it is an issue.

Section (3)(a) also tells us claimants must be willing to perform work during all the usual hours and days of the week that are customary for the type of work the claimant is seeking. Customary means "usual" or "typical". OED determines these customary days and hours, not the claimant. Days/hours are based on the occupation and not on what hours the claimant may have worked in the past. Customary days and hours may vary depending upon the claimant's labor market. If a claimant is unwilling to be available during those days and hours or has another personal commitment (like school) which limits the days/hours s/he is available for work, it is an issue.

Let's look at some occupations and try to determine what the customary days/hours might be for the work in that labor market.

Occupation/location	Customary days/hours
Bank Teller, Bend	<u>0800 – 1800, Mon - Fri</u>
Cashier, Eugene	<u>0600 – 2300, All Days</u>
Construction laborer, Medford	Daylight Hours, Mon – Sat
CNA, Beaverton	24 Hours, All Days
Gas station attendant, John Day	<u>0500 – 2200, All Days</u>
Gas station attendant, Portland	24 Hours, All Days
Office worker, Salem	<u>0800 – 1900, Mon – Fri</u>
Fast food worker, Gresham	0500 - 2400, All Days
Bartender, Springfield	11 00 – 0300, All Days
Security guard, Tigard	24 Hours, All Days

If a claimant is not willing or available to work during all the usual days/hours for the type of work s/he is seeking, refer (queue) the issue to adjudication. Again, it makes no difference if a claimant has always worked part time or certain days or hours in the past. A claimant cannot limit the days/hours s/he is available for work. There are a few exceptions in our administrative rule (i.e., restrictions related to childcare) but we address those during the adjudication process.

Section (3)(b) tells us a claimant must be capable of accepting and reporting for any suitable work opportunity within his/her labor market. This includes temporary and part-time work. If offered an opportunity to work, a claimant must be able to accept it and report to work. Illness, childcare, and transportation issues are the most common reasons an individual may be unable to accept and/or report for work.

Section (3)(c) tells us a claimant cannot impose conditions which reduce his/her opportunities to return to work at the earliest opportunity. Imposing conditions means it is something within the claimant's control. The claimant cannot place barriers, limitations, or restrictions on working. The following is a list of the most common barriers claimants place on future work.

Rate of pay

Days and/or hours s/he is willing to work.

Type of work sh/e is willing to perform

Full-time vs. part-time work

Labor Market

Section (3)(d) tells us claimants have to be physically present in their labor market every day of the week unless certain exceptions apply. The statute, ORS 657.155(2), addresses labor market. It states, in part:

"An individual who leaves the normal labor market area of the individual for the major portion of any week is presumed to be unavailable for work.....This presumption may be overcome if the individual establishes to the satisfaction of the director that the individual has conducted a bona fide search for work and has been reasonably accessible to suitable work in the labor market area in which the individual spent the major portion of the week..."

What do we mean by "labor market?"

OAR 471-030-0036(6) defines it this way:

- (a) An individual's normal labor market shall be that geographic area surrounding the individual's permanent residence within which employees in similar circumstances are generally willing to commute to seek and accept the same type of work at a comparable wage.
- (b) When an individual seeks work through a union hiring hall the individual's normal labor market area for the work sought is the normal referral jurisdiction of the union, as indicated by the applicable contract.

In other words, we must determine

- 1. The location of the claimant's permanent residence.
- 2. The type of work that is suitable for the claimant. This is based on the claimant's prior work skills and experience.
- 3. The geographic area within which persons in work related circumstances similar to the claimant's are generally willing to commute to seek and accept the same type of work at a comparable wage.

Drawing concentric circles on a map does NOT accurately define the geographical boundaries of a labor market applicable to all workers in the area. Labor markets can vary by individual.

Occupation normally determines the labor market. For example, a cook's labor market would be smaller than that of an operating engineer.

Adjudicators normally make determinations about claimants' labor markets. So, if asked, what can you tell claimants about labor market?

A claimant needs to look for work in the area around where s/he lives. S/he needs to be willing to travel/commute the same distance to look for or go to work others doing the same kind of work are willing to commute. If s/he is union, s/he needs to go where the union sends him/her.

Going back to Section (3)(d) in the OAR, we find that a claimant must be physically present in his/her labor market area every day of the week with two exceptions:

A claimant is seeking work outside his/her labor market, OR

A claimant is away from his/her labor market for reasons unrelated to work search for less than ½ the week and does not miss an opportunity to work by that absence.

Section (3)(e) addresses individuals who have long term or permanent physical or mental impairments. It tells us if the impairment prevents the individual from working during particular shifts, we will consider them available for work as long as they are available for some work. For example, a claimant with a certain sleeping disorder cannot work graveyard because of the negative impact on his health. Further review is needed so route these to adjudication.

Section (3)(f) tells us a claimant is considered not available for work in any week if s/he had an opportunity to work but did not accept or report for that work because of an illness, injury, or other temporary physical or mental incapacity. Although this section specifically addresses physical and mental issues, remember, anytime a claimant misses an opportunity to work, it is an issue and must be reviewed.

(3)(f) also advises us that if an individual is incarcerated during any days or hours customary for the type of work s/he is seeking, s/he is considered not available for work.

Section (3)(g) tells us an individual is not considered available for work if s/he fails or refuses to seek the type of work we require.

Section (3)(i) addresses individuals who reside or spend the major portion of the week outside the country. It goes on to describe an exception for individuals who are the spouse or domestic partner of someone who is stationed at a military base or embassy located outside the U.S.

This takes us right into the next major AAA requirement.

Actively Seeking Work

The final piece of our AAA requirements has to do with actively seeking work. Section 1 of OAR 471-030-0036 tells us we may require an individual to actively seek the type of work the individual is most capable of performing due to prior job experience and training.

OAR 471-030-0036(5) goes on to describe the requirements for actively seeking work.

- "(a) Unless the individual is temporarily unemployed, as described in section (b), or a member of a union, as described in section (c), or otherwise directed by the director or an authorized representative of the Employment Department, they must conduct at least five work seeking activities per week. Two of the five work seeking activities must be a direct contact with an employer who might hire the individual.
 - (A) Work seeking activities include but are not limited to registering for job placement services with the Employment Department, attending job placement meetings sponsored by the Employment Department, participating in a job club or networking group dedicated to job placement, updating a resume, reviewing the newspaper or job placement web sites without responding to a posted job opening, and making direct contact with an employer.
 - (B) Direct contact with an employer means making contact with an employer in person, by phone, mail, or electronically to inquire about a job opening or applying for job openings in the manner required by the hiring employer.
- (b) For an individual who is temporarily unemployed:
 - (A) They are considered to be actively seeking work when they remain in contact with their regular employer and are capable of accepting and reporting for any suitable work with that employer;
 - (B) There is a reasonable expectation that they will be returning to work for their regular employer. The work the individual is returning to must be full time or pay an amount that equals or exceeds their weekly benefit amount;
 - (C) The department will not consider the individual to be temporarily unemployed if they were separated from their employer for reasons other than a lack of work, the work the individual is returning to is not with their most recent employer, or the length the individual is unemployed is longer than the period described in subsection (D) of this section, and
 - (D) The department will consider that the period for which an individual is temporarily unemployed:

- (i) Begins the last date the individual performed services for the employer. In the case of an individual still working for the employer, it is the last date worked during the week in which the individual had earnings less than their weekly benefit amount; and
- (ii) Cannot be greater than four weeks between the week the individual became temporarily unemployed and the week the individual returns to work as described in subsection (B) of this section.
- (c) For an individual who is a member in good standing of a union that does not allow members to seek non-union work, such individual is actively seeking work by remaining in contact with that union and being capable of accepting and reporting for work when dispatched by that union.
- (d) For an individual who is filing a continued claim for the first week of an initial or additional claim:
 - (A) If the individual worked less than full time and remuneration paid or payable to the individual for services performed during the week is less than the individual's weekly benefit amount, each day the individual worked for the employer shall be considered a direct employer contact.
 - (B) An individual does not meet the requirements of this subsection if the individual performed no work for an employer during the first week of an initial or additional claim; therefore the individual must seek work consistent with subsection (a) of this section

Whew! That's a lot to consider. So how do we know what to tell claimants in regards to their work search requirements?

OED requires each regular claimant (other than temporarily unemployed or union attached) to make the same number of contacts each week. This means **five** work seeking activities; **two** of which must be direct employer contacts. Adjudicators can modify these requirements when addressing AAA issues. If modified, the adjudicator must mail the claimant a written notice of the updated advisory and add comments related to the modified work search.

What can you as a BES tell a claimant about his/her work search requirements?

Advise the claimant of the minimum requirements above (five total work search activities with at least two of those being direct employer contact). Ideally, claimants should make contact with different employers each week in an effort to return to work

at the earliest opportunity. The means of contact may vary, depending on what type of work the claimant is seeking (sending resumes, completing applications in person or online, etc.). Claimants must seek work that is suitable for them based on prior work skills and experience. If a claimant is unwilling to do so, it is an issue.

Work Search Exceptions

Employment Department Rules allow for the waiver of work search requirements in certain cases.

In a nutshell, work search requirements are waived only if the claimant has a reasonable expectation they will be returning to work for their regular employer no more than four weeks between the week of the layoff and the week of the return, or s/he is affiliated with a closed labor union and s/he gets all work through the union hiring hall.

We refer to the first part of the waiver provision as our TLO (temporarily unemployed) provision. Here are the important things to remember about TLO:

- ✓ If, at the time of layoff, an individual had a reasonable expectation of returning to full-time work within the time frame allowed by the OAR, that individual is considered to be actively seeking work by remaining in contact with and being capable of accepting and reporting for work with that employer. If the layoff extends past the time allowed by the OAR and the individual has not yet returned to work, s/he must also begin seeking work with other employers.
- ✓ If, at the time of layoff, an individual did not have a reasonable expectation of returning to work, or the work is not full-time, that individual must immediately begin seeking work with other employers.
- ✓ If, at the time of layoff, an individual had been given a date to return to work that exceeds the time frame allowed, that individual must immediately begin seeking work with other employers.

If you identify a claimant that meets our TLO criteria, a D 01 line flag for the week the claimant is expected to return to work should be set. Document the RTW (return to work) date in comments. TIC and IIC will set the flag and put in the comments for you.

Note: A claimant who indicates he is temporarily laid off from a temp/staffing agency is not considered TLO unless he is returning to work for the same onsite employer to the same assignment.

Let's try a few examples. In each case, indicate whether the situation meets our TLO criteria and what work search advisory you would provide.

A claimant files an IIC during wk 26. He was laid off and given no RTW date. TLO? Work search advisory?
A claimant files a new claim during wk 33. He was laid off on August 1 and has a RTW date of August 21. TLO? Work search advisory?
A claimant files a new claim Sept 12 th because her hours have been reduced to part time. Her last day worked was Sept 8 th and she is not scheduled to work again until Sept 14 th . TLO? Work search advisory?
A claimant files a new claim wk 36. He was laid off August 23 rd and has a RTW date of October 1 st . TLO? Work search advisory?
Claimant was laid off on October 3^{rd} and filed a new claim October 11^{th} . He has a RTW date of November 5^{th} .
TLO? Work search advisory

Union (closed or full referral)

The other category of individuals not required to seek work are those who are members in good standing of a union that does not allow its members to seek non-union work. We call those unions "closed" or "full-referral" unions. We consider those individuals to be actively seeking work by remaining in contact with their union and being capable of reporting to work when dispatched by that union. These individuals are not required to complete the Welcome/iMatchSkills process.

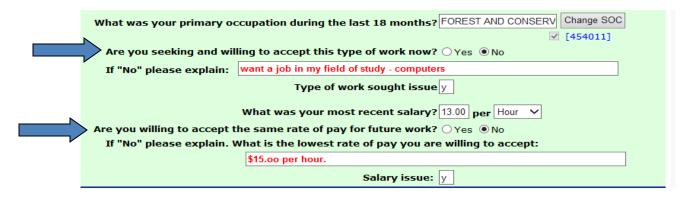
A list of unions is in EDWEB/Sections/UI/Claims Reference Materials.

Most non-separation issues are identified from the Eligibility Profile screen on TIC/IIC. Any question raising a potential issue will highlight in Red. If claimant's answer raises an issue, an explanation may be required.

Manic. JAT I DAIGI	Effective Week. 50/11 fille. 10.2	J AM COMMINITE. 1999
	Eligibility Profile	
Are you a member of a un	ion that allows you to seek work only through your union h	iring hall? ○ Yes ● No
If Yes, please enter un	ion number Union Lookup	
Are you receiving or will y 12 months?	ou receive retirement pay (other than Social Security) with	nin the next OYes ● No
If Yes, from whom?		
Are you willing to work ful	and part-time?	
If No, please explain:		
Are you willing to work du	ring all the days and hours normal for your occupation?	
If No, please explain:		
Is there any reason you c	annot begin full-time work now?	○Yes • No
If Yes, please explain:		
Have you turned down an	y work since you last worked?	○Yes No
If Yes, please explain:		
Are you currently self-emp	ployed?	○Yes • No
Did you work as a profess	ional athlete during the last 18 months?	○Yes ● No
In the last 18 months, we calendar quarter?	re you unable to work due to illness or injury for the greate	er part of any Oyes No
Are you attending school?		○ Full Time ○ Part Time ● No

When a claimant answers "yes" to the self-employed question, the issue will normally be queued up. Sometimes self-employment requires more scrutiny to determine if it really is self-employment. An owner of a business may correctly identify himself as self-employed, but OED considers him an employee of his own company. An individual may believe he is an independent contractor because that is what the employer told him, but OED may consider him an employee. Self-employment as well as claimants who are business owners will be covered separately in other material.

Two other potential AAA issues may be identified on the Personal Data screen. The claimant's answers may indicate Type of work sought and Salary issues.



If the claimant answers 'no' to either question, an explanation is required.

When claimants indicate they are not willing to accept the same type of work or same rate of pay, make a phone attempt to claimant. Advise the claimant of our expectations.

- If claimant is willing to comply, change the issue code to "No" and document in comments.
- If claimant is unwilling to comply, queue up the issue.
- If unable to speak to the claimant, leave a message for him to contact us. Process the claim. The system will set a D line flag. Send the claimant a letter. Enter a comment with a description of what the AAA issue is. Do not queue up the issue. For example, "type of work issue, clmt not willing to seek customary occupation of xxxx, LM for clmt to call, sent letter, no file made.".

Note: Only address the above situations directly with the claimant if there are no other issues on the claim. Otherwise, the adjudicator will address all issues with the claimant.

Occasionally, what appears to be an issue can be resolved at the IC level once we get clarification. Examples:

- A claimant indicates s/he is not willing to work both full time and part time. Upon further discussion, we find the claimant prefers full-time work, but once advised of our requirements, is also willing to accept part-time and temporary work. This is no longer an issue. Document the details of claimant's response in Claim Comments and remove the issue indicator before processing the claim.
- A claimant indicates (on Personal Data screen) he is not willing to seek and accept the same type of work. His explanation is "I'm returning to my regular employer in two weeks".
- The claimant answers "yes" to "is there any reason you cannot begin full time work now" and explains "I am only off one week for a plant shut down".

We've now briefly covered all of the AAA standards for eligibility. Any situation which results in a claimant being unable to meet any of the able, available, and actively seeking work requirements of the laws and rules discussed is an issue.

Other Issues arising at the Initial Claim filing

In addition to AAA issues, adjudicators investigate a number of other non-separation issues that may appear at the time of the initial claim. These include:

Backdate requests

Job refusals

Deductible income (retirement pay)

Backdate Requests

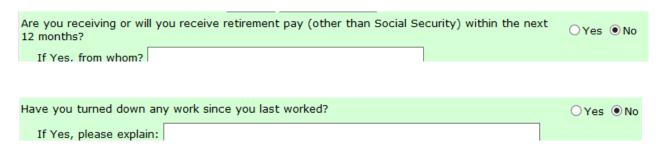
Our administrative rule does not allow us to routinely backdate initial claims. When a claimant asks about making a claim effective a week or more prior to the week s/he contacts us to file a new claim, explain that by law, we are unable to backdate the claim. If the claimant insists on backdating, advise him/her the issue will be forwarded to adjudication for review. Make the claim effective the week the claimant contacted us.

Exceptions:

- During times of high workload, we may be allowed to temporarily expand backdating. A UI memo will identify those times of high workload.
- Claimants may request a cancellation of an unexpired claim in order to file a new claim. Since the cancellation process takes two business days, we may need to backdate that new claim to the week of the request.
- When a claimant's BYE expires and the claimant contacts us within seven days of being advised of the need to file a new claim.
- When a claimant exhausts benefits, has an indefinite disqualification, or the BYE expires on a claim with another state, we may be able to backdate the new Oregon claim.

Job Refusals & Deductible Income

Both of the above issues are identified on the Eligibility Profile screen and will show in Red.



No matter what the issue, benefit payment is in jeopardy whenever an issue exists which could result in a denial of benefits. As a Claims Specialist, you are responsible for identifying potential issues and sending them to adjudication for further review.

The Review screen on IIC/TIC shows the potential issues identified during the filing of the initial claim. A check mark in a box under Form identifies the forms sent (TIC) or completed (IIC). A check mark in a box under Issue indicates a line flag will be set.

				\sim			
IC F	orms:				Form	Issu	Issue Due Date: 09/17/2014
	Base Year Extension	n - Forr	n 372				Alien Registration (claimant to provide)
	Total Disability Bas	e Year I	Extension - Form 372	2TTD			Alien Registration (not authorized)
	Letter Requesting I	DD-214					Apprenticeship Training - Form 385AT
	Commercial Fishers	- UI Pu	b 385CF			✓	Can't Work Full-time Now
	Release of Informa	tion Aut	horization - Form 18	26			Full-time Part-time Work Limitation
							Professional Athlete - Form 160
							Refused Work - Form 159
					✓	✓	Retirement Income - Form 1659
					✓	✓	School Attendance - Form 385H
							Self Employment - Form 385D
							Shift Restriction
						✓	Type of Work Sought
						✓	Salary Issue
							Current: \$13.00/HR Desired: \$0.00/
		Abort	Add Line Flag	Ad	dd Claim C	omme	ent Process

Staff have the ability to "uncheck" a box if there is no issue. For example, if our claimant indicated she could not work f/t now but explained it was because she was going back to work for her employer in a week, there is no issue and the check mark can be removed.

Line Flags for Initial Claims

When issues are identified at the time of the IC, the system (TIC/IIC) sets the appropriate line flag(s) and sends a questionnaire when needed. The Claims Specialist only needs to create the file and route it to adjudication.

The purpose of a Line Flag is to prevent payment until an investigation of an issue is completed or to alert us to a potential issue in the future. We utilize two types of Flags; "D" and "C". D line flags are the most common and stop payment. C line flags do not stop payment.

Use D line flags when:

- An availability issue is identified at the time of an IC. Set the D line flag for the first effective week of the IC. Note: If the issue is identified on TIC/IIC, the system will set the line flag for you.
- A job refusal or deductible income issue is identified at the time of an IC. Set the D line flag for the first effective week of the IC. TIC/IIC will do this for you.

D line flags set by the system from the TIC/IIC process will always start with the first effective week of the claim and go through 99/99. Flags set manually by staff may be set to start at any week and can go through 99/99, or may be ended with a specific week depending on the individual scenario. Assign the flag to all potential weeks in jeopardy.

C line flags

Assign a C line flag when you identify a potential <u>future</u> issue. We use a C line flag because the claimant's circumstances could change by the time the future week is claimed. C line flags do not stop payment. These flags appear on a suspense list that is reviewed each week by assigned staff.

Some of the more common reasons for using a C line flag are as follows:

- the claimant indicates s/he plans to attend school in the future
- the claimant indicates she is pregnant (baby due)
- the claimant indicates s/he will start receiving retirement pay

C line flags are not often used at the time of an initial claim. However, during the initial claim filing process, information might arise regarding a potential future issue. We must make sure the issue is noted so it can be addressed at the appropriate time. For example:

- Claimant mentions he isn't attending school right now but plans to enroll for the following quarter.
- Claimant indicates she had to quit her job because of lifting restrictions due to her pregnancy.
- The claimant asks how a planned vacation scheduled in two months will impact his benefits.

When you set a C line flag, document what the specific issue is and what date or week is involved (i.e., claimant is pregnant and due 11/15/19).

Specific Instructions for C flags

Set C line flags for the week prior to the expected baby due date and retirement date and two weeks prior to the school start week. The end week for baby due and retirement will be 99/99. The end week for the school will be the week prior to school beginning (at the time you set the C flag, you will also set a D flag for school to start the week the term begins). When the C flagged week is claimed, it will appear on the suspense list. The reviewer will generate the appropriate letter to the claimant. This allows us to be proactive on these issues so that decisions can be issued within a short time frame of the start of the event.

Line Flag Codes

When setting a line flag, you must select the appropriate code so the claimant gets the correct message when/if s/he claims the flagged week. In most cases it is easy to determine which code to use. Occasionally, more than one code may seem to apply, so use the one that fits best. Once again, at the Initial Claim, the TIC and IIC systems will set the vast majority of the flags needed at that point.

The following list contains the most commonly used line flags. A complete listing of line flags can be found on EDWEB under Sections/UI/Claims Reference Materials/Line Flag Code List.

Line Flag Code List

- 01 RETURN TO WORK DATE
- 03 SCHOOL/TRAINING
- 04 SCHOOL QUESTIONNAIRE
- 07 BABY DUE
- 08 VACATION/HOLIDAY PAY
- 09 SCHOOL EMPLOYEE RECESS (only Benefits can modify)
- 10 SCHOOL EMPLOYEE QUESTIONNAIRE (modified by Benefits)
- 11 PENSION/RETIREMENT PAY
- 13 BEGIN SELF-EMPLOYMENT
- 15 ABLE
- 16 AVAILABLE
- 17 ACTIVELY SEEKING WORK
- 18 ABLE/AVAILABLE/ASW
- 24 SEE COMMENTS FILE
- 25 CLAIMANT INFO DUE
- 26 NO SHOW REA

- 30 POSSIBLE NEW CLAIM
- 31 OUT OF LABOR MARKET
- 33 TRANSPORTATION
- 34 CHILD CARE
- 37 EXPECTED EARNINGS
- 40 JOB REFUSAL
- 42 INCARCERATION
- 44 NEEDS WAITING WEEK
- 45 NEW HIRE LISTING
- 48 SEPARATION ISSUE
- 49 ALIEN INFORMATION DUE
- 50 HOLIDAY PAY
- 52 APPRENTICESHIP TRAINING
- 53 REVIEW THEFT/FELONY
- 54 OUT OF COUNTRY
- DO AC-PART \$\$ TO 0 (Exception: msg. is sent for automated C-LF when no earnings in week when prior week has earnings less than WBA.)
- 67 WK CLAIM AFTER HEARING
- 70 VALID OTHER STATE
- 72 LF 61 AUTO NON-MON
- 75 iMATCH/WELCOME PROCESS
- 85 MISCELLANEOUS

Line Flags - Special Mention

LF 01 – Return to work

This flag is to be used whenever the claimant indicates s/he will be returning to work. The work might be with a new employer or with claimant's regular employer.

LF 03 & 04 - School attendance flags

When a claimant indicates s/he will be attending school in the future, set a C 04 line flag for two weeks prior to the school starting date. Also set a D 03 line flag for the week school is to start. If the claimant is already in school IIC/TIC will set a D 03 flag starting with the effective week of the claim

LF 24 – See Comments File

This flag is used when more complicated issues arise and no existing line flags are adequate for the situation. Whenever an active D 24 flag exists, the claims specialist should refer to prior notes to assure the correct actions are taken.

LF 25 - Claimant Info Due

This code is used when we have requested specific information from a claimant in order to make sure the claim record is accurate and complete. This would include requesting a better employer address, requesting earnings information related to 4XWBA, or needing information about an employer showing wages on the wage screen but was not provided by the claimant. Send a letter to request the needed information and set the D flag for the week the information is due back (the next week) through 99/99.

LF 75 – Welcome Process/iMatch.

This flag is normally set by the system at the time of the IC. It is set for two weeks from the filing week. Claimants must get registered in iMatch and complete the Welcome Process to avoid being denied starting the week of the flag.

Note: Pub 277 is mailed (system generated) the day after the IC is filed. This letter reminds claimants of the registration requirement and provides instructions. Once the claimant completes the requirements, the D 75 flag is inactivated by the system.

If the 75 line flag does not get added at the time of the IC due to staff error, the line flag can be added manually. Pub 277 will also need to be sent. It can be found under UITools/Advisory/iMatch Letter to Claimant.

Setting the Line Flag

To manually set a line flag on an existing claim, go to the ENL1 screen (F18) Non-Monetary Decision/Line Flag List. Press F10 to Add a Line Flag. The following screen will appear.

2	<u>Status</u>	<u>Code</u>	<u>Start</u>	<u>End</u>	<u>A/R</u>
	_	_			

Status - C or D. The status field identifies whether payment will be released or suspended until the issue is addressed.

Code - Refer to the Line Flag list or press F1. Using the correct code identifies the issue so we send the proper message if the week is claimed.

Start - Enter the starting week affected by the issue.

End - Enter the ending week affected by the issue or 99-99 if it is ongoing.

A/R - Authorized rep (leave blank). The system will attach your initials to the flag.