

## **STEP-BY-STEP PROCESS FOR FILING UNEMPLOYMENT INSURANCE CLAIMS**

The following process describes the steps for filing a typical unemployment insurance (UI) claim. The actual steps may vary depending on the individual circumstances and type of claim. Please refer to the Handbook on Unemployment Benefits for more specific information on the claim filing process.

### **1. Filing your initial claim.**

- a. As soon as you become unemployed, call Hawaii Tele-Claim at 643-5555 if you are in Hawaii (or 1-877-215-5793 from outside of Hawaii). Since Mondays and Tuesdays are the busiest days, we recommend you call from Wednesday to Friday during the first week you become unemployed.

Calls to Hawaii Tele-Claim may not be connected if you use an out-of-state phone to call from within Hawaii or if you use a Hawaii phone to call from outside Hawaii. If this situation occurs, use a landline to place your call or use a cellular phone with a Hawaii number to call from Hawaii or a cellular phone with a non-Hawaii number to call from outside Hawaii.

- b. When you call Hawaii Tele-Claim, you will answer questions from our Interactive Voice Response (IVR) system using your touch-tone telephone to begin the claim filing process. Remain on the line after you complete the automated IVR portion of the claim filing process to be transferred to a Customer Service Representative (CSR). If you call outside office hours, you will need to call back again during office hours to speak with a CSR to complete your claim filing process. You must speak with a CSR to complete the initial claim filing process.
- c. Depending on your work history, type of claim, amount of information needed, etc. your interview with the CSR may take between 10 – 20 minutes.

### **2. Within 1-2 days after filing your initial claim.**

- a. After filing your initial claim, we will mail you an informational packet. Follow the enclosed instructions regarding any forms that need to be completed and returned to the local claims office handling your claim. Do not delay reviewing the documents and returning any forms that require completion within the time specified.
- b. Register for work. You must also register for work within seven (7) days from the date you filed your initial claim.

If you belong to a labor union with a hiring hall, take the enclosed “Verification of Registration for Work” form to your union for completion. Mail or turn in the “Verification of Registration for Work” form within the seven (7) days period.

If you do not belong to a labor union with a hiring hall, you must post an online resume using the virtual one stop format in HireNet Hawaii, the Workforce Development Division's (WDD) internet job matching system, at [www.hirenethawaii.com](http://www.hirenethawaii.com). Instructions for posting an online resume are included in your packet. After you post your online resume, call the nearest WDD office to obtain instructions on how to complete the "Verification of Registration for Work" form. If you do not have internet access, you may report in person to your local One-Stop Office for assistance. Make sure you take the "Verification of Registration for Work" form to your local One-Stop Office. The One-Stop Office will complete Part A of the form to verify that you are registered for work and an online resume is posted. Failure to follow this requirement may result in a denial of benefits. You must also report to or contact the WDD office when instructed.

- c. You will also receive separately a "Reminder Claim Certification" which will indicate the first week that you should file for benefits and the period during which you should file for that week. (The "Reminder Claim Certification" is for information purposes only. Do not mail or turn in the "Reminder Claim Certification.")
- d. Refer to the "Hawaii Tele-Claim Instructions" which came with your packet. You are encouraged to use the "Practice Line" to familiarize yourself with the telephone claim certification filing process before you actually file your first claim certification. If you have any questions, call your local office for assistance.

### **3. Filing your weekly and biweekly claim certifications after you file your initial claim.**

- a. The first week on your claim is generally your waiting period. You must file for that week to receive credit for it but you will not be paid for that week. The first week that you can be paid for will be the second week that you claim. If there are no eligibility issues or job separation issues, (i.e., you were discharged or voluntarily quit), you will receive payment for the second week within 21 days after you filed your initial claim. After filing your first and second weeks one week at a time, you will then start filing on a bi-weekly (two weeks at a time) basis. Each time you file a bi-weekly claim certification, you will receive a payment for those two weeks.
- b. To begin filing your weekly or bi-weekly claim certification(s), call Hawaii Tele-Claim at 643-2222 if you are in Hawaii (or 1-877-215-5791 from outside of Hawaii) during the filing period indicated on the "Reminder Claim Certification."
- c. Each time you file for a weekly or a bi-weekly period via Hawaii Tele-Claim, you will receive a "Reminder Claim Certification" within 1 – 3 days which will advise you of the next weekly or bi-weekly period that you should file for and the dates

within which you should call Hawaii Tele-Claim to file your claim certification(s).

- d. You are required to make at least three (3) job contacts each week. You must also retain a log of job contacts on form UC-253, "Record of Contacts Made for Work." You will be asked periodically to submit your list of job contacts or report in-person for an interview.
- e. If you have a part-time employer or if you are still on payroll with your regular full-time employer but not getting full-time hours to work, your employer must verify your earnings before a payment is processed. You will be provided with a "Low Earnings Report" form to take to your employer to verify your earnings for each week you claim benefits. Your earnings in excess of \$150 will be deducted from your unemployment check.

#### **4. Your "Determination of Insured Status."**

- a. Generally, within 10 days after you file your initial claim, we will send you an "Unemployment Insurance Determination of Insured Status" form that will tell you if you were paid sufficient wages to qualify for unemployment insurance benefits.
- b. This monetary determination will state your weekly benefit amount, the maximum amount payable on your claim, the starting and ending dates of your claim, and the wages that were used to compute your entitlement.
- c. If you did not have sufficient wages to qualify, the reason will be stated on the determination.
- d. If you disagree with this determination, or the wages or employment reported, you can request reconsideration or file an appeal. (Refer to the appeal rights printed on your determination for more information.)

#### **5. Eligibility determinations.**

The following steps apply only if there are any eligibility issues on your claim.

- a. If there are any eligibility or job separation issues that must be resolved to determine your eligibility for benefits, we will call you on the phone or send you a notice to contact a claims examiner to provide information. After the claims examiner conducts the investigation, we will send you a written determination advising you of your eligibility for benefits. The eligibility determination process will usually be completed within 14-21 days after you filed your initial claim.
- b. If benefits are allowed, your payments will be released when the eligibility determination is made. If benefits are denied, you will not receive any payments.

The eligibility decision you get in the mail will explain the reason why benefits are denied, the period of ineligibility or disqualification, and your appeal rights.

- c. If you are denied benefits and disagree with the decision, you have 10-days from the date of decision to request reconsideration or file an appeal. If you request reconsideration, the UI Division will conduct an investigation and issue a redetermination within 2 weeks affirming, modifying, or reversing the original determination. If you still disagree with the redetermination, you can file an appeal.
- d. If you request reconsideration or file an appeal, continue to file your weekly or biweekly claims certifications. If benefits are subsequently allowed, you will be paid only for the weeks that you claimed and filed on time. For determinations involving the reason for your job separation, your employer also has the right to file for a reconsideration or appeal if benefits are allowed and the employer disagrees with the decision.

**6. Appeal rights.**

- a. If you or your employer files an appeal, the appeals office will schedule an appeals hearing to be held in about 2 to 4 weeks, depending on workload.
- b. After your appeals hearing, the appeals office will issue a decision within 1 to 2 weeks. If benefits were denied and you are allowed benefits, payments will be made at that time, provided you have filed your weekly or bi-weekly claims for benefits and meet all other eligibility requirements. If benefits are denied by the appeals office and you disagree with the appeal decision, you have 30 days to request reopening or file for judicial review in Circuit Court.