

APPENDIX C

SUMMARY TABLES OF OBJECTIVES

FOR FEDERAL CERTIFICATION

(INCLUDING FSA AND PRWORA)

Based on
"Automated Systems for Child Support
Enforcement: A Guide for States"
Revised April 1999
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U.S. Department Of Health and Human Services
Administration for Children and Families
Office of Child Support Enforcement

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Introduction

This document contains tables with summaries of all the objectives required for Federal certification. The tables are intended to be used as a checklists for certification reviews. The tables will contain a summary of each paragraph in the objectives, evaluation date, approval date, and comments and/or required corrective action. PRWORA requirements are indicated in the Comments column. Requirements that apply only to the Family Support Act of 1988 are unmarked. Objectives that OCSE intends to add to or delete from the next revision of the guide are commented accordingly.

These tables were derived from Automated Systems for Child Support Enforcement: A Guide for States, Revised April 1999, Updated December 1999. If there are any discrepancies between this document and the Guide, the Guide takes precedence.

ACF will, in general only evaluate PRWORA changes during PRWORA certification reviews. ACF does reserve the right to reevaluate any FSA 88 objectives during PRWORA reviews. ACF also reserves the right to reevaluate any previously approved PRWORA objective during subsequent PRWORA reviews.

A. CASE INITIATION

A-1 Non-IV-A Services

| A-1 Accept, maintain, and process non IV-A services information | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-------------------|------------------|--------------------------------|
| A-1(a)(1) Maintain date application requested | | | |
| A-1(a)(2) Maintain date application and program information sent to applicant | | | |
| A-1(a)(3) Maintain date application and fee received | | | |
| A-1(b)(1) Establish a non-IV-D case record within 20 days | | | |
| A-1(b)(2) Refer case to appropriate processing unit within 20 days | | | |
| A-1(b)(3) Notify the caseworker within 20 days | | | |

A-2 IV-A Referrals

| A-2 Accept and process IV-A referrals | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-------------------|------------------|--------------------------------|
| A-2(a) Accept IV-A referrals | | | |
| A-2(b) Automatically record referral date | | | |

| | | | |
|---|--|--|--|
| A-2(c) Provide program information to IV-A recipients and record date information was provided | | | |
| A-2(d) (part) Accept and process referral information : | | | |
| A-2(d) (part) Accept and process CP information: | | | |
| 1. Name | | | |
| 2. Address | | | |
| 3. SSN | | | |
| 4. IV-A Case ID | | | |
| 5. IV-A Case Status | | | |
| 6. IV-A Grant amount and approval date | | | |
| 7. Good cause information | | | |
| 8. Assignment of rights information | | | |
| 9. Employer name and address | | | |
| A-2(d) (part) Accept and process NCP information | | | |
| 1. Name | | | |
| 2. SSN | | | |
| 3. Date of birth | | | |
| 4. Last known address | | | |
| 5. Last known employer name and address | | | |
| A-2(d) (part) Accept and process Child information | | | |
| 1. Name | | | |
| 2. Date of birth | | | |
| 3. SSN | | | |
| 4. Paternity established | | | |
| 5. Medical insurance carrier and policy number | | | |

| | | | |
|---|--|--|--|
| A-2(d) (part) Accept & Process Support Order information | | | |
| 1. Order number | | | |
| 2. Date support amount established | | | |
| 3. Amount ordered | | | |
| 4. Payment frequency | | | |
| 5. Payment method - direct, through court, through IV-D, etc. | | | |
| 6. Date and amount of last payment | | | |
| 7. Amount of arrearage | | | |
| 8. Payment due date | | | |
| A-2(e)(1) Establish a case record within 20 days | | | |
| A-2(e)(2) Refer the case to the appropriate processing unit within 20 days | | | |
| A-2(e)(3) Notify the case worker within 20 days | | | |

A-3 IV-E Referrals

| A-3 Accept and process IV-E referrals | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| A-3(a) Accept automated referrals from IV-E agency | | | |
| A-3(b) Record date referral received | | | |
| A-3(c) Link 2 NCPs to child | | | |
| A-3(d) Accept and process the following information : | | | |

| | | | |
|--|--|--|--|
| A-3(d) (part) Foster Care Agency/Child Custodian information | | | |
| 1. IV-E Case ID | | | |
| 2. IV-E Case Status | | | |
| 3. IV-E approval date | | | |
| 4. IV-E payment amount | | | |
| 5. Good cause information | | | |
| 6. Assignment of rights information | | | |
| A-3(d) (part) NCP(s) information | | | |
| 1. Name | | | |
| 2. SSN | | | |
| 3. Date of birth | | | |
| 4. Last known addresses | | | |
| 5. Last known employer name and address | | | |
| A-3(d) (part) Child(ren) information | | | |
| 1. Name | | | |
| 2. Date of birth | | | |
| 3. SSN | | | |
| 4. Paternity established | | | |
| 5. Medical insurance carrier and policy number | | | |
| A-3(d) (part) Support Order information | | | |
| 1. Order number | | | |
| 2. Date support amount established | | | |
| 3. Amount ordered | | | |
| 4. Payment frequency | | | |
| 5. Payment method - direct, through court, through IV-D, etc. | | | |
| 6. Date and amount of last payment | | | |
| 7. Amount of arrearage | | | |
| 8. Payment due date | | | |

| | | | |
|--|--|--|--|
| A-3(e) Within 20 days of receipt of referral: | | | |
| A-3(e)(1) Establish a case record | | | |
| A-3(e)(2) Refer the case to the appropriate processing unit | | | |
| A-3(e)(3) Notify the caseworker | | | |

A-4 Medicaid Referrals

| A-4 Accept and process XIX (Medicaid) referrals | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| A-4(a) Automatically accept referrals from XIX | | | |
| A-4(b) Automatically record date referral is received | | | |
| A-4(c) Provide program information to Medicaid recipients and record date information was provided | | | |
| A-4(d) (part) Accept and process: | | | |
| A-4(d) (part) CP information | | | |
| 1. Name | | | |
| 2. Address | | | |
| 3. SSN | | | |
| 4. XIX Case ID number | | | |
| 5. XIX Case Status | | | |
| 6. XIX Approval date | | | |
| 7. XIX Good Cause information | | | |
| 8. Assignment of rights information | | | |

| | | | |
|--|--|--|--|
| 9. Employer name and address | | | |
| A-4(d) (part) NCP information | | | |
| 1. Name | | | |
| 2. SSN | | | |
| 3. Date of birth | | | |
| 4. Last known address | | | |
| 5. Last known employer name and address | | | |
| A-4(d) (part) Child(ren) information | | | |
| 1. Name | | | |
| 2. Date of birth | | | |
| 3. SSN | | | |
| 4. Address | | | |
| 5. Paternity established | | | |
| 6. Medical insurance carrier and policy number | | | |
| A-4(d) (part) Support order information | | | |
| 1. Order number | | | |
| 2. Date medical support established | | | |
| 3. Amount and type of support | | | |
| 4. Amount of arrearage | | | |
| 5. Payment frequency | | | |
| 6. Date and amount of last payment | | | |
| 7. How payments are made | | | |
| A-4(e) Within 20 days of receipt of referral: | | | |
| A-4(e)(1) Establish case record | | | |
| A-4(e)(2) Refer to processing unit | | | |
| A-4(e)(3) Notify the caseworker | | | |

A-5 Interstate Referrals

| A-5 Accept and process interstate referrals | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|----------------|---------------|--------------------------------|
| A-5(a) Accept interstate referrals through CSENET | | | PRWORA Requirement |
| A-5(a) (part) Automatically generate interstate CSENET transactions | | | PRWORA Requirement |
| A-5(a) (part) Generate interstate forms where possible | | | PRWORA Requirement |
| A-5(b)(1) Notify caseworker to verify completeness within 20 days | | | |
| A-5(b)(2)(a) Generate a response to initiating State through CSENet, acknowledging receipt of case | | | |
| A-5(b)(2)(b) Generate a response to initiating State through CSENet, providing information on case disposal | | | |
| A-5(c) If case information is inadequate the system must: | | | |
| A-5(c)(1) Forward case to appropriate function | | | |
| A-5(c)(2) Solicit additional information through CSENet | | | |
| A-5(c)(3) Notify the caseworker to initiate follow-up action | | | |
| A-5(d) (part) Identify case as Interstate and | | | |

| | | | |
|---|--|--|--|
| A-5(d) (part) Identify initiating State | | | |
| A-5(e) The Central Registry must be integrated into and supported by the automated system. | | | |

A-6 Case Types

| A-6 Identify and edit case types | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| A-6(a) Establish unique case and participant numbers. | | | |
| A-6(b) Identify the following case types | | | |
| A-6(b)(1) IV-A | | | |
| A-6(b)(2) Foster Care (IV-E) | | | |
| A-6(b)(3) Non-IV-A | | | |
| A-6(b)(4) Non-IV-A Title XIX | | | |
| A-6(b)(5) IV-A Arrears Only | | | |
| A-6(b)(6) Foster Care Arrears Only | | | |
| A-6(b)(7) Non-IV-D | | | |
| A-6(c) Identify interstate cases and FPLS only services | | | |
| A-6(d) For non-IV-A Title XIX cases, a code must indicate if individual only wants medical support | | | |

A-7 Automated Case Record

| A-7 Establish automated case record | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| A-7(a) Automated Case History of all actions taken | | | |
| A-7(b) One year case history on-line | | | |
| A-7(c) Include data needed to monitor time standards | | | |

A-8 Participant Information

| A-8 Accept and maintain information on all participants | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| A-8(a) Maintain NCP information | | | |
| 1. Name | | | |
| 2. Sex | | | |
| 3. Race | | | |
| 4. SSN | | | |
| 5. Home Address | | | |
| 6. Mailing Address | | | |
| 7. Date of Birth | | | |
| 8. Place of Birth | | | |
| 9. Employer Information (Name, Address, FEIN) | | | PRWORA Requirement |
| 10. Third Party Medical Insurance Information | | | |
| 11. Father's Name | | | |
| 12. Mother's Name | | | |
| 13. IV-D Participant Number | | | |

| | | | |
|--|--|--|--------------------|
| 14. Military Service Information | | | |
| 15. Information on Receipt of Federal benefits | | | |
| A-8(b) Maintain CP information | | | |
| 1. Name | | | |
| 2. Home Address | | | |
| 3. Mailing Address | | | |
| 4. SSN | | | |
| 5. Date of Birth | | | |
| 6. IV-D Participant Number | | | |
| 7. Employer Information | | | |
| 8. Third Party Medical Insurance Information | | | |
| A-8(c) Maintain Child(ren) information | | | |
| 1. Name | | | |
| 2. Home Address | | | |
| 3. Mailing Address | | | |
| 4. SSN | | | |
| 5. Date of Birth | | | |
| 6. Location of Birth | | | |
| 7. IV-D Participant Number | | | |
| 8. Paternity Information | | | |
| 9. Third Party Medical Insurance Information | | | |
| A-8(d) Family Violence Indicator | | | PRWORA Requirement |

A-9 Non-IV-D Orders

| A-9 Accept information for non-IV-D orders | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| A-9(a) Accept the following information on non-IV-D orders on or after October 1, 1998 for SCR/FCR: | | | PRWORA Requirement |

| | | | |
|---|--|--|--------------------|
| A-9(a)(1) Maintain CP, NCP, Child information, including Name, SSN, DOB, Sex, Participant ID | | | PRWORA Requirement |
| A-9(a)(2) Family Violence Indicator | | | PRWORA Requirement |
| A-9(a)(3) Additional mandatory data elements | | | PRWORA Requirement |
| A-9(b) Accept updates to non-IV-D orders and deletions of non-IV-D orders on SCR | | | PRWORA Requirement |

A-10 FCR Interface

| A-10 FCR Interface | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| A-10(a) Transmit and register to the FCR information on all new IV-D cases and non-IV-D orders | | | PRWORA Requirement |
| A-10(b) Notify FCR of changes and deletions within 5 business days | | | PRWORA Requirement Note: This requirement must include FCR notification of new or changed FVI information |
| A-10(c) Accept and process all administrative information from FCR | | | PRWORA Requirement |
| A-10(d) Communicate with FCR via Connect: Direct | | | PRWORA Requirement |
| A-10(e) Must send following case information to the FCR | | | PRWORA Requirement |
| 1. State Case ID number | | | PRWORA Requirement |
| 2. Case Type | | | PRWORA Requirement |

| | | | |
|------------------------------------|--|--|--------------------|
| 3. Order Indicator | | | PRWORA Requirement |
| 4. FIPS | | | PRWORA Requirement |
| A-10(e) Participant Information | | | PRWORA Requirement |
| 1. Participant type | | | PRWORA Requirement |
| 2. Family Violence Indicator | | | PRWORA Requirement |
| 3. Name | | | PRWORA Requirement |
| 4. Sex | | | PRWORA Requirement |
| 5. SSN | | | PRWORA Requirement |
| 6. Date of Birth | | | PRWORA Requirement |

B. LOCATE

B-1 Locate Interfaces

| B-1 Automated interface with locate sources | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| B-1(a) Automated interfaces and document generation | | | |
| B-1(a)(1) FPLS | | | |
| B-1(a)(2) NDNH | | | PRWORA Requirement |
| B-1(a)(3) FCR | | | PRWORA Requirement |
| B-1(a)(4) Department of Motor Vehicles | | | |
| B-1(a)(4) (part) Driver's License | | | |
| B-1(a)(4) (part) Vehicle Registration | | | |
| B-1(a)(5) SESA | | | |
| B-1(a)(6) Dept. of Natural Resources | | | |
| B-1(a)(7) Department of Vital Statistics | | | |
| B-1(a)(8) Department of Corrections | | | |
| B-1(a)(9) Credit Bureaus | | | |
| B-1(a)(10) Postal Service | | | |
| B-1(a)(11) Local/State Tax Administration | | | |

| | | | |
|---|--|--|--------------------|
| B-1(a)(12) State IV-A Agency | | | |
| B-1(a)(13) State IV-E Agency | | | |
| B-1(a)(14) State Title XIX Agency | | | |
| B-1(a)(15) SDNH | | | PRWORA Requirement |
| B-1(a)(16) SDU | | | PRWORA Requirement |
| B-1(a)(17) Public utilities | | | PRWORA Requirement |
| B-1(a)(18) Financial Institutions | | | PRWORA Requirement |
| B-1(a)(19) State Licensing Agencies | | | PRWORA Requirement |
| B-1(a)(20) State agencies with jurisdiction over real and personal property | | | PRWORA Requirement |
| B-1(b)(1) Generate documents to submit case to information source | | | |
| B-1(b)(2) Record manual locate attempts and results | | | |
| B-1(c) Automatically follow-up | | | |
| B-1(c)(1) Re-access using automated interface | | | |
| B-1(c)(2) If no automated interface, notify caseworker or generate documents | | | |
| B-1(d) Accept unsolicited locate information resulting from proactive FPLS matches | | | PRWORA Requirement |

B-2 Locate Activities

| B-2 Record, maintain and track locate activities to ensure compliance with program standards | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| B-2(a)(1) Automatically submit to Locate sources within 75 days | | | |
| B-2(a)(2) Track responses from automated sources | | | |
| B-2(a)(3) Track responses from manual sources | | | |
| B-2(a)(4) Record positive responses | | | |
| B-2(a)(5) Record all sources accessed monthly | | | |
| B-2(a)(6) Alert caseworker to verify responses | | | |
| B-2(a)(7) Forward cases to next appropriate function. | | | |
| B-2(b) Alert caseworker to ensure meeting 75 day timeframe | | | |
| B-2(c) Automatic follow-up | | | |
| B-2(c)(1) Re-access source via automated interface | | | |
| B-2(c)(2) If no automated interface, notify caseworker and generate documents. | | | |

B-3 Locate Resubmission

| B-3 Automatically resubmit to locate sources | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| B-3(a) On change in key data, automatically resubmit to locate | | | |
| B-3(b) At least quarterly automatically resubmit all cases in locate to automatic locate sources | | | |
| B-3(c) Follow-up when significantly late | | | |

B-4 FPLS

| B-4 Automatically submit cases to FPLS | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| B-4(a) For any person requiring an FPLS locate | | | PRWORA Requirement |
| B-4(a)(1) Identify cases appropriate for FPLS | | | PRWORA Requirement |
| B-4(a)(2) Prepare FCR locate person transaction | | | PRWORA Requirement |
| B-4(a)(3) Annotate case record | | | |
| B-4(a)(4) Receive information from FPLS and record results | | | |
| B-4(a)(5) Notify caseworker | | | |
| B-4(b) FPLS Submissions must include: | | | PRWORA Requirement |
| B-4(b)(1) Name | | | PRWORA Requirement |
| B-4(b)(2) SSN and DOB | | | PRWORA Requirement |
| B-4(b)(3) Any other required info prescribed by Action Transmittal | | | |
| B-4(c)(1) For 1099 Project, generate a locate transaction with required data | | | PRWORA Requirement |
| B-4(c)(2) Store all 1099 data | | | |
| B-4(c)(3) Conform to any other OCSE instruction. | | | |

C. ESTABLISHMENT

C-1 Paternity Establishment

| C-1 Track, monitor, and report on the status of paternity establishment and support regulations and laws for paternity establishment | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|----------------|---------------|--------------------------------|
| C-1(a) Initiate Paternity Establishment | | | PRWORA Requirement |
| C-1(b) Accept information on voluntary acknowledgments of paternity | | | PRWORA Requirement |
| C-1(c) (part) Generate documents to establish paternity | | | PRWORA Requirement |
| C-1(c) (part) Automatically enter date and type of document generated in case record | | | PRWORA Requirement |
| C-1(d) Initiate actions to establish paternity | | | |
| C-1(e) Reinitiate service-of-process | | | |
| C-1(f) Automatically generate documents for: | | | PRWORA Requirement |
| C-1(f)(1) Genetic testing notification | | | PRWORA Requirement |
| C-1(f)(2) Petition to require genetic testing | | | PRWORA Requirement |
| C-1(f)(3) Obtain judgement for costs | | | PRWORA Requirement |

| | | | |
|---|--|--|--|
| C-1(g) Generate long-arm documents and record actions taken and information received | | | |
| C-1(h) Maintain data on non-IV-D paternity establishment | | | |

C-2 Paternity Obligations

| C-2 Record, track, and monitor information on obligations and generate documents to establish support | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| C-2(a) Monitor cases and perform the following within 90 days of location: | | | |
| C-2(a)(1) Complete service of process | | | |
| C-2(a)(2) Establish support order | | | |
| C-2(a)(3) Document unsuccessful attempts at process service | | | |
| C-2(b) Monitor and identify cases to Support State review and modification procedures | | | |
| C-2(c) Automatically generate documents to establish order or serve process and record date and type of document generated | | | |
| C-2(d) Initiate actions to meet State's Guidelines for diligent efforts to serve process | | | |

| | | | |
|---|--|--|--------------------|
| C-2(e) Initiate actions to ensure expedited timeframes are met: | | | PRWORA Requirement |
| C-2(e)(1) 75% in 6 months | | | PRWORA Requirement |
| C-2(e)(2) 90% in 12 months | | | PRWORA Requirement |
| C-2(f) Automatically record all system initiated actions and accept entry of data on actions taken outside of system | | | PRWORA Requirement |
| C-2(g) (part) Record reason for dismissal without prejudice | | | |
| C-2(g) (part) Determine and enter date when it would be appropriate to re-seek an order | | | |
| C-2(g) (part) Automatically re-initiate action to obtain support at that time | | | |

C-3 Support Orders

| C-3 Accept, process, and maintain information concerning established support orders | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| C-3(a) Use State Guidelines to Automatically calculate support obligation amount | | | |
| C-3(b) Maintain data on application of guidelines and deviations for 4-year guideline review. | | | |
| C-3(c) When an order is established, record the following information: | | | |

| | | | |
|---|--|--|--------------------|
| C-3(c)(1) Type of obligation | | | |
| C-3(c)(2) Date of Order | | | |
| C-3(c)(3) Date adjusted | | | |
| C-3(c)(4) Amount of Order | | | |
| C-3(c)(5) Payment frequency | | | |
| C-3(c)(6) Arrearage (if any) | | | |
| C-3(c)(7) Method of payment | | | |
| C-3(c)(8) Payment due date | | | |
| C-3(c)(9) Issuing State of order | | | PRWORA Requirement |
| C-3(c)(10) Interest or late payment penalties and fees | | | PRWORA Requirement |
| C-3(d) Maintain a history of previously established orders. | | | |
| C-3(e) Identify and link multiple obligations | | | |
| C-3(f) Identify Obligation type | | | |
| C-3(g) Support administrative establishment of support orders, including document generation | | | PRWORA Requirement |
| C-3(h) Generate notice of all proceedings to CP and NCP | | | PRWORA Requirement |

C-4 Medical Support Services

| C-4 Accept, maintain, and process information concerning medical support services | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------------|--------------------------------|--|
| C-4(a) Identify cases requiring medical support in which: | | | |
| C-4(a)(1) CP and children do not have satisfactory health insurance other than Medicaid ; and | | | |
| C-4(a)(2) Health insurance is available to NCP at a reasonable cost | | | |
| C-4(b)(1) Identify cases with high potential for NCP obtaining medical insurance for Reasonable cost | | | |
| C-4(b)(2) Identify cases where facts are sufficient to warrant modification of support order to include medical insurance | | | |
| C-4(c) Automatically generate documents to petition for inclusion of medical support provisions in new or modified orders | | | |
| C-4(d) Automatically generate notices to CPs informing them of medical insurance secured for dependent children | | | |
| C-4(e) Interface with State Title XIX for transfer of medical support information | | | |

D. CASE MANAGEMENT

D-1 Direct Cases

| D-1 Automatically direct cases to the appropriate case activity | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| D-1(a) Upon case initiation, automatically direct case to appropriate function | | | |
| D-1(b) After completing each function, automatically assign case to next function | | | |
| D-1(c) To track compliance with program performance standards, record the following information: | | | |
| D-1(c)(1) The date a case is moved to a specific function | | | |
| D-1(c)(2) The dates and actions taken within a function | | | |
| D-1(c)(3) The results of actions, with dates | | | |
| D-1(c)(4) The date of referral to the next function | | | |
| D-1(d) Track actions and dates to ensure that: | | | |
| D-1(d)(1) Cases requiring locate are referred to locate within 20 days | | | |

| | | | |
|---|--|--|--|
| D-1(d)(2) All interstate cases are referred to SPLS within 10 days | | | |
|---|--|--|--|

D-2 Process Updates

| D-2 Automatically accept and process case updates and provide information to other programs on a timely basis | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| D-2(a) Accept and update case information from various sources | | | |
| D-2(b) Perform initial edit and validation checks | | | |
| D-2(c) Update common data elements in all linked records | | | |
| D-2(d) Transmit the following information to the IV-A agency for IV-A cases | | | |
| D-2(d) (part) CP information | | | |
| 1. Name | | | |
| 2. IV-A case ID number | | | |
| 3. Good Cause | | | |
| 4. Change of Address | | | |
| D-2(d) (part) NCP information | | | |
| 1. Name | | | |
| 2. Living with recipient | | | |
| D-2(d) (part) Child(ren) information | | | |

| | | | |
|---|--|--|--|
| 1. Paternity established | | | |
| 2. Child no longer resides with recipient | | | |
| D-2(d) (part) Support order information | | | |
| 1. Amount of support ordered | | | |
| 2. Payment frequency | | | |
| 3. Payment method - direct, through court, through IV-D, etc. | | | |
| 4. Amount of last payment | | | |
| 5. Date of last payment | | | |
| 6. Excess amount distributed | | | |
| 7. Date excess amount distributed | | | |
| D-2(e) Transmit information to the IV-E agency for IV-E cases | | | |
| D-2(e) (1) Child's name | | | |
| D-2(e) (2) Child's SSN | | | |
| D-2(e) (3) Child's IV-E case number | | | |
| D-2(e) (4) NCP names and addresses | | | |
| D-2(e) (5) Paternity established | | | |
| D-2(e) (6) Amount of monthly support ordered | | | |
| D-2(e) (7) Amount of last payment | | | |
| D-2(f) Transmit update information to the XIX agency for XIX cases | | | |
| D-2(f)(1) IV-A case number | | | |
| D-2(f)(2) IV-E case number | | | |
| D-2(f)(3) Title XIX case number | | | |

| | | | |
|--|--|--|--|
| D-2(f)(4) NCP name | | | |
| D-2(f)(5) NCP SSN | | | |
| D-2(f)(6) NCP home address | | | |
| D-2(f)(7) NCP employer's address | | | |
| D-2(f)(8) CP name | | | |
| D-2(f)(9) CP SSN | | | |
| D-2(f)(10) CP home address | | | |
| D-2(f)(11) CP Employer's address | | | |
| D-2(f)(12) Child(ren) name and SSN | | | |
| D-2(f)(13) Health policy name, number and names of person's covered | | | |
| D-2(f)(14) Medical payments made to a non-IV-A Title XIX recipient | | | |
| D-2(f)(15) IV-D agency non-cooperation determination | | | |

D-3 Maintain Case Information

| D-3 Update and maintain all case information and events | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| D-3(a) Maintain documents generated, data changes, locates, monthly summary of interface activity | | | |
| D-3(b) Accept entry of actions taken outside the system by caseworker | | | |

| | | | |
|--|--|--|---------------------------|
| <p>D-3(c) Accept no edits to system-initiated actions and impose 1 day time limit for editing manually initiated actions</p> | | | <p>PRWORA Requirement</p> |
|--|--|--|---------------------------|

D-4 Case Functions

| <p>D-4 Perform routine case functions, keep the caseworker informed, monitor case activity, provide case status activity, and ensure timely action</p> | <p>DATE EVALUATED</p> | <p>DATE APPROVED</p> | <p>COMMENTS/ CORRECTIVE ACTION</p> |
|--|------------------------------|-----------------------------|---|
| <p>D-4(a) Monitor cases to ensure case actions taken within timeframes. Track dates for:</p> | | | |
| <p>D-4(a) (part) Expedited process</p> | | | |
| <p>D-4(a) (part) Locate</p> | | | |
| <p>D-4(a) (part) Paternity establishment</p> | | | |
| <p>D-4(a) (part) Support order establishment</p> | | | |
| <p>D-4(a) (part) Review and adjustment</p> | | | |
| <p>D-4(a) (part) Enforcement (including wage withholding)</p> | | | |
| <p>D-4(b) System initiates the next step in case processing. This includes:</p> | | | |
| <p>D-4(b)(1) Generating documents and notices</p> | | | |
| <p>D-4(b)(2) Accepting, editing and verifying data from external sources</p> | | | |

| | | | |
|---|--|--|---------------------|
| D-4(b)(3) Referring cases to automated locate interfaces | | | |
| D-4(b)(4) Identifying and referring cases to FPLS and SPLS | | | |
| D-4(b)(5) Flagging cases for enforcement action | | | |
| D-4(b)(5) (part) Tax refund offset | | | |
| D-4(b)(5) (part) Wage withholding | | | |
| D-4(b)(5) (part) Unemployment compensation intercept | | | |
| D-4(b)(6) Referring arrearage to credit bureaus | | | |
| D-4(b)(7) Producing delinquency reports to monitor compliance with wage withholding orders | | | |
| D-4(b)(8) Flagging cases for review and adjustment of support obligation | | | |
| D-4(b)(9) Reviewing low priority cases periodically | | | Requirement Deleted |
| D-4(b)(10) Processing and distributing collections | | | |
| D-4(b)(11) Directing cases to next appropriate processing unit | | | |
| D-4(b)(12) Taking any other actions that can be initiated automatically | | | |
| D-4(c) Provide a daily on-line worklist to caseworkers including: | | | |

| | | | |
|---|--|--|--|
| D-4(c)(1) Newly assigned cases | | | |
| D-4(c)(2) Case actions that must be taken | | | |
| D-4(c)(3) Significant case actions automatically taken by the system | | | |
| D-4(c)(4) Significant case actions taken by supporting units | | | |
| D-4(d) Notify caseworker of actions taken by the system involving: | | | |
| D-4(d)(1) Locate | | | |
| D-4(d)(2) Paternity establishment | | | |
| D-4(d)(3) Obligation establishment | | | |
| D-4(d)(4) Review and adjustment of an obligation | | | |
| D-4(d)(5) Enforcement | | | |
| D-4(d)(6) Case closure | | | |
| D-4(e) If the caseworker has multiple options for case action, the system must: | | | |
| D-4(e)(1) Notify the caseworker that action is needed | | | |
| D-4(e)(2) Identify any default action that will be taken by the system | | | |
| D-4(f) Provide tickler for every time limit where caseworker action is necessary | | | |

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| <p>D-4(g) Initiate follow-up action (document generation or caseworker action) when a response from an external source is significantly late</p> | | | |
|--|--|--|--|

D-5 Review and Adjustment

| <p>D-5 Automatically support the review and adjustment of support obligations</p> | <p>DATE EVALUATED</p> | <p>DATE APPROVED</p> | <p>COMMENTS/ CORRECTIVE ACTION</p> |
|---|------------------------------|-----------------------------|---|
| <p>D-5(a)(1) Complete the review and adjustment within 180 days of decision</p> | | | |
| <p>D-5(a)(2) Within 14 days of issuance of an order or a no change determination:</p> | | | <p>PRWORA Requirement</p> |
| <p>D-5(a)(2)(a) Alert the caseworker to provide each party with a copy of the order</p> | | | <p>PRWORA Requirement</p> |
| <p>D-5(a)(2)(b) Generate a notice of determination of no change</p> | | | <p>PRWORA Requirement</p> |
| <p>D-5(b) Generate a notice to each parent of the right to request a review at least once every 3 years</p> | | | <p>PRWORA Requirement</p> |
| <p>D-5(c) Identify cases in which the order does not include health care coverage</p> | | | |
| <p>D-5(d) If a review is requested, determine if the case is eligible for review</p> | | | |
| <p>D-5(e) Refer cases to the locate function</p> | | | |

| | | | |
|---|--|--|--|
| D-5(f) Generate documents necessary to complete the review and adjustment process | | | |
| D-5(g) Record date and other information on documents generated. Generate follow-up request if response significantly delayed | | | |
| D-5(h) The system must: | | | |
| D-5(h)(1) Collect income, asset, employment and health insurance information through automated interfaces | | | |
| D-5(h)(2) Provide a means of entry and edit of data received | | | |
| D-5(h)(3) Perform guideline calculations | | | |
| D-5(h)(4) Compare guideline standards against quantitative State standard | | | |
| D-5(h)(5) Provide adjustment information and calculations to caseworker | | | |
| D-5(h)(6) Generate notices of proposed action and right to challenge. | | | |
| D-5(i) (part) Record all information received and actions taken in case record | | | |
| D-5(i) (part) Amount of adjustment, including addition of health insurance | | | |
| D-5(i) (part) Reason for no adjustment being pursued | | | |

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|--|--|--|--------------------|
| D-5(j) Generate a notice to each parent of all proceedings in which support obligations might be modified | | | PRWORA Requirement |
|--|--|--|--------------------|

D-6 Case Closure

| D-6 Allow for case closure | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| D-6(a) Identify cases eligible for closing | | | |
| D-6(b) Generate notice to service recipient or initiating State of intent to close 60 days prior to closing | | | PRWORA Requirement |
| D-6(c) Provide for supervisory review of cases subject to closer, and notify caseworker of case closure action | | | |
| D-6(d) Maintain identifying information on closed records in an on-line index, and keep all case data in archived history file | | | |
| D-6(e) Maintain entire history file of closed cases retained for at least 3 years, or until actions are resolved, whichever is later | | | |

D-7 Interstate Cases

| D-7 Provide for management of all interstate cases | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| D-7(a) All functions assigned to the Central Registry must be integrated into the automated system | | | |
| D-7(b) Transmit and receive information on interstate cases via CSENet | | | |
| D-7(c) Ensure interstate and intrastate cases are treated the same | | | |
| D-7(d) Identify cases as interstate and the other State and its FIPS | | | |
| D-7(e) <i>Reserved for Interstate Referral Guide requirement</i> | | | PRWORA Requirement-DEFERRED |

D-8 Responding States Actions

| D-8 Manage Responding-State case actions | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| D-8(a) Track and record dates to ensure the following timeframes are met: | | | |
| D-8(a)(1) Within 10 days of a request for service the system must: | | | |
| D-8(a)(1)(a) Generate a response to initiating IV-D agency via CSENet | | | |
| D-8(a)(1)(b) Notify the IV-D agency of additional information required to proceed | | | |

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|---|--|--|--|
| D-8(a)(2) Within 10 days of locating NCP, notify initiating State via CSENet | | | |
| D-8(a)(3) Within 10 days of receiving new information, notify initiating State via CSENet | | | |
| D-8(a)(4) Within 75 days of an interstate referral: | | | |
| D-8(a)(4)(a) Provide locate services if necessary | | | |
| D-8(a)(4)(a) Provide the case to the extent possible | | | |
| D-8(b) Automatically forward the case to the appropriate processing unit within the State | | | |
| D-8(c) (part) Record date of initial information request | | | |
| D-8(c) (part) Record type of information requested | | | |
| D-8(c) (part) Notify caseworker if request is not received within a time period that allows compliance with program standards | | | |
| D-8(d) Provide initiating state advance notice of hearings through CSENet, including date of hearings | | | |
| D-8(e) Provide case status updates to initiating states through CSENet | | | |
| D-8(f) Note all actions in the automated case record | | | |

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|---|--|--|--|
| D-8(g) Record reason and date of closure | | | |
|---|--|--|--|

D-9 Initiating State Actions

| D-9 Manage initiating-State case actions | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| D-9(a)(1) Within 20 days of determining an NCP is in another state jurisdiction, refer the case to that State via CSENet | | | |
| D-9(a)(2) Within 30 days of receipt of a request for additional information, provide information via CSENet or the date information will be provided | | | |
| D-9(b) Within 10 days of receiving new information, transmit information to responding State via CSENet and notify caseworker | | | |
| D-9(c) Within 5 days of receiving notice of review and adjustment information from responding state, generate a notice to parent in initiating state | | | |

E. ENFORCEMENT

E-1 Initiate Enforcement

| E-1 Automatically monitor compliance with support orders and initiate enforcement action | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| E-1(a)(1) Monitor and identify cases that fail to comply with support obligation | | | |
| E-1(a)(2) Initiate appropriate enforcement action | | | |
| E-1(b) Identify date NCP fails to pay amount equal to 1 month's support | | | |
| E-1(c) Initiate appropriate enforcement action | | | |
| E-1(d) Monitor compliance with the support order and initiate additional action | | | |

E-2 Income Withholding

| E-2 Support income withholding activity | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| E-2(a)(1) Initiate income withholding unless good cause demonstrated | | | |
| E-2(a)(2) Initiate income withholding unless alternate agreement signed | | | |

| | | | |
|---|--|--|--------------------|
| E-2(b) Initiate withholding on earliest date: | | | |
| E-2(b)(1) NCP fails to make payment of amount equal to 1 month's support | | | |
| E-2(b)(2) NCP requests that withholding begin | | | |
| E-2(b)(3) CP requests that withholding begin | | | |
| E-2(b)(4) Earlier date in accordance with State law | | | |
| E-2(c) Initiate withholding for obligations issued before October 1, 1996 | | | PRWORA Requirement |
| E-2(d) For immediate and initiated withholding cases automatically generate, within appropriate timeframes, a notice to the employer of the following: | | | PRWORA Requirement |
| E-2(d)(1) Amount to be withheld and Consumer Credit Protection Act information | | | PRWORA Requirement |
| E-2(d)(2) 7 day limit for employer to send withholding to SDU | | | PRWORA Requirement |
| E-2(d)(3) Employer fee | | | PRWORA Requirement |
| E-2(d)(4) Employer fines for discharging NCP | | | PRWORA Requirement |
| E-2(d)(5) Employee liability | | | PRWORA Requirement |
| E-2(d)(6) Withholding priority | | | PRWORA Requirement |
| E-2(d)(7) Employer may combine payments | | | PRWORA Requirement |

| | | | |
|--|--|--|--------------------|
| E-2(d)(8) 7 days to withhold and pay SDU | | | PRWORA Requirement |
| E-2(d)(9) Employer must notify State if NCP terminates employment and provide name and address of new employer | | | PRWORA Requirement |
| E-2(e) For initiated withholding, system must generate a notice to the NCP that: | | | PRWORA Requirement |
| E-2(e)(1) That withholding has commenced | | | PRWORA Requirement |
| E-2(e)(2) Amount of overdue support owed and amount to be withheld | | | PRWORA Requirement |
| E-2(e)(3) That withholding applies to any current or subsequent employer, or period of employment | | | PRWORA Requirement |
| E-2(e)(4) Procedures available to contest withholding | | | PRWORA Requirement |
| E-2(e)(5) Information in employer's notice | | | PRWORA Requirement |
| E-2(f) If NCP contests withholding, the system must generate documents to inform NCP of: | | | PRWORA Requirement |
| E-2(f)(1) The State's decision | | | PRWORA Requirement |
| E-2(f)(2) If withholding is modified, the amount to be withheld and effective date | | | PRWORA Requirement |
| E-2(g) Generate data and produce Standardized Income withholding form (OCSE-AT-98-03) to NCP's employer within 2 days after case becomes subject to withholding | | | PRWORA Requirement |

| | | | |
|---|--|--|--|
| E-2(h) Automatically generate notices and letters to support income withholding activities | | | |
| E-2(i) Notice must contain information required for the employer to initiate withholding and submit to SDU | | | PRWORA Requirement |
| E-2(j) Maintain information for each wage withholding document generated on: | | | |
| E-2(j)(1) Type of document | | | |
| E-2(j)(2) Recipient of document | | | |
| E-2(j)(3) Date document was sent | | | |
| E-2(k) The system must be capable of receiving information regarding income withholding electronically transmitted by the employer to the State's bank | | | |
| E-2(k)(1) Must offer all employers the option of using EFT/EDI | | | |
| E-2(k)(2) Notices to employers must identify procedures and format for submitting withholding | | | |
| E-2(k)(3)(a) EFT procedures must support NACHA CCD+ and CTX formats | | | PRWORA Requirement |
| E-2(k)(3)(b) EFT procedures must support NACHA Child Support Application Banking Convention | | | Undocumented FSA Requirement - new in PRWORA Guide |

| | | | |
|---|--|--|--------------------|
| E-2(l) Is State's remittance system designed to have employer enter the date of withholding | | | PRWORA Requirement |
| E-2(m) Automatically allocate amount received by withholding, when there is more than 1 notice for withholding against the NCP | | | |
| E-2(n) Caseworker must have online access to NCP, employer and wage information maintained by State | | | |
| E-2(o) Automatically generate delinquency aging report to monitor obligor/employer compliance with withholding orders | | | |

E-3 Federal Tax Refund Offset

| E-3 Automatically support Federal Tax Refund Offset | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| E-3(a)(1) Identify IV-A and IV-E cases where past-due support is \$150 or over | | | |
| E-3(a)(2) Identify IV-A and IV-E cases where support is 3 months delinquent | | | |

| | | | |
|---|--|--|--------------------|
| E-3(b)(1) Identify cases where support is owed - to, or on behalf of a minor child | | | |
| E-3(b)(2) Identify cases where support owed is \$500 or more | | | |
| E-3(b)(3) Identify support owed on behalf of spouse, when CP is living with child, and child and spousal support are included in same order | | | |
| E-3(b)(4) Identify support owed on behalf of a disabled adult with a current support order | | | |
| E-3(b)(5) Identify cases where amount has accrued since IV-D began enforcing support order. | | | |
| E-3(b)(6) Identify cases to determine if a IV-A or IV-E maintenance assigned arrearage exists with respect to the non-IV-A individual or family. | | | |
| E-3(c) Automatically interface via Connect:Direct to electronically transmit the following: | | | PRWORA Requirement |
| E-3(c)(1) Name and SSN of taxpayer who owes past due support | | | |
| E-3(c)(2) Amount of past-due support certified as owed | | | |
| E-3(c)(3) The State's FIPS | | | |
| E-3(c)(4) Case type indicator | | | |

| | | | |
|--|--|--|--|
| <p>E-3(d) Automatically generate files to notify OCSE of deletions to amounts previously referred to offset, significant decreases per State guidelines, significant increases per State guidelines, and to add new cases.</p> | | | |
| <p>E-3(e) Automatically generate the following notices and documents:</p> | | | |
| <p>E-3(e)(1) Notice to NCP that past-due support will be referred to the IRS for collection (OPTION - The State can choose to have OCSE send notice)</p> | | | |
| <p>E-3(e)(2) Notice to non-IV-A CP regarding distribution of offset amounts.</p> | | | |
| <p>E-3(e)(3) Notice to NCP, and CP in non-IV-A cases, of time and place of administrative review</p> | | | |
| <p>E-3(e)(4) Documents needed to refund excess amounts to parents</p> | | | |
| <p>E-3(e)(5) Notice referring NCP to IRS in cases where complaint was received concerning a joint-refund which has been offset</p> | | | |
| <p>E-3(e)(6) Documents and notices regarding post offset appeal process, if required by State law</p> | | | |
| <p>E-3(e)(7) CSENet notice to initiating State of a request for administrative review</p> | | | |

| | | | |
|---|--|--|--|
| E-3(e)(8) CSENet notice to responding State of results of an administrative review in cases where offset has already been made | | | |
| E-3(e)(9) CSENet notice to responding State when an offset is received | | | |
| E-3(f) Prior to submittal, automatically verify NCP's name, SSN, and amount referred to offset using automated interfaces with State agencies and other sources. | | | |
| E-3(g) The following offset information must be entered in the automated case history : | | | |
| E-3(g)(1) That an offset has been initiated | | | |
| E-3(g)(2) Date submitted | | | |
| E-3(g)(3) Year the return to be offset was filed | | | |
| E-3(g)(4) Year the offset is processed | | | |
| E-3(g)(5) The administrative review state | | | |
| E-3(g)(6) Whether the offset is a joint return | | | |
| E-3(h) Track actions to ensure the following timeframes are met: | | | |
| E-3(h)(1) Dates of submittal specified by OCSE | | | |
| E-3(h)(2) Dates for changes in amounts | | | |

| | | | |
|---|--|--|--|
| E-3(h)(3) Within 10 days of NCP request for review, the submitting State must provide the State with the order all necessary information | | | |
| E-3(h)(4)(a) Within 45 days of receipt of information | | | |
| E-3(h)(4)(a) Provide notice to the NCP (and CP in non-IV-A cases) of time and place of review | | | |
| E-3(h)(4)(b) Track the date of review and the decision | | | |

E-4 State Tax Refund Offset

| E-4 Automatically support State tax refund offset | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| E-4(a) Identify cases appropriate for state tax refund offset | | | |
| E-4(b) (part) Verify NCP information via automated interfaces | | | |
| E-4(b) (part) Name | | | |
| E-4(b) (part) SSN | | | |
| E-4(b) (part) Amount of past-due support | | | |
| E-4(b) (part) Amount referred for offset | | | |
| E-4(c) Notify state of changes | | | |
| E-4(d)(1) Automatically generate the following documents: | | | |

| | | | |
|---|--|--|--|
| E-4(d)(1)(a) Advance notice to CP that: | | | |
| E-4(d)(1)(a) Amounts collected for medical purposes will be distributed under 45 CFR 302.51(e) | | | |
| E-4(d)(1)(b) Whether amount collected will be applied first to satisfy any past-due support assigned to the State | | | |
| E-4(d)(2) Notice to NCP that past-due support will be referred for offset | | | |
| E-4(d)(3) Notice to NCP (and CP in non-IV-A cases) of time and place of administrative review of complaint regarding the offset | | | |
| E-4(d)(4) Documents needed to refund excess amounts | | | |
| E-4(d)(5) Documents required to notify initiating State of the result of review | | | |
| E-4(e) If the agency that processes State tax refund offsets is automated: | | | |
| E-4(e)(1) Submit identified cases annually | | | |
| E-4(e)(2) Receive from state NCP home address and SSN | | | |
| E-4(f) Enter the following offset information in the automated client record: | | | |
| E-4(f)(1) Date submitted | | | |

| | | | |
|---|--|--|--|
| E-4(f)(2) Year the return to be offset was filed | | | |
| E-4(f)(3) Year the offset is processed | | | |
| E-4(f)(4) Year the tax offset is processed against | | | |
| E-4(f)(5) The administrative review state | | | |
| E-4(f)(6) Whether the offset is on a joint return | | | |

E-5 Liens and Bonds

| E-5 Automatically identify, initiate, and monitor enforcement actions using liens and bonds | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| E-5(a) Identify cases to use liens and bonds | | | |
| E-5(b) Automatically generate required documents. The system must produce notice to NCP of: | | | |
| E-5(b)(1) Delinquency of support payment and posting requirement | | | |
| E-5(b)(2) Rights and methods for contesting | | | |
| E-5(c) Automated interface with real and personal property agencies to record liens | | | |
| E-5(d) Generate documents to record or serve liens in another state | | | PRWORA Requirement |

| | | | |
|--|--|--|--|
| E-5(e) Generate documents and notify caseworker to offset the bond when payment not received | | | |
| E-5(f) Generate documents and notify caseworker to remove lien and/or restore bond when payment is received | | | |

E-6 Unemployment Compensation Intercept

| E-6 Support Unemployment Compensation Intercept (UCI) | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| E-6(a) Automatically process UC information from SESA | | | |
| E-6(b)(1) Automatically screen SESA information to determine: | | | |
| E-6(b)(1) Which individuals applying for or receiving UC owe support | | | |
| E-6(b)(2) Which cases meet the State's criteria for intercept | | | |
| E-6(c) Automatically generate UC intercept documentation | | | |
| E-6(d) Generate an automated file of cases eligible for UC intercept and transfer to SESA | | | |
| E-6(e) Automatically generate UC intercept receipts at least annually if requested | | | |

E-7 Credit Reporting Agencies

| E-7 Forward arrearage information to credit reporting agencies | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| E-7(a) Identify cases that meets the State's criteria for providing arrearage information to credit reporting agencies | | | PRWORA Requirement |
| E-7(b) Automatically generate arrearage information file containing: | | | PRWORA Requirement |
| E-7(b)(1) Name of NCP | | | PRWORA Requirement |
| E-7(b)(2) Amount of arrearage | | | PRWORA Requirement |
| E-7(c) Automatically generate advance notice informing NCP of: | | | |
| E-7(c)(1) The proposed release of information | | | |
| E-7(c)(2) The methods available for contesting accuracy of information | | | |
| E-7(d) Monitor NCP response to advance notice, record the date response is received, and automatically generate further documentation required due to response | | | |

E-8 IRS Full Collection

| E-8 IRS Full Collections Services | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| | | | |

| | | | |
|---|--|--|--|
| E-8(a) Automatically identify cases where: | | | |
| E-8(a)(1) An order has been issued | | | |
| E-8(a)(2) There is at least \$750 in arrears | | | |
| E-8(a)(3) It is at least 6 months since the last IRS referral | | | |
| E-8(a)(4) The state requesting referral has an assignment of support rights under 45 CFR 301.1 or an application or referral under 45 CFR 302.33 | | | |
| E-8(a)(5) The State has made reasonable collection efforts | | | |
| E-8(b) Th system maintains sufficient information to submit a request for IRS Full Collection Services, including: | | | |
| E-8(b)(1) NCP, SSN, address, and place of employment | | | |
| E-8(b)(2) Amount owed under support orders | | | |
| E-8(b)(3) Amounts previously referred to IRS | | | |
| E-8(b)(4) Date of previous referrals | | | |
| E-8(b)(5) Previous enforcement actions and reasons for failure | | | |
| E-8(b)(6) NCP income and assets, including location, if known | | | |

| | | | |
|---|--|--|--|
| E-8(b)(7) Source of information | | | |
| E-8(b)(8) Date information was verified | | | |
| E-8(c) Notify ACF Regional Office of changes | | | |

E-9 Re-initiate Enforcement

| E-9 Periodically re-initiate enforcement actions | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| E-9(a) The system must track dates and time periods and take required actions to reinitiate enforcement actions | | | |

E-10 Spousal Support

| E-10 Support enforcement of spousal support | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| E-10(a) The system must record and monitor spousal support obligations when: | | | |
| E-10(a)(1) A spousal support order has been established | | | |
| E-10(a)(2) The spouse or former spouse lives with child(ren) | | | |
| E-10(a)(3) The support order is enforced under IV-D State plan | | | |

| | | | |
|--|--|--|--|
| <p>E-10(b) The system must initiate necessary enforcement actions when a delinquency is identified</p> | | | |
|--|--|--|--|

E-11 Medical Support

| <p>E-11 Monitor compliance and support the enforcement of medical insurance provisions of support orders</p> | <p>DATE EVALUATED</p> | <p>DATE APPROVED</p> | <p>COMMENTS/ CORRECTIVE ACTION</p> |
|---|------------------------------|-----------------------------|---|
| | | | <p>Note: The medical support provisions included in CSPIA are not yet final and therefore are not PRWORA certification Requirements</p> |
| <p>E-11(a) Automatically interface with State Title XIX system</p> | | | |
| <p>E-11(b) Automatically generate documents to enforce medical support provisions</p> | | | |
| <p>E-11(c) Alert caseworker when information required to fulfill a medical support order has not been received, and generate required documentation to secure the information</p> | | | |
| <p>E-11(d) Monitor employer and NCP compliance and prompt caseworker when there is a failure to comply with the order</p> | | | |
| <p>E-11(e) Periodically exchange data electronically with Title XIX agency to determine if there have been lapses in coverage</p> | | | |

| | | | |
|---|--|--|--|
| E-11(f) Request employers to notify IV-D agency of changes or lapses in coverage | | | |
|---|--|--|--|

E-12 AEI

| E-12 Automatically accept and process AEI requests | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|---|
| | | | Objectives will be issued after pilot project |

E-13 License Suspension

| E-13 Support procedures to suspend and withhold licenses | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| E-13(a) Identify individuals who meet license suspension criteria and produce initial notices | | | PRWORA Requirement |
| E-13(b) Produce documents to support license suspension or prompt caseworker | | | PRWORA Requirement |
| E-13(c) Match licensees with those owing arrearages | | | PRWORA Requirement |
| E-13(d) Send appropriate notices | | | PRWORA Requirement |

E-14 Passport Denial

| E-14 Support passport denial | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| E-14(a) Identify individuals owing \$5000 in arrearages | | | PRWORA Requirement |
| E-14(b) Generate notices and provide opportunity to contest | | | PRWORA Requirement |

E-15 FIDM

| E-15 Support Financial Institution Data Match (FIDM) | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| E-15(a) The system must be able to: | | | PRWORA Requirement |
| E-15(a)(1) Produce and transmit a file of delinquent obligors to FI | | | PRWORA Requirement |
| E-15(a)(2) Accept files from FI's electing Method One files (all accounts) | | | PRWORA Requirement |
| E-15(a)(3) Perform matches for FI's electing Method One matches | | | PRWORA Requirement |
| E-15(a)(4) Accept matched files received from FI's electing Method Two and from Multi-State FIDM | | | PRWORA Requirement |
| E-15(a)(5) Identify (flag) delinquent obligors for the MS-FIDM process on the Federal Income Tax Refund Offset file | | | PRWORA Requirement |
| E-15(b) Automatically update case record when match occurs to include FI and record address of NCP | | | PRWORA Requirement |
| E-15(c) Produce hardcopy report or form for FI's not participating in automated match | | | PRWORA Requirement |
| E-15(d) Produce document necessary to attach assets, or prompt caseworker to take that action | | | PRWORA Requirement |

E-16 Federal Administrative Offset

| E-16 The system must support administrative offset | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------------|--------------------------------|--|
| E-16(a) If the state chooses to participate, the system must: | | | PRWORA Requirement |
| E-16(a)(1) Identify cases where 25.00 or more is owed | | | PRWORA Requirement |
| E-16(a)(2) Identify cases 30 days delinquent | | | PRWORA Requirement |
| E-16(a)(3) Generate notices and documents, with notice to NCP that past due support will be referred to the Department of Treasury | | | PRWORA Requirement |
| E-16(a)(4) (part) Transmit offset requests via Connect:Direct including: | | | PRWORA Requirement |
| E-16(a)(4) (part) Name of person owing past due support | | | PRWORA Requirement |
| E-16(a)(4) (part) SSN of person owing past due support | | | PRWORA Requirement |
| E-16(a)(4) (part) Amount past due | | | PRWORA Requirement |
| E-16(a)(4) (part) State FIPS | | | PRWORA Requirement |
| E-16(a)(4) (part) Case indicator type | | | PRWORA Requirement |
| E-16(a)(5) Any other information required by OCSE | | | PRWORA Requirement |

F. FINANCIAL MANAGEMENT

F-1 Billing

| F-1 Automatically bill cases with obligations | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| F-1(a) (part) Automatically generate billing notices | | | |
| F-1(a) (part) Generate statement of account to NCP with current and past due support, and appropriate notices to clients | | | |
| F-1(b) Support a varied billing cycle | | | |
| F-1(c) Allow supervisory-authorized billing suppression | | | |
| F-1(d) Provide for payment identification (stubs/coupons) | | | |
| Note Billing by SDU | | | PRWORA Requirement |

F-2 Payment Processing

| F-2 Automatically process all payments | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| F-2(a) Accept and uniquely identify all payments | | | FSA and PRWORA Requirement |

| | | | |
|--|--|--|----------------------------|
| F-2(b) Provide financial controls for balancing and posting all payments | | | FSA and PRWORA Requirement |
| F-2(c) Generate documents required to support deposit of payments to financial institutions in accordance with written procedures | | | FSA and PRWORA Requirement |
| F-2(d) Adjust previously processed payments, with supervisory approval | | | FSA and PRWORA Requirement |
| F-2(e) Accept and process unidentified or suspended payments per written procedures | | | FSA and PRWORA Requirement |
| F-2(f) (part) Maintain payment history containing following information: | | | FSA and PRWORA Requirement |
| F-2(f) (part) Amount of payment | | | FSA and PRWORA Requirement |
| F-2(f) (part) Date of collection | | | FSA and PRWORA Requirement |
| F-2(f) (part) Method of payment | | | FSA and PRWORA Requirement |
| F-2(f) (part) Date initially received in State | | | FSA and PRWORA Requirement |
| F-2(f) (part) Date of disbursement | | | FSA and PRWORA Requirement |
| F-2(g) Record receipt of fees and recovery of costs in case record and in State's accounting subsystem | | | FSA and PRWORA Requirement |
| F-2(h) Record and track bond collections | | | FSA and PRWORA Requirement |
| F-2(i) Separately records and maintain charges and payments associated with FPLS fees | | | FSA and PRWORA Requirement |

| | | | |
|--|--|--|----------------------------|
| F-2(j) (part) System separately records charges and payments associated with the payment of fees for the cost of genetic tests | | | FSA and PRWORA Requirement |
| F-2(j) (part) A notation must indicate that a final judgement has been obtained | | | |
| F-2(j) (part) Once the judgement has been paid in full, another notation must indicate that payment has been made | | | |
| F-2(k) (part) If IV-A is responsible for direct payment recovery, allow adjustments to credit NCP account for the amount recovered through IV-A recovery method | | | PRWORA Requirement |
| F-2(k) (part) If IV-D responsible for direct payment recovery the system must: | | | |
| F-2(k)(1) Document dates and amounts of direct payments made to a IV-A recipient | | | |
| F-2(k)(2) Generate advance notice to IV-A recipient of IV-D agency's intent to recover payments through repayment agreement | | | |
| F-2(k)(3) Receive, identify and total repayments from recipients | | | |
| F-2(l) Distribute payments within 2 business days | | | PRWORA Requirement |
| F-2(m) Record and maintain changes associated with interest or late payment penalties and fees | | | PRWORA Requirement |

| | | | |
|--|--|--|--------------------|
| Note Payment processing by stand-alone SDU | | | PRWORA Requirement |
|--|--|--|--------------------|

F-3 EFT/EDI

| F-3 Accept and disburse payments using EFT/EDI transactions | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|---|
| F-3(a) Process EFT/EDI transactions from employers | | | |
| F-3(b) Process EFT/EDI transactions from States | | | Undocumented FSA Requirement - new in PRWORA guide |
| F-3(c) Transmit interstate collections using EFT/EDI technology | | | |
| F-3(d) EFT/EDI transactions must conform to NACHA requirements | | | Undocumented FSA Requirement - new in PRWORA guide |
| F-3(d)(1) Must be able to accept CTX and CCD+ formats | | | PRWORA Requirement |
| F-3(d)(2) Must be able to process wage withholding, interstate collection and remittance data using the Child Support Application Banking Convention format | | | Undocumented FSA Requirement - new in PRWORA guide |
| F-3(d)(3) Must be capable of transmitting interstate child support collections to other States in CCD+ format | | | PRWORA Requirement CTX recommended but not required |
| F-3(d)(4) Must be able to transmit interstate Child Support collections and corresponding remittance data using NACHA EFT/EDI format for Child Support collections | | | Undocumented FSA Requirement - new in PRWORA guide |

F-4 Uniform Statewide Accounting

| F-4 Accounting process must be uniform statewide, accept and maintain all financial information, and perform IV-D calculations | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| F-4(a) Maintain audit trail of all transactions | | | |
| F-4(b) Distribute all collections | | | |
| F-4(c) Calculate.-Federal, State, and Local collection shares | | | |
| F-4(d) Provide documentation to verify FFP claims and to facilitate the payment, receipt, and distribution of incentives | | | |
| F-4(d)(1) Maintain data on collection and administration costs | | | |
| F-4(d)(2) Maintain data on receipt of incentive payments | | | |
| F-4(d)(3) Maintain data on the efficiency and effectiveness of political subdivisions operations | | | |
| F-4(d)(4) Perform calculations to determine IV-D share of administration costs | | | |
| F-4(d)(5) Perform incentive calculations for passing incentives to political subdivisions | | | |

| | | | |
|--|--|--|--------------------|
| F-4(d)(6) Distribute and maintain information on Incentive payments to political subdivisions | | | |
| F-4(e) Maintain data on genetic testing costs and information on attempts to obtain reimbursement of such costs | | | |
| F-4(f) Calculate and maintain arrearage information | | | |
| F-4(g) Calculate and maintain info on Unreimbursed Public Assistance (UPA) | | | |
| F-4(h) Record the following fees: | | | |
| F-4(h)(1) Genetic testing fees | | | |
| F-4(h)(2) Court costs | | | |
| F-4(h)(3) Application fees | | | |
| F-4(h)(4) Locate fees | | | |
| F-4(h)(5) Non-IV-A Fed and State tax refund intercept | | | |
| F-4(h)(6) Wage withholding fees | | | |
| F-4(h)(7) FPLS fees | | | |
| F-4(h)(8) Non-IV-A FPLS locate only fees | | | |
| F-4(h)(9) IRS full collection fees | | | PRWORA Requirement |
| F-4(h)(10) Other fees | | | |

| | | | |
|--|--|--|--|
| F-4(I) (Optional) Support cost recovery by: | | | |
| F-4(I)(1) Calculating costs to be recovered | | | |
| F-4(I)(2) Producing notices | | | |
| F-4(I)(3) Receiving identifying, and totaling recovered costs | | | |

F-5 Distribution and Disbursement

| F-5 Distribute collections per regulation | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| F-5(a) Deduct costs and fees from support appropriately. Credit NCP account appropriately. | | | PRWORA Requirement |
| F-5(b) (part) Record following information on distribution and disbursement : | | | |
| F-5(b) (part) Amount | | | |
| F-5(b) (part) Date of distribution | | | |
| F-5(b) (part) Date of disbursement | | | |
| F-5(b) (part) Recipient | | | |
| F-5(c) (part) Disburse within 2 days via EFT/EDI in interstate cases. | | | PRWORA Requirement |
| F-5(c) (part) All transfers must be linked to the automated client record | | | PRWORA Requirement |
| F-5(c) (part) Data to the initiating State must include: | | | PRWORA Requirement |

| | | | |
|--|--|--|--------------------|
| F-5(c) (part) Case ID number | | | PRWORA Requirement |
| F-5(c) (part) Payment amount | | | PRWORA Requirement |
| F-5(c) (part) Date of collection or tax offset indication | | | PRWORA Requirement |
| F-5(c) (part) NCP name | | | PRWORA Requirement |
| F-5(c) (part) NCP SSN | | | PRWORA Requirement |
| F-5(c) (part) Medical support indicator | | | PRWORA Requirement |
| F-5(c) (part) Responding State's FIPS or WGL code | | | PRWORA Requirement |
| F-5(d) Recompute distribution of collections when payments are processed in a later month | | | PRWORA Requirement |

F-6 Notices of Support Collections

| F-6 Generate notices of assigned support collections | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| F-6(a) (part) Generate monthly notice of assigned support collections. | | | |
| F-6(a) (part) Separately list payments collected from each NCP, with the following information | | | |
| F-6(a) (part) NCP | | | |
| F-6(a) (part) Amount of current support | | | |
| F-6(a) (part) Amount of arrearage collected | | | |

| | | | |
|---|--|--|--|
| F-6(a) (part) Amount disbursed | | | |
| F-6(b) (part) Use the IV-A/IV-D interface to provide the following collection data to the IV-A agency within 10 days of end of month in which payment was received | | | |
| F-6(b) (part) Amount | | | |
| F-6(b) (part) Case number | | | |
| F-6(b) (part) Date of collection | | | |
| F-6(b) (part) Date the IV-D agency gives the information to the IV-A agency | | | |

G. REPORTING

G-1 Federal Reports

| G-1 Maintain information required for Federal reports | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| G-1(a) Maintain information required for OCSE-157 | | | PRWORA Requirement |
| G-1(b) Maintain expenditure information for OCSE-34A | | | PRWORA Requirement |
| G-1(c) Maintain information required for OCSE-396A | | | PRWORA Requirement |
| G-1(d) Maintain information to complete any other OCSE reports | | | PRWORA Requirement |

G-2 Daily Worklist

| G-2 Provide automated daily on-line report/worklist to each caseworker | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| G-2(a) Generate automated daily on-line report/worklist to each caseworker including the following: | | | |
| G-2(a)(1) Cases needing review by priority or case aging | | | |
| G-2(a)(2) Required follow-up reviews and/or actions | | | |

| | | | |
|---|--|--|--|
| G-2(a)(3) Cases to be automatically acted on by system which may require caseworker review or action | | | |
| G-2(a)(4) Newly assigned cases needing review or action | | | |

G-3 Data Accuracy and Accounting Summary

| G-3 Generate reports required to ensure and maintain accuracy of data and to summarize accounting activities | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| G-3(a) Ensure validity of data entered into the system and generate error and edit reports | | | |
| G-3(b) The system must: | | | PRWORA Requirement |
| G-3(b)(1) Maintain data to calculate paternity establishment percentage for each fiscal year | | | PRWORA Requirement |
| G-3(b)(2) Have system controls to ensure accuracy of paternity establishment data and calculation of paternity establishment percentage | | | PRWORA Requirement |
| G-3(c) Generate reports on the following financial activities: | | | |
| G-3(c)(1) Collections | | | |
| G-3(c)(2) Escrowed collectibles | | | |

| | | | |
|---|--|--|--|
| G-3(c)(3) Adjustments | | | |
| G-3(c)(4) Fees collected | | | |
| G-3(c)(5) Future and arrearage payments | | | |
| G-3(c)(6) Interstate collections | | | |
| G-3(c)(7) Checks and check registers | | | |
| G-3(c)(8) Summary of distribution of child support | | | |
| G-3(c)(9) Summary of receipts by collecting agency | | | |
| G-3(c)(10) Interest collected | | | |

G-4 Performance

| G-4 Provide reports on employees, units, and program performance | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|---------------------------|--------------------------|--|
| G-4(a) Automatically generate workload management reports on employee, unit, and program performance that include: | | | |
| G-4(a)(1) Backlog identification | | | |
| G-4(a)(2) Workload allocation | | | |
| G-4(a)(3) Caseload tracking and aging | | | |
| G-4(b) Generate employee and unit performance reports that provide information on: | | | |

| | | | |
|---|--|--|--|
| G-4(b)(1) Caseload statistics (age, category, status) | | | |
| G-4(b)(2) Collections | | | |
| G-4(b)(3) Obligations | | | |
| G-4(b)(4) Cases for which order could not be established or enforced (including number of and reason for failures) | | | |
| G-4(b)(5) Employee activity and accomplishments | | | |
| G-4(c) As-needed management reports | | | |

G-5 Data Analysis

| G-5 Support expeditious review and analysis of data | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| G-5(a) All data accessible to auditors | | | |
| G-5(b) (part) Allow monitoring of all case processing activities by IV-D agency and OCSE auditors. | | | |
| G-5(b) (part) Retention of all case actions and activities that occur in or are processed by the system. | | | |
| G-5(c) Automated case history of all actions taken, dates of actions, and, if appropriate, the results of these actions | | | |
| G-5(d) Maintain case history on-line. May be moved off-line after 1 year. | | | |

H. SECURITY AND PRIVACY

H-1 Risk Management and Data Integrity

| H-1 The system must have policies and procedures for risk management. The agency must have safeguards on data integrity and written policies on data access | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| H-1(a) Assign responsibility to do risk analysis | | | |
| H-1(b) Measure system vulnerability to fraud, theft, data loss or destruction, unauthorized access, intrusion and harm to agency activities | | | |
| H-1(c) Timetable for risk analysis must be established, ensuring evaluations are performed after significant system changes | | | |

H-2 Unauthorized Access and Disclosure

| H-2 Protect system against unauthorized access | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|---|-----------------------|----------------------|--|
| H-2(a) System and terminals must have unique, controlled passwords | | | |

| | | | |
|---|--|--|---|
| H-2(b) System security must extend to functional screen level and limit user's capability to view and update those screens | | | |
| H-2(c) System must require periodic password changes. | | | |
| H-2(d) System must provide security levels for record access and automatic sign-off | | | |
| H-2(e) System must have procedures for user and terminal assignment and identification | | | |
| H-2(e)(1) Limit people who do password system maintenance | | | |
| H-2(e)(2) Notification of personnel changes | | | |
| H-2(f) System must be able to detect, record and lock out unauthorized access attempts | | | |
| H-2(g) System must restrict access to negotiable/sensitive forms | | | |
| H-2(h) System must be able to protect IRS data from unauthorized access | | | |
| H-2(i) System must maintain information (user, date, etc.) on changes to critical records | | | |
| H-2(j) System must monitor all access to and use of automated system | | | PRWORA Requirement Note: This is a real-time requirement |
| H-2(k) Prevent disclosure of family violence information | | | PRWORA Requirement |

H-3 Application Software

| H-3 Procedures for retrieval, maintenance and control of the application software | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| H-3(a) Change control procedures established | | | |
| H-3(b) Ensure that only authorized changes are made | | | |
| H-3(c) Recovery and restart capability | | | |
| H-3(d) Test using test data | | | |
| H-3(e) Maintain audit trail of operating system actions | | | |
| H-3(f) Provide internal audit trail of all financial management activities | | | |
| H-3(g) Limit access to utility programs | | | |

H-4 Program Data

| H-4 Procedures for retrieval, maintenance and control of program data | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| H-4(a) Master file changes initiated and authorized by other than DP personnel | | | |
| H-4(b) Bypass of data validation on editing problems by supervisor only | | | |

| | | | |
|---|--|--|--|
| H-4(c) System generated overrides automatically logged | | | |
| H-4(d) System-generated record counts | | | |
| H-4(e) Rejected data written to suspense file | | | |

H-5 System Backup

| H-5 System hardware, software, documentation, and communications must be protected and back-ups available | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|-----------------------|----------------------|--|
| H-5(a) Approved disaster recovery plan including: | | | |
| H-5(a)(1) Documentation of backup arrangements | | | |
| H-5(a)(2) Formal agreement of all parties | | | |
| H-5(a)(3) Established processing priority system | | | |
| H-5(a)(4) Arrangement for use of back-up facility | | | |
| H-5(a)(5) Periodic testing of backup facility | | | |
| H-5(b) List of retention periods of all files | | | |
| H-5(c) 3 year history of data base stored off-site | | | |

| | | | |
|--|--|--|--|
| H-5(d) Automatic recovery and restore capability | | | |
| H-5(e) Routine backups of data files, program, and documentation | | | |
| H-5(f) Duplicate system files, programs and documentation stored off-site | | | |

H-6 Y2K

| H-6 Y2K processing | DATE EVALUATED | DATE APPROVED | COMMENTS/ CORRECTIVE ACTION |
|--|---------------------------|--------------------------|--|
| H-6(a) All hardware, software and firmware must be year 2000 compatible | | | PRWORA Requirement |