

Federal Parent Locator Service

Electronic Income Withholding Orders

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Release Specifications

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Administration for Children and Families
Office of Child Support Enforcement
370 L'Enfant Promenade S.W.
Washington, DC 20447

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1. NEW e-IWO REASON CODES (OCSE REF #3223)

1.1 Summary of Changes

The Electronic Income Withholding Orders (e-IWO) system is being modified to include new disposition reason codes in the Acknowledgement Record. The new disposition reason codes will enable employers to provide explanations for both accepted and rejected orders. The following new disposition reasons are being added:

- Employee is in a suspense status
- Name mismatch
- Incorrect Federal Employer Identification Number (FEIN) received
- IWO received from multiple states

1.2 Background

States and employers have requested additional codes to assist in further explaining why an order is being accepted or rejected.

Currently, a rejected reason code is used to provide an indication of why an order is not being processed by an employer. Reasons for rejecting an order include:

- Duplicate IWO – from the same state
- Noncustodial parent (NCP) no longer with the employer
- NCP not known to the employer
- Employer could not electronically process the order
- No current IWO in place for a termination request

1.3 Description of Changes

New disposition reason codes are being added to communicate additional information to states about the status of an IWO. The Rejected Reason Code field is required when an employer rejects an IWO. The Rejected Reason Code field will be relabeled to Disposition Reason Code.

Under certain conditions, employers will be allowed to supply a reason code for accepted orders. An example of an accepted condition that would assist in supplying more information to a state is when an employee is in a suspense status or on leave of absence. It informs the state that payment will occur at a later date. In this circumstance, the employer should accept the order and supply a new disposition reason code of ‘S’ in the Acknowledgment Record.

Chart 1-1 lists and describes the new disposition reason codes being added to e-IWO for use in Acknowledgment Records.

CHART 1-1: NEW DISPOSITION REASON CODES		
Disposition Reason	Value	Description
Employee is in a suspense status	S	If an employer receives an IWO and the employee is currently not employed, e.g., working for a temporary employment agency but currently not on a job/assignment, on a medical leave or suspended, the employer should insert an 'S' in the Disposition Reason Code field (positions 156-158). Note: The 'S' can be used whether the employer accepts or rejects an IWO.
Name mismatch	B	If an employer receives an IWO and the SSN matches a person employed by the employer, but the name is different, the employer can insert a 'B' in the Disposition Reason Code field (positions 156-158). Note: The 'B' can be used whether the employer accepts or rejects an IWO.
Incorrect Federal Employer Identification Number (FEIN) received	W	If the IWO received has the incorrect FEIN associated with the employee and the employer wants to provide the correct FEIN, the employer can insert a 'W' in the Disposition Reason Code field (positions 156-158). When a 'W' is in the Disposition Reason Code field, the correct FEIN must be entered in the Correct FEIN field (positions 539-547). Note: The 'W' can be used whether an employer accepts or rejects an IWO.
IWO received from multiple states	M	If an employer receives an IWO and determines it already has the same IWO in place from another state, e.g., same NCP/CP/Child(ren), obligation amount(s), etc., the employer can insert an 'M' in the Disposition Reason Code field (positions 156-158). When an 'M' is in the Disposition Reason Code field, a valid two-digit state code must be entered in the Multi IWO State Code field, (positions 548-549). Note: The M can only be used when the employer rejects an IWO for the condition just described.

1.4 Impact on States

States must accept the new disposition reason codes that are supplied by an employer. The state code and FEIN will be returned only in instances where noted and will be stored at the end of the record in available filler space.

1.5 Record Specifications

See Appendix A, “Record Layout Changes,” Chart A-1, “e-IWO Acknowledgment Record.”

2. REVISED IWO FORM (OCSE REF #3224)

2.1 Summary of Changes

The current Office of Management and Budget (OMB) approval for the federal IWO form has expired. Minor modifications to the form are planned in response to comments by states, the judiciary and employers. The e-IWO is being modified to incorporate the revisions to the IWO form for the PDF orders generated by the e-IWO application. States are responsible for making the necessary changes to the paper form they generate when the final form is approved.

2.2 Background

The current IWO form expired on 10/31/10.

2.3 Description of Changes

The newly revised IWO form has no major changes to the layout. The form was modified for clarity and consistency.

2.4 Impact on States

There will be no impact on the interface to the e-IWO Portal (Portal). The Portal will generate the new form as part of its processing and will send it to employers.

2.5 Specifications

There are no record specifications changes.

A. RECORD LAYOUT CHANGES

Chart A-1 describes the data elements that are changed.

Note: [Opening and closing brackets] surrounding text signify changed material.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
Document Code	1-3	3	A/N	Required This field contains a code that indicates that the acknowledgement record follows. The value must be 'ACK.'
Document Action Code	4-6	3	A/N	Required This field contains a code that indicates the type of document. The valid values are: AMD – Amended. The value input by the state, tribe or territory in the Document Action Code field (pos. 7-9 in the e-IWO Detail Record). EMP – Action initiated by an employer. For example, if the NCP is no longer employed, 'EMP' is in this field and a value of 'T' is in the Record Disposition Status Code (pos. 154-155). If an employer is notifying a state, tribe or territory about a pending lump-sum payment, it inputs 'EMP' and places an 'L' in the Record Disposition Status Code (pos. 154-155). LUM – Lump Sum. This value is input by the state, tribe or territory in the Document Action Code field (positions 7-9 in the e-IWO Detail Record). ORG – Original. This value is input by the state, tribe or territory in the Document Action Code field (pos. 7-9 in the e-IWO Detail Record). TRM – Termination. This value is input by the state, tribe or territory in the Document Action Code field (pos. 7-9 in the e-IWO Detail Record).
Case Identifier	7-21	15	A/N	Required This field contains a case identifier, which is assigned by a state to uniquely identify each IV-D case in the state. This is the case identifier input by the state in positions 88-102 of the e-IWO Detail Record.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
EIN Text	22-30	9	N	Required This field contains the employer/withholder's FEIN.
Employee Last Name	31-50	20	A/N	Required This field contains the obligor's last name. It contains the letters A-Z or spaces. No special characters except periods, hyphens, apostrophes and embedded spaces are allowed. The first character must not be a space.
Employee First Name	51-65	15	A/N	Required This field contains the obligor's first name. It contains the letters A-Z or spaces. No special characters except periods, hyphens, apostrophes and embedded spaces are allowed. The first character must not be a space.
Employee Middle Name	66-80	15	A/N	Optional This field contains the obligor's middle name or initial. It contains the letters A-Z or spaces. No special characters except periods, hyphens, apostrophes and embedded spaces are allowed. The first character must not be a space.
Employee Name Suffix	81-84	4	A/N	Optional This field contains the obligor's name suffix.
Employee SSN	85-93	9	N	Required This field contains the obligor's Social Security number (SSN).
Document Tracking Number	94-123	30	A/N	Required This field contains an identifier, which is assigned by the entity that is sending the document, that uniquely identifies the document. This is the document tracking number as input by the state in position 1548-1577 of the e-IWO Detail Record.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
Order Identifier	124-153	30	A/N	Optional This field contains the order identifier, which is a unique identifier that is associated with a specific child support obligation within a case, as input by the state in position 1578-1607 of the e-IWO Detail Record.
Record Disposition Status Code	154-155	2	A/N	Required This field contains a code that indicates whether a record was accepted or rejected by the employer. The valid values are: A – Record accepted L – Lump sum R – Record rejected T – Termination

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
[Disposition] Reason Code	156-158	3	A/N	<p>Conditionally Required This field contains the reason that an e-IWO record is being accepted or rejected by an employer.</p> <p>If the value in the Record Disposition Status Code field is an 'R,' a reason code is required. The rejected values are: [B – Name mismatch] D – Duplicate IWO [M – IWO received from multiple states] N – NCP is no longer with the employer O – Other reason [S – Employee is in a suspense status] U – NCP is not known to the employer [W – Incorrect FEIN received] X – Employer could not electronically process this record Z – Termination cannot be processed; there is no current IWO in place [If the value in the Record Disposition Status Code field equals 'A', the following reasons can be returned. The valid values allowed for an accepted order are: B – Name mismatch S – Employee is in a suspense status W – Incorrect FEIN received]</p>
Filler	159	1	A/N	<p>Optional This field contains spaces, and is reserved for future use.</p>
Termination Date	160-167	8	A/N	<p>Optional This field contains the date that an employee left, or was terminated by, an employer. It must contain a valid date in CCYYMMDD format.</p> <ul style="list-style-type: none"> • If not applicable, fill this field with spaces.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
NCP Last Known Address Line 1 Text	168-192	25	A/N	Optional This field contains line 1 of the NCP's last known address.
NCP Last Known Address Line 2 Text	193-217	25	A/N	Optional This field contains line 2 of the NCP's last known address.
NCP Last Known Address City Name	218-239	22	A/N	Optional This field contains the NCP's last known city.
NCP Last Known Address State Code	240-241	2	A	Optional This field contains the NCP's last known state code. It must contain a valid two-character alphabetic state or territory code.
NCP Last Known Address ZIP Code	242-246	5	N	Optional This field contains the NCP's last known five-digit ZIP Code.
NCP Last Known Address Ext ZIP Code	247-250	4	A/N	Optional This field contains the NCP's last known four-character ZIP Code extension.
Final Payment Made Date	251-258	8	A/N	Optional This field contains the date of the final payment sent to the state disbursement unit (SDU). It must contain a valid date in CCYYMMDD format. <ul style="list-style-type: none"> • If not applicable, fill this field with spaces.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
Final Payment Amount	259-269	11	N	<p>Required This field contains the amount of the final payment that was sent to the SDU. This only applies when an employee has been terminated, or has left his/her employer. This is the last payment/wages that were paid to an NCP who has left or been terminated. It must be:</p> <ul style="list-style-type: none"> • Numeric • Decimal assumed • Unsigned • Not rounded • Right justified • Zero filled to the left • Zero filled if it is N/A
New Employer Name	270-326	57	A/N	<p>Optional This field contains the name of the NCP's new employer.</p>
New Employer Address Line 1 Text	327-351	25	A/N	<p>Optional This field contains line 1 of the new employer's address.</p>
New Employer Address Line 2 Text	352-376	25	A/N	<p>Optional This field contains line 2 of the new employer's address.</p>
New Employer Address City Name	377-398	22	A/N	<p>Optional This field contains the new employer's city.</p>
New Employer State Code	399-400	2	A	<p>Optional This field contains the new employer's state code. It must contain a valid two-character alphabetic state or territory code.</p>
New Employer Address ZIP Code	401-405	5	N	<p>Optional This field contains the new employer's five-digit ZIP Code.</p>

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
New Employer Address Ext ZIP Code	406-409	4	A/N	Optional This field contains the new employer's four-character ZIP Code extension.
Payment Lump Sum Date	410-417	8	A/N	Optional This field contains the date that an employer anticipates that a lump-sum payment will be disbursed to an employee. It must contain a valid date in CCYYMMDD format. <ul style="list-style-type: none"> • If there is a dollar amount other than zero in the Payment Lump Sum Amount field (418-428), this field should be filled. • If the Document Action Code (pos. 7-9) is 'EMP' and the Record Disposition Status Code (pos. 154-155) is a 'T,' this field must be blank. • If unknown or not applicable, fill this field with spaces.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
Payment Lump Sum Amount	418-428	11	N	<p>Required This field contains an amount that the employer intends to issue as a lump-sum payment to the employee.</p> <ul style="list-style-type: none"> • If the Document Action Code (pos. 7-9) is 'EMP' and the Record Disposition Status Code (pos. 154-155) is an 'L,' the dollar amount in this field must be filled with an amount greater than \$0.00. • If the Document Action Code (pos. 7-9) is 'EMP' and the Record Disposition Status Code (pos. 154-155) is a 'T,' this field must be zero filled. <p>It must be:</p> <ul style="list-style-type: none"> • Numeric • Decimal assumed • Unsigned • Not rounded • Right justified • Zero filled to the left • Zero filled if it is N/A
Payment Lump Sum Type Text	429-463	35	A/N	<p>Optional This field contains the type of lump-sum payment that will be disbursed to an employee. Examples of a lump-sum payment include bonus, severance, commission, etc. Possible values are 'bonus,' 'severance' or some other unique identifier.</p> <ul style="list-style-type: none"> • If the Document Action Code (pos. 7-9) is 'EMP' and the Record Disposition Status Code (pos. 154-155) is an 'L,' this field must be filled. • If the Document Action Code (pos. 7-9) is 'EMP' and the Record Disposition Status Code (pos. 154-155) is a 'T,' this field must be blank.

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
NCP Last Known Phone Number	464-473	10	A/N	Optional This field contains the last known phone number for the NCP.
First Error Field Name	474-505	32	A/N	Optional FOR USE BY THE PORTAL ONLY: This field contains the name of the first field that did not pass the e-IWO edits. This is used by the Portal to return the first element that did not pass the Portal edits.
Second Error Field Name	506-537	32	A/N	Optional FOR USE BY THE PORTAL ONLY: This field contains the name of the second field that did not pass the e-IWO edits. This is used by the Portal to return the second element that did not pass the Portal edits.
Multiple Error Indicator	538	1	A/N	Optional FOR USE BY THE PORTAL ONLY: This field contains an indicator that shows that a record has more than two errors. The valid values are: T – True F – False • If more than two errors exist in the record, this field is set to ‘T.’ • If less than two errors exist, this field is set to ‘F.’
[Correct FEIN	539-547	9	N	Conditionally Required. This field contains the actual FEIN under which the employee is working. If the disposition reason code is a ‘W,’ this field is required.]

CHART A-1: e-IWO ACKNOWLEDGEMENT RECORD				
OMB Control No: 0970-0154 Expiration Date: 10/31/2010				
Field Name	Location	Length	A/N	Comments
[Multi IWO State Code	548-549	2	A	<p>Conditionally Required. This field contains the state code for instances in which an employer already has an IWO in place for the employee, and the IWO just received is a duplicate.</p> <ul style="list-style-type: none"> • If the disposition reason code is an ‘M,’ this field is required.]
[Filler	550-573	24	A/N	<p>Optional This field contains spaces and is reserved for future use.]</p>