MASS CLAIMS
Online Program User Guide

Introduction

The Mass Claims online program streamlines the unemployment insurance claims process for employers facing permanent or temporary layoffs.

Note

To process mass claims requests, employers must sign up for an Employer Benefits Services (EBS) account. To learn more about Employer Benefits Services and to learn how to sign up for an Employer Benefits Services account, see the **Administrator Duties** user guide.

Mass Claims Information

After logging in to EBS, select the **Mass Claims** tab.

The **Mass Claims Information** page provides user information, an overview of the Mass Claims Program, and instructions for how to submit a mass claim.

The Mass Claims Program gives employers the ability to submit layoff information as early as 30 days before the layoff occurs, start their employees' unemployment claims, report affected employees' final week of earnings, and report severance pay or wages in lieu of notice of layoff.

There are two ways to start a new mass claim:

- Select **New Mass Claim** from **Quick Links**
- Select **Start a New Mass Claim** at the end of **How to Submit a Mass Claim**

TIP: Before starting a new mass claim, it is a good idea to have the following information available: details about the upcoming layoff; employer contact person name, phone and fax numbers, and email address.

Getting Started

The **Mass Claims: Getting Started** page requires employer mailing information and contact person information. It is important that all required fields are completed. A red asterisk appears next to all required fields. If any required fields are left blank, error alerts will appear.

Employer Information

Employer address information defaults to the United States.

Use the **Select Address** drop-down to display all addresses registered with the Texas Workforce Commission (TWC). TWC recommends that the official employer address be used.

Once the chosen address is selected, use the **Select** button to populate the Employer Information name and address fields.

All fields can be also entered manually.

Contact Information

The contact person must be an employer representative with signature authority.

TIP: It is a good idea to complete all important and relevant fields even if they're not required.

Address Verification

The **Mass Claims: Address Verification** page shows the address as it was entered and the same address formatted to US Postal Service address standards. Either address can be selected.

Select **Save and Continue**.

TIP: It is a good idea to use the US Postal Service standardized address.

Type of Layoff

The **Mass Claims: Type of Layoff** page shows the Layoff ID and the City where the layoff is occurring. The Layoff ID is a unique number that is used for making an inquiry about a mass claim and when performing a search for a mass claim on the **Mass Claims Search** page. The Layoff ID and mass claims searches will be covered in more detail later in this user guide.

The **Mass Claims: Type of Layoff** page is where the type of layoff is also selected and information about the layoff is provided.

Select the type of layoff, answer all required questions, and complete all required fields then select **Save and Continue**.

If the layoff is permanent and there is no additional pay, the Mass Claims Online Program proceeds to the **Agreement**. If the layoff is temporary or permanent with additional pay, more information is required.

Permanent Layoff with Additional Pay

If the layoff is permanent with additional pay, the **Mass Claims: Layoff Details** page for permanent layoff displays.

This page requests information regarding additional payment other than paid time-off or wages earned, e.g., wages instead of advance notice of the layoff, severance pay, pay in exchange for signed general release, and any other type of separation pay.

Complete all required information and answer all required questions then select **Save and Continue**.

Temporary Layoff

If the layoff is temporary, the **Mass Claims: Layoff Details** page for temporary layoff displays.

Complete the required information then select **Save and Continue**.

Agreement

Carefully read all of the terms in the **Mass Claims: Agreement**.

The time frame for submitting a mass claim is between 30 and five days before the layoff date. The deadline for submitting and/or editing a mass layoff request is 5 p.m. the day prior to the layoff.

If any required information is not submitted or submitted after the deadline, the mass claim cannot be processed. **Click here to contact the Mass Claim coordinator for assistance**.

Contact information for the Mass Claim coordinator and TWC is provided at the end of this user guide.

Select the **box** to confirm that the agreement has been read and accepted then select **Save and Continue**.

Permanent Layoff and Temporary Layoff continued ...

If the layoff is permanent or temporary, the Mass Claims online program proceeds to the **Employee List** page.

Permanent Layoff with Additional Pay continued ...

If the layoff is permanent with additional pay, the request is pending. The Mass Claim coordinator reviews the request and contacts the employer contact person by phone within two business days. The Employee List cannot be uploaded until approved by the Mass Claim Coordinator.

Employee List

Employers are encouraged to download and read the **Mass Claims Employee List File Upload instructions** before uploading the employee list or adding each employee one at a time by selecting **Add** in the **Employee List** section.

The Employee List template is a Comma-separated Values (CSV) file.

The template contains fields pertaining to employees' Social Security Numbers (SSN), names and addresses, demographics, education, veteran status, and employment.
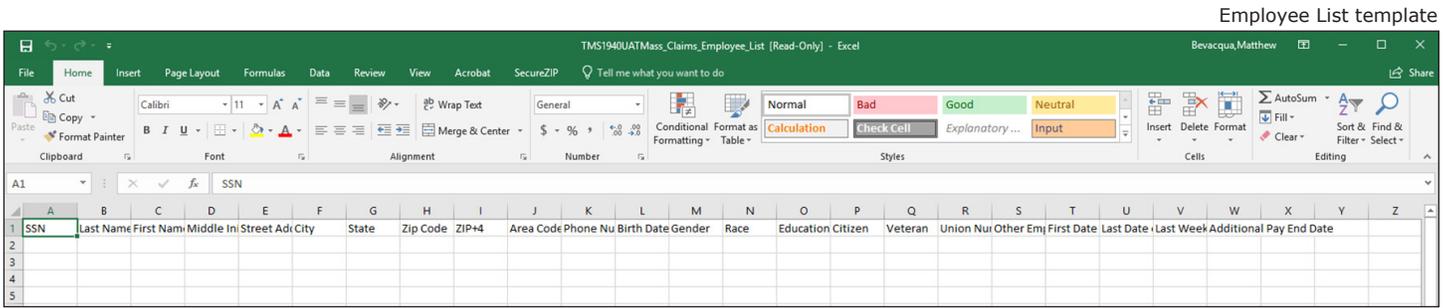
Employee List Instructions

The information on the following pages provide detailed instructions for how each field on the Employee List template is to be completed.

SSN	Required	9 numeric characters only. Do not include dashes or special characters. If the SSN starts with a zero, place a single quotation mark (') at the beginning and end of the number.	Examples: 999999999 '012345678'
Last Name	Required	20 upper and lowercase alpha characters only.	Example: Doe
First Name	Required	12 upper and lowercase alpha characters only.	Example: John
Middle Initial	Not required	1 upper and lowercase alpha character only.	Example: E
Street Address	Required	35 upper and lowercase alphanumeric characters only.	Example: 9999 Main Street
City	Required	20 upper and lowercase characters only.	Example: Austin

State	Required	2 upper and lowercase characters only.	Example: TX
Zip	Required	5 numeric characters only.	Examples: 78711
		If the Zip code starts with a zero, place a single quotation mark (') at the beginning and end of the code.	'01234'
Zip+4	Not required	9 numeric characters only.	Example: 1234
		Leave blank if unknown. Do not include dashes or special characters.	'0123'
		If the Zip+4 starts with a zero, place a single quotation mark(') at the beginning and end of the extension.	
Area Code	Not required	3 numeric characters only.	Example: 512
Phone Number	Not required	7 numeric characters only.	Examples: 1234567
		Do not include dashes. Enter zeros if the information is unknown or unavailable.	'0123456'
		If the phone number starts with a zero, place a single quotation mark (') at the beginning and end of the number.	
Birth Date	Required	10 numeric characters only.	Example: 02/02/2002
		Format in MM/DD/YYYY. Include slashes only.	
Gender	Required	1 alpha character code. Valid values: M - male F - female	Example: M

Race	Not required	1 numeric code indicating the employee's race. Valid values: 1 - white not Hispanic 2 - black not Hispanic 3 - Hispanic 4 - American Indian, Alaskan Native 5 - Asian 6 - information not available 7 - native Hawaiian or Pacific Islander	Examples: 2 (black) 3 (Hispanic) 5 (Asian)
Education	Not required	3 digit numeric code indicating the employee's highest level of education. Valid values: 00 (did not complete 1st grade) 01-12 (1st to 12th grade) 13 (1 year of college) 14 (2 years of college) 15 (3 years of college) 16 (Bachelor's degree) 17 (Bachelor's degree +1) 18 (Master's degree) 19 (Doctoral degree PHD) Leave blank if unknown or unavailable.	Example: 16
Citizen	Required	1 alpha character code indicating whether or not the employee is a U.S. citizen. Valid values: Y - employee is a U.S. citizen N - employee is not a U.S. citizen	Example: Y
Veteran	Not required	1 alpha character code indicating whether or not the employee is a veteran. Valid values: Y - employee is a veteran N - employee is not a veteran Blank - no answer	Example: N

Union Member	Not required	1 alpha character code indicating whether or not the employee is a union member. Valid values: Y - employee is a union member N - employee is not a union member Blank - no answer	Example: N
Other Employment	Not required	1 alpha character code indicating whether or not the employee worked in another state. Valid values: Y - employee has worked in another state in the last 18 months N - employee has not worked in another state in the last 18 months Blank - no answer	Example: N
First Date of Employment	Not required	10 digit numeric code indicating the date of employment. The first date the employee physically worked. Format in MM/DD/YYYY. Include slashes.	Example: 01/01/2001
Last Date of Employment	Required	10 digit numeric code indicating when the employee was separated from the employer. The last actual date the employee physically worked. Format in MM/DD/YYYY. Include slashes.	Example: 01/01/2001

Last Week's Earnings	Not required	5 digit whole dollar amount for work and earnings during the first week of the layoff.	Example: 25612
		Do not include dollar signs or periods.	
		An unemployment claim begins on Sunday. The start date for an employee's claim depends on the last day worked.	
		If the last day worked was Tuesday or Wednesday, the claim will begin on the previous Sunday.	
		• Enter whole dollars only. Leave blank if no work was performed during the week.	
Additional Pay End Date	Required	10 digit numeric code. Include Slashes.	Example: 05/05/2005
		Enter the last date that the employee's additional pay covers if applicable.	
		Additional pay includes wages paid in lieu of advanced notice of the layoff or severance pay, and may cover a range of dates after employment, such as six weeks or three months.	
		Enter the date that the additional pay ends using MM/DD/YYYY format, e.g., 05/25/2019.	
		Enter the layoff date if the employee did not receive additional pay.	

Employee List continued ...

Complete the Employee List, check for errors, and save it as a CSV file.

To upload the Employee List:

- Select **Browse File** on the **Mass Claims: Employee List** page
- Find the saved CSV file and select it
- The CSV file to be uploaded will appear next to **File Name**
- Select **Upload**

Employees can be manually entered by selecting the **Add** button in the **Employee List** section. The information requested is the same as the information requested on the Employee List template.

Progress	**Mass Claims: Employee List**
Getting Started	**User Information**
Type of Layoff	Name: User ID:
Layoff Details	Email Address: Update E-mail Address
Agreement	Employer:
» Employee List	**Layoff Information**
Review and Submit	Layoff ID:
Confirmation	City of Layoff:

Layoff Information — Date of Layoff: August 24, 2019

Upload

Download the Employee List template ⧉ File
Please view the Mass Claims Employee List File Upload instructions to upload your Employee List for your Mass Claim. ⧉ File
Once you have uploaded your file and you receive a confirmation message, you cannot remove the file. If you need assistance, contact the Mass Claim coordinator by email at UI Mass Claims (ui.massclaims@twc.state.tx.us).

File Name: [Browse...]

[Upload]

Employee List

Add an Employee   [Add]

SSN	Name	Action
No results		

[Next] [Previous] [Cancel]

Employees on the uploaded CSV or those entered manually are listed in the **Employee List** section.

Actions

The actions available to employees listed on the Employee List are **View**, **Edit**, and **Remove**.

- **View** shows a summary of the employee information.
- **Editing** allows changes and corrections. Editing is available only up to 5 p.m. the day prior to the layoff.

  Editing is useful when an address or phone number needs to be changed.

Employee List

Add an Employee   [Add]

1-5 of 5

SSN	Name	Action
		View Edit Remove
		View Edit Remove
		View Edit Remove
		View Edit Remove
		View Edit Remove

[Next] [Previous] [Cancel]

- **Remove** navigates to the **Mass Claims: Employee Details** page.

  This **Mass Claims: Employee Details** page shows a summary of the employee information, a **Remove** button, and a **Return to Employee List** button.

  To complete the employee removal select **Remove**.

  Removing an employee will permanently remove the employee from the Mass Layoff claim. To cancel the removal of an employee, select **Return To Employee List**.

When finished uploading the Employee List or adding employees manually, select **Next** to proceed to **Review and Submit**.

Error Report

An error report is generated when any duplicated, missing, or invalid information is found on the uploaded Employee List.

If duplicated, missing, or invalid information is found on the Employee List, an error alert displays above the Layoff Information section on the **Mass Claims: Employee List** page. A link to the error report is provided.

The error report displays the row number the error occurs in, the SSN, last name, first name, and a description of the error.

See the error report example below.

To make corrections, upload only a list of the corrections; they will be added to the existing list on file with Mass Claims. Corrections can also be made by selecting **Add** in the **Employee List** section.

Error Report

If correcting the error on the Employee List does not resolve the problem, **click here to contact the Mass Claim Coordinator for assistance**.

Review and Submit

The **Mass Claims: Review and Submit** page displays all information pertaining to the mass claim.

Review the information in each section carefully.

If there are any errors, correct them by selecting **Edit** at the end of each section in which the errors are found.

Certify the mass claim by checking the box in the **Certification** section. The program will not allow the mass claim to be submitted until it's certified.

Select **Submit**.

Confirmation

The Mass Claims: Confirmation page confirms that the mass claim has been successfully submitted.

The page displays all information pertaining to the mass claim, including who read and accepted the agreement and submitted the mass claim.

- Select **Save as PDF** to convert the page to a PDF file that can be saved.

- Select **Printer Friendly** to print the page.

- Select **Agreement Letter** to view and print the agreement letter. The Agreement Letter contains the same information found on the **Mass Claims: Agreement** page.

- Select **Employer Handout** to view information about the mass claim. It is important that the handout is distributed to all employees and that each employee carefully reads it. The handout contains important information regarding the layoff, when to expect a claim packet, how to request benefits, and who to contact if there are questions or concerns.

  If the **Employer Handout** button does not display, **click here to contact the Mass Claim coordinator for assistance**.

- Select **Return to My Home** to return to the EBS user homepage.

- Select **Return to Mass Claims Information** at the bottom of the page to begin a new mass claim, search for mass claims, or view error reports.

Logoff	

Employer Benefit Services

Mass Claims

Progress
Getting Started
Type of Layoff
Layoff Details
Agreement
Employee List
Review and Submit
» Confirmation

Mass Claims: Confirmation

User Information

Name:	User ID:
Email Address:	Update E-mail Address
Employer:	

ⓘ Your Mass Claim has been submitted successfully.

To save this page for your records, select the "Save as PDF" button on this page.
To print this page for your records, select the "Printer Friendly" button on this page or use the printer icon on your browser's toolbar.
To save agreement for your records, select the "Agreement Letter" button on this page.
To save Employer Handout for your records, select the "Employer Handout" button on this page.

[Save as PDF] [Printer Friendly] [Agreement Letter] [Employer Handout] [Return to My Home]

Layoff Information

Layoff ID:	013938
City of Layoff:	DALLAS
Date of Layoff:	May 15, 2019

Employer Information

Account Number:	
Name:	
Additional Name:	(No response provided)
Care of Address:	(No response provided)
Attention:	(No response provided)
Mailing Address:	PO BOX 659
Contact Title:	DIRECTOR
Contact Name:	
Contact Phone Number:	
Cell Number:	(No response provided)
Fax Number:	(No response provided)
Email Address:	(No response provided)

Layoff Details

Type of Layoff:	Permanent
Last Date Employee Will Physically Work:	May 15, 2019
In What City Will The Layoff Occur?	
Type of Work Performed by Employer:	
The majority of employees on this Mass Claim would need to receive correspondence in :	English
If permanent, will the employees receive any additional payment other than paid time-off or wages earned?	No
Will employees receive any additional payment other than paid time-off or wages?	(Not applicable)
Was the payment given in exchange for a release of claim or as the result of a settlement agreement field as a complaint by the individual against the employer?	(Not applicable)
Was the release of claim or settlement agreement based on an alleged violation of the Civil Rights Act?	(Not applicable)
Was the release of claim or settlement agreement because of a claim or cause of action filed by the individual in connection with their employment?	(Not applicable)
Was the payment given in accordance with a negotiated, written contract or with a collective bargaining agreement already in effect before the work separation?	(Not applicable)
How did the company calculate the payment?	(Not applicable)
If other,explain how the payment was calculated:	(Not applicable)

Accepted and Agreed By

Name:	
Submission Time:	May 13, 2019 10:12 AM CT

Employee List

Total number of employees for this Mass Claims request:	1

Submitter Information

Name:	
Submission Time:	May 13, 2019 11:56 AM CT

Certification

I certify that I am authorized to submit this information on behalf of this employer and the information I give is true, accurate and complete.
Yes

[Return to Mass Claims Information]

Layoff ID and Mass Claims Search

Each mass claim is assigned a unique numerical Layoff ID.

The Layoff ID makes it easy to find a specific mass claim.

The **Mass Claims Search** page allows employers to search for a specific mass claim or all mass claims submitted by the employer within the last two years.

Mass Claims Search can only be initially accessed from **Quick Links** on the **Mass Claims Information** page.

Searches can be made with the **Layoff ID** or with **Layoff From Date**, **Layoff To Date**, **City of Layoff**, and **Status**.

Search results display the Layoff ID, the layoff date, the city of layoff, the type of layoff, the number of employees affected by the layoff, the status, and the actions that can be taken on the mass claim.

If the mass claim has been processed, **View** is the only action available.

Pending or incomplete mass claims can be viewed, edited, or voided.

Once a mass claim is voided, it is removed from the system and cannot be retrieved.

For a complete list of mass claim status definitions, see **Mass Claim Status Definitions** on the following page.

Mass Claim Status Definitions

- **Pending**

  Employer has entered all required documentation and the request is pending processing.

- **Processed with Error**

  A mass claim that has been processed except for the entries that appear on the report. These employees must file unemployment claims on their own.

- **Incomplete**

  The employer has started the mass claim request but has not completed the process. May have missing documents or information. Edits are allowed.

- **Processed**

  The mass claims have been set up in TWC's benefits system and are pending completion by the claimant. No further edits will be allowed, and employers must contact the Mass Claim Coordinator at **ui.massclaims@twc.texas.gov** for further assistance.
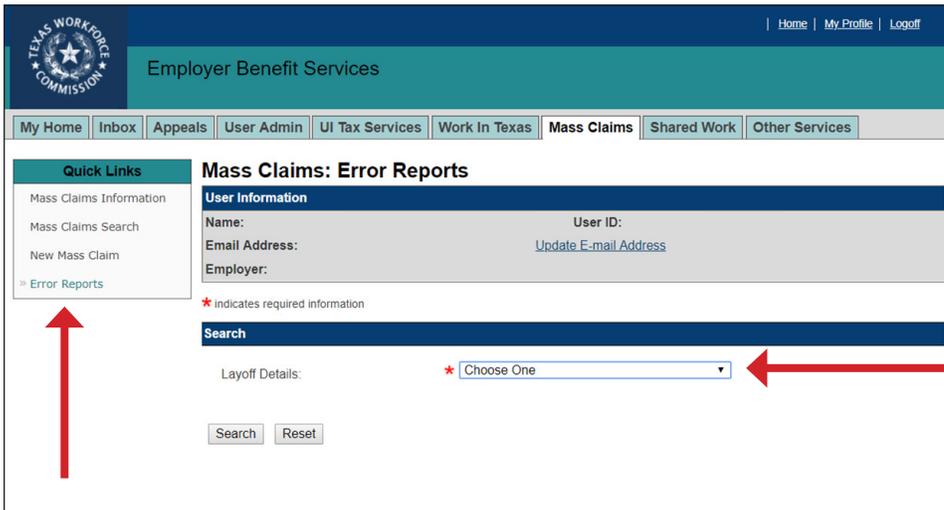
- **Canceled**

  When an employer voids a mass claim request in the Action field, the mass claim request will appear as canceled in the Status field.
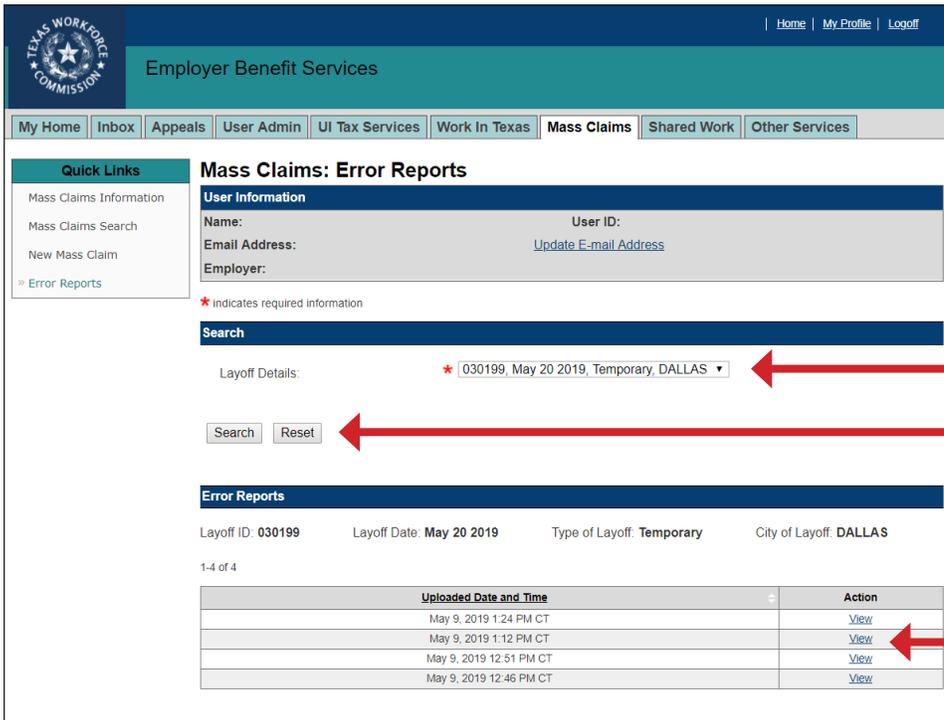
Mass Claims: Error Report

To access an archive of all error reports, select the **Mass Claims** tab on the **EBS homepage** then select **Error Reports** from **Quick Links**.

Select the layoff from the **Layoff Details** drop-down menu then select **Search**.

Find the error report under the **Error Reports** section then select **View** to view the report.

Mass Claim Coordinator Contact

Phone: 512-340-4557
888-741-0446 Toll-Free

Fax: 512-936-3250

Email: **ui.massclaims@twc.texas.gov**

Address: Texas Workforce Commission
Attn: Mass Layoff Coordinator
P.O. Box 149137
Austin, TX 78714-9137