

Ohio New Hire



Reporting Program

OHIO NEW HIRE REPORTING PROGRAM

Cleveland Operations Center

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November 1, 1998

Dear Ohio Employer,

We would like to extend our thanks for your cooperation in making the Ohio New Hire Reporting Program a success.

Since the success of this program depends on accurate, complete and timely reports we are sending out this letter as an addendum to the original information packets mailed out to you on Oct. 1, 1997. That packet contained additional reporting options, answers to frequently asked questions and explained noncompliance issues. Please be advised that this letter contains New Hire Updates that may be critical to an employer's successful submission.

Electronic Submission Reporting:

Many Ohio employers who have switched from hardcopy forms (W-4's and 7048's) to submitting new hire reports electronically have discovered electronic reporting is less time-consuming and less costly. The Cleveland Operations Center would like to encourage all Ohio employers who are currently using manual forms or hardcopy reports to consider the benefits of electronic reporting. Benefits to employers who have switched to electronic reporting include:

- Eliminates the need to print monthly reports or collect and copy paper forms.
- Reduced postage costs.
- Improved reporting accuracy.

Employers who are currently reporting new hires through the use of printed lists from their automated personnel systems are excellent candidates for switching to electronic reporting. Since the required data is already in an electronic format, its an easy process to extract the same data that goes on the printed list and write it to a magnetic tape or diskette instead of printing a report

Employers who wish to send new hire reports electronically may submit files in one of the following electronic mediums: E-mail, magnetic tape or 3 1/2 inch diskette. Formatting requirements are included within this mailing. **Please note on the Electronic Reporting Specifications that the new record length is 815 and Block Size is 27710. Please include company name and contact person on all media.** Staff at the Cleveland Operations Center will be happy to discuss the option of electronic reporting with a representative from your company. Please contact the Technical Support staff at the operations center at 440-808-8745.

On-line Web Site: Employers who access the Web are now able to input new hire records directly through our web site. A data entry screen is available to facilitate timely and accurate reporting. This is accomplished by visiting our web site at <http://www.new-hires.com>. The data entry screen can be found in the Selection Box by choosing Report New Hires. Please be advised that this entry screen contains verification scripts which may not work unless you are using Internet Explorer or Netscape Navigator / Communicator.

New Hire Software: For those employers, who do not have access to the Internet, we are developing a product that can be installed on any Windows 95 computer that will facilitate data entry and fully compliant electronic submissions that can be sent to the operations center. This tool will be helpful in

reducing employer costs and in creating accurate and timely reports. This tool will be available early 1999.

Any employer requesting further information on this forthcoming feature, or specifications for electronic submission of new hire information can contact our Technical Support staff at **440-808-8745**.

Hard Copy Reports:

Please be advised that all hard copy and electronic reports require the employee's **date of birth and date of hire**. If these required pieces of information are missing these documents or reports will be rejected. When a submission is returned for missing or incomplete required information it is incumbent upon the employer to return the corrected form within 10 business days. Failure to do so may result in a non-compliance fine.

DHS 7048 Form: Please use the 7048 form provided with this addendum in lieu of that included in the mailing to report individual employees. Note that the Federal Employer Identification Number (9-digit field) is required with all submissions, along with Employee's Social Security Number, Employee's Full-address (Street, City, State, Zip Code), **Date of Hire, Date of Birth** and Employer Name, Employer Full-address (Street, City, State, Zip Code).

Federal W-4 Form: An employer can elect to utilize a completed Federal W-4 Form to report individual employees. Note that the Federal Employer Identification Number (9-digit field) is required with all submissions, along with Employee's Social Security Number, Employee's Full-address (Street, City, State, Zip Code), **Date of Hire, Date of Birth** and Employer Name, Employer Full-address (Street, City, State, Zip Code).

Fax Transmission: In order to better serve employers, the Cleveland Operations Center has expanded its capacity of fax lines so that a busy signal is never encountered. Accordingly, we have acquired a new Fax number that can be used immediately for transmitting hardcopy forms via fax: **440-808-8021**. Please be advised that on Dec. 15th, 1998 the old fax number will no longer exist. If when calling, your fax machine does not transmit to the operations center immediately do not panic. We have installed nine phone lines that are connected to a series of network computers; these can take several rings prior to answering.

Other Clarifications:

- *Use of the Form W-4:* The W-4 form provided in the initial mailing can be copied by Ohio employers for submission of new hire reports, or employers can make photocopies of the 1998 Form W-4. After the employee completes his or her information (lines 1-7), **add the employer's name and address (line 8) and FEIN (line 10)**. Also, it is statutorily mandated to include at the bottom, the employee's **Date of Hire and Date of Birth**. Additional copies of W-4 forms can be obtained by contacting the U.S. Internal Revenue Service at (800) 829-3676
- *Submission of quarterly wage reports:* Please be advised that submitting quarterly wage reports to the Ohio Bureau of Employment Security does NOT satisfy the obligation to submit timely new hire reports; reports must be submitted within 20 days of the employee's first day on the job.
- *Employers using payroll processing services:* Some payroll processing firms automatically report newly hired employees. If you use a payroll processing service, ask if they send reports on behalf of your organization. Please be advised that when utilizing a payroll processing firm to submit new hires erroneous data submitted on behalf of your company will be rejected and returned to the originating source. If the payroll processing firm is submitting data in a format other than electronic, all new hires on that submission will be rejected. Please consult your payroll processing firm to ensure they submit in a timely and properly formatted manner.

- *Placement of employees by temporary employment agencies:* If your agency is paying wages to the individual, you need only submit a new hire report once, provided there is no break in service from your agency which would require a new W-4 form.
- *Definition of "date of hire":* The "date of hire" is considered to be the first day services are performed for wages by an individual.
- *Reconciliation Reports:* Currently we are processing quarterly reconciliation reports to ensure employer compliance. Please be advised that fines can be levied against employers who fail to report. A \$24.50 per incident fine may apply to any employer who fails to report new hires. A \$499.50 fine may be assessed to any employer who is found to be non-compliant as a result of collusion. If an employee is listed on the quarterly wage report and not the new hire database that individual is marked as not reported. Should your company receive such a report employers have several options.
 1. If you are a multi-state employer reporting to another state. Please send a copy of the OCSE confirmation and a brief memo on company letterhead to the New Hire Operations Center. This memo should briefly explain that you are a multi-state employer and which state you have chosen to report.
 2. If the employees on the listing have been reported or do not belong to your company, please enclose a letter, on company letterhead, identifying these individuals as reported and approximate dates reported.
 3. If the employees on the listing have not been reported DO NOT SUBMIT THIS INFORMATION. Any employee information that is over 60 days old will not be processed. Please include a letter explaining the reason for non-compliance, report any new hire for the last 50 days and continue to report within the prescribed time frames. Your non-compliance case will be reviewed by the state and you will be notified if fines will be assessed.
 4. Failure to respond to this letter will be construed as negligence on behalf of the employer and will be considered for penalty assessment.
- *Reporting every month:* Employers are only required to report when they have one or more new hires or re-hires in the past month. If the employer did not have any new hires or re-hires in the past month, there is nothing to report. If an employer hired a new employee or re-hired an old employee during the past month, the employer should report that activity once and only once. Employers should not submit reports both electronically and on hardcopy for the same employee or submit their payroll registers that include both old and new hires.

Included in this mailer is The Employer Guide to Health Insurance Orders. This brochure defines how insurance orders will be sent to you, the employer, from your local Child Support Enforcement Agency. Once again, we would like to thank you for your continued support and assistance in the success of this project.

Sincerely,



Barbara L. Saunders, Acting Deputy Director
Office of Child Support

ELECTRONIC / MULTI-STATE REPORTING SPECIFICATIONS

This page presents the submission requirements for employers, multi-state employers and payroll processing firms who submit forms electronically. It also delineates the minimum data required for submission requirements (highlighted in bold with asterisk). Employers who have question about reporting electronically should contact our Technical Support Staff at the New Hire Operations Center (800) 208-8887

3 1/2" Diskette: The diskette must conform to the format specification below. The diskette must be non-compressed and in ASCII fixed field length format. **DO NOT ENCLOSE FIELDS IN QUOTES OR USE COMMA DELIMITERS.** An external label must be affixed to the diskette indicating the employer's name, federal EIN number, contact name and phone number.

E-mail: The email must conform to the format specifications below. The file attachment should be compressed using a standard Win 95 compatible compression utility. All files must be in an ASCII fixed field format and those utilizing current compression technology **MUST BE A SELF-EXTRACTING EXECUTIBLE. DO NOT ENCLOSE FIELDS IN QUOTES OR USE COMMA DELIMITERS.** All e-mail correspondence and submissions must be sent to onhrp@new-hires.com. Please include the employer name, federal EIN and contact information within the email itself.

Magnetic Media: The tape must conform to specifications for Header and Data Record layouts below. Magnetic Tapes can be 9 track 1,600/6250 bpi or 3480/3490 non-compressed, IBM standard label, EBCDIC. Block size must be 27710. Tapes must contain one header record per physical file. An external label indicating the employer's name, federal EIN, and contact information is required on every submission.

Header Record

Logical Record Length = 815

Header record	Type	Length	St Position	End Position	Optional/Required	Default values
Record Type*	Character	1	1	1	Required	1=Header record
Vendor Process Date*	Numeric	8	2	9	Required	CCYYMMDD
Data Record Count*	Numeric	9	10	18	Required	Excludes Header Record
Filler*	Character	797	19	815	Required	Fill With Spaces

Data Record Layout

Logical Record Length = 815

Header record	Type	Length	St Position	End Position	Optional/Required	Default values
Record Type*	Character	1	1	1	Required	= 2
Employee Social Security Number*	Number	9	2	10	Required	As Reported by Employee
Employee's First Name*	Character	16	11	26	Required	
Employee's Middle Name	Character	16	27	42	Optional	
Employee's Last Name*	Character	30	43	72	Required	
Employee's Address Line 1*	Character	40	73	112	Required	
Employee's Address Line 2	Character	40	113	152	Optional	
Employee's Address Line 3	Character	40	153	192	Optional	
Employee's City*	Character	25	193	217	Required	
Employee's State*	Character	2	219	220	Required	Valid 2 letter state code (e.g., Ohio=OH)
Employee's Zip Code 1*	Numeric	5	220	224	Required	All Zero's will be rejected
Employee's Zip Code 2	Numeric	4	225	228	Optional	
Employee's Address: Foreign Country Code	Character	2	229	230	Optional	
Employee's Address: Foreign Country Name	Character	25	231	255	Optional	
Employee's Address: Foreign Zip Code	Character	15	256	270	Optional	Left Justify
Employee's Date of Birth*	Numeric	8	271	278	Required	CCYYMMDD
Employee's Date of Hire*	Numeric	8	279	286	Required	CCYYMMDD
Employee's State of Hire*	Character	2	287	288	Required	Valid 2 letter state code (e.g., Ohio=OH)
Employee Gender	Character	1	289	289	Optional	F=Female, M=Male, U=Unknown

Employee Left Work	Character	1	290	290	290	Optional	Y=Yes, N=No, U=Unknown All zeros will be rejected
Employer Federal EIN*	Numeric	9	291	299	299	Required	Y=Yes, N=No, U=Unknown
Employer's Income tax Credit	Character	1	300	300	300	Optional	Y=Yes, N=No, U=Unknown
Employer's State EIN	Number	12	301	312	312	Optional	
Employer's Name*	Character	45	313	357	357	Required	
Employer's Address Line 1*	Character	40	358	397	397	Required	
Employer's Address Line 2	Character	40	398	437	437	Optional	
Employer's Address Line 3	Character	40	438	477	477	Optional	
Employer's City*	Character	25	478	502	502	Required	
Employer's State*	Character	2	503	504	504	Required	Valid 2 letter state code (e.g., Ohio=OH)
Employer's Zip Code 1*	Numeric	5	505	509	509	Required	
Employer's Zip Code 2	Numeric	4	510	513	513	Optional	
Employer's Add: Foreign Country Code	Character	2	514	515	515	Optional	
Employer's Add: Foreign Country Name	Character	25	516	540	540	Optional	
Employer's Add: Foreign Zip Code	Character	15	541	555	555	Optional	
Employer's Optional Address - Line 1	Character	40	556	595	595	Optional	
Employer's Optional Address - Line 2	Character	40	596	635	635	Optional	
Employer's Optional Address - Line 3	Character	40	636	675	675	Optional	
Employer's Optional Address - City	Character	25	676	700	700	Optional	
Employer's Optional Address - State	Character	2	701	702	702	Optional	
Employer's Optional Address - Zip Code 1	Numeric	5	703	707	707	Optional	
Employer's Optional Address - Zip Code 2	Numeric	4	708	711	711	Optional	
Employer's Optional Add: Foreign Country Code	Character	2	712	713	713	Optional	
Employer's Optional Add: Foreign Country Name	Character	15	714	738	738	Optional	
Employer's Optional Add: Foreign Country Zip	Character	25	739	753	753	Optional	
Filler*	Character	62	754	815	815	Required	Fill with spaces