APA-4
Revised 1/2018

CERTIFICATION OF EMERGENCY RULES
FILED WITH LEGISLATIVE SERVICES AGENCY
OTHNI LATHRAM, DIRECTOR

(Pursuant to Code of Alabama 1975, §41-22-5(b) and 41-22-6(c)(2) a. and b.)

I certify that the attached emergency (amendment, new rule, new chapter, repeal or adoption by reference) is a correct copy as promulgated and adopted on the 10th day of July 2020.

AGENCY NAME: **Alabama Department of Labor**

RULE NO. AND TITLE: **480-4-2-.19 ER Employer Responsibilities**

EFFECTIVE DATE OF RULE: **July 10, 2020**

EXPIRATION DATE (If less than 120 days): _____

NATURE OF EMERGENCY: **In order for the Alabama Department of Labor to receive Allotment I of Emergency Administrative Grants associated with the Families First Coronavirus Response Act, Division D Emergency Unemployment Insurance Stabilization and Access Act of 2020, it must require all employers to provide notification of the availability of Unemployment Compensation benefits to employees at the time of their separation from employment. This emergency rule would make Alabama compliant with that federal directive. (See UIPL's 13-20 & Change 1)**

STATUTORY AUTHORITY: Ala. Code §§25-2-7, 25-2-8, 25-4-111

SUBJECT OF RULE TO BE ADOPTED ON PERMANENT BASIS X YES ____ NO

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REC'D & FILED
JUL 10 2020
LEGISLATIVE AGENCY

FILING DATE
(For APA Use Only)

ALABAMA DEPARTMENT OF LABOR
UNEMPLOYMENT COMPENSATION
ADMINISTRATIVE CODE

CHAPTER 480-4-2 TAX

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480-4-2-.19 ER

Employer Responsibilities

(1) Posting of Notices and Notifications. Every employer (including every employing unit which has, with the approval of the Secretary ~~Director~~, become an employer by election under the provisions of the law) shall provide notification of the potential availability of unemployment benefits to individual employees at the time of their separation from employment. Notices to the employees may be made by letter, email, text message, or flyer, and must contain the following information:

Employer Notification to Employees of the Availability of Unemployment Compensation

Unemployment Insurance (UI) benefits are available to workers who are unemployed and who meet the requirements of Alabama UI eligibility laws. You may file a UI claim in the first week that employment stops or work hours are reduced.

For assistance or more information about filing a UI claim visit www.labor.alabama.gov

You will need to provide the Alabama Department of Labor's UI division with the following information in order for the state to process your claim:

1.Your full legal name;
2.Your Social Security Number; and
3.Your authorization to work (if you are not a US Citizen or resident).

To file a UI claim by phone, call: 1-866-234-5382
To file a UI claim online, visit:

https://continuedclaims.labor.alabama.gov

If you have questions about the status of your UI claim, you can call the Alabama Department of Labor at 1-800-361-4524 or check your claim status online at

https://uiclaimstracker.labor.alabama.gov

Every employer shall additionally post and maintain printed notices to its ~~his~~ workers informing them that it ~~he~~ is liable for contributions under the Alabama Unemployment Compensation Law and has been so registered by the Secretary ~~Director~~. Such notices shall be furnished by the Secretary ~~Director~~ in such numbers as he/she may determine to be necessary and shall be posted and maintained in conspicuous places near the actual location where the workers' services are performed. Such notices shall also include information as to the workers' rights to benefits and instructions as to the procedure for registering for work and for filing claims for benefits. No such notice shall be posted or maintained by any person or employing unit to whom an unemployment compensation account number has not been assigned by the Secretary ~~Director~~ or who has ceased to be an employer.

(2) Separation Information.

(a) When a former employee files a new or additional claim for unemployment compensation, the Alabama Unemployment Compensation Agency notifies the last bona fide employer and requests information regarding the reason for the claimant being separated ~~terminated~~. This employer must return the Form BEN 241, Request for Separation Information, ~~to the appropriate local office no later than six (6) working days after the initial mailing date~~ by no later than the response due date

listed on the form. ~~(the required return date is printed on the form with the address of the local office).~~ Failure of the employer to provide this information may be construed to mean that the separation was under conditions that would not be disqualifying. Failure of the employer to provide this information may also deny relief of charges to the employer's experience rating for an overpayment that is caused by the separating employer's failure to respond timely or adequately.

1. An employer may request a separate mailing address for the purpose of receiving requests for separation information and other correspondence regarding a claim for unemployment benefits. This address is in addition to the address to which the quarterly tax reports are to be mailed. A request for a separate mailing address shall be in writing and signed by the employer or it's ~~his~~ authorized representative. The name and address of each separate unit must be included. All requests will be subject to approval by the Secretary ~~Director~~ or his/her authorized representative. If approved, proper reporting instructions will be mailed to the employer. The Secretary ~~Director~~ may for good cause and after proper notice to the employer revoke the approval for separate mailing addresses.

2. The date of mailing, as disclosed by the official U.S. Postal Service postmark, shall be the date that the information was furnished. If the information is received by any method other than the U.S. Mail, the date of actual receipt shall govern.

(b) Notice of discharge for a dishonest or criminal act committed in connection with work, an act of sabotage or an act endangering the safety of others may be furnished by the employer to the Alabama Unemployment Compensation Agency immediately following such discharge. This voluntary notice should be in writing and should include the worker's name, social security number, date of separation and circumstances resulting in such discharge. The failure to provide advance notice of such discharge in no way precludes the Secretary ~~Director~~ from acting upon such information furnished timely in response to the first Agency notice to the employer of a claim.

1. Once a claim is filed, the last separating employer is furnished a Notice of Claim and Request for Separation Information, (Form Ben-241). Base period employers other than

the last separating employer are notified of the claim by a Notice of Potential Charge to Your Tax Rating Account (Form Ben-8A). Information furnished by the respective employers in response to these will be considered timely notice to the Secretary ~~Director~~ as required by Section 25-4-78(3)a, and acted upon accordingly, including monetary redetermination of the claim, provided such response is furnished to the Agency within the time specified on either form. (The required return date and local office address is printed on each Ben 241. Form Ben 8A must be returned to the Department of Labor ~~Industrial Relations~~, Unemployment Compensation Agency, 640 Mannix Street