Department of Health and Human Services Administration for Children and Families Office of Child Support Services

Agreement to Exchange Electronic Income Withholding Orders/Notices

By completing and providing the information on this form, the employer, company, or government agency agrees that:

The employer, company, or government agency shall have appropriate procedures in place to promptly report confirmed or suspected information security or privacy incidents, including, but not limited to, unauthorized use or disclosure of Personally Identifiable Information (PII) involving confidential child support information submitted through OCSS to your organization. As soon as reasonably practicable after discovery, but in no case later than one hour after discovery of the incident, the employer, company, or government agency shall report confirmed or suspected incidents to OCSS as specified in this paragraph. The requirement for the employer, company, or government agency to report confirmed or suspected incidents involving PII to OCSS is based on federal guidance/requirements from the Office of Management and Budget (OMB), Health and Human Services (HHS), the Federal Information Security Modernization Act of 2014 (FISMA), and the United States Computer Emergency Readiness Team (US-CERT).

Incidents must be reported via email to OCSS using the security mailbox address: ocsssecurity@acf.hhs.gov

The organization will electronically receive and respond to IWOs issued by states, tribes, or territories in the same manner as mailed notices within the required timeframes. Response timeframes and other instructions are available at: https://ocsp.acf.hhs.gov/irg/irgpdf.pdf? geoType=OGP&groupCode=EMP&addrType=EIW&addrClassType=E MP

The organization will not impersonate any individual, entity, or association; use false headers; or otherwise conceal or provide misleading information about their identity while receiving IWOs electronically.

The organization's representative completing this form is authorized to act on behalf of the employer and agrees to provide true, correct, current, and complete information about the entity identified in the profile form.

The organization will consider the electronic version of the IWO admissible as evidence in the same way as paper documents.

The organization will provide written notice to the federal Office of Child Support Services at least 30 days before it intends to stop accepting e-IWOs.

A third-party provider certifies that it has authorization to participate in e-IWO on behalf of their clients and will provide company names, FEINs, and related information to OCSS for the purpose of processing e-IWOs.

⦿ Accept   ◯ Decline

e-IWO

e-IWO Employer/Payroll Provider Profile Form

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Instructions

To complete this form and to respond to e-IWOs using PDF forms, you must use Adobe Acrobat Reader version 10 or later. To download this free software, go to https://acrobat.adobe.com/us/en/acrobat/ pdf-reader.html

You must complete the required fields followed by a red asterisk *. If there are errors, a popup box will appear with information about correcting the error.

- Register as an employer or a third-party payroll provider with this form.

- If applicable, use the e-IWO FEINs Spreadsheet to identify each subsidiary/employer for which you will receive e-IWOs at the server location entered on this form.

General Information

Date: *

(The date you are completing the form using MM/DD/YYYY format.)

FEIN: *

(Primary Federal Employer Identification Number – enter as nine numeric characters with no hyphen after the second number. This is the FEIN used for the files being transferred.)

Organization Name: *

Organization Known as Name (Doing Business As):

NDNH Address Information

Enter the address as reported to the National Directory of New Hires.

Address Line 1: *

Address Line 2:

City: *   State: *

ZIP Code: *   ZIP Code Extension:

(Enter a five-digit ZIP code and the optional four-digit extension.)

Printed Address Information

Enter the employer or third-party provider's address where child support agencies should mail paper IWOs.

Address Line 1: *

Address Line 2:

City: *   State: *

ZIP Code: *   ZIP Code Extension:

(Enter a five-digit ZIP code and the optional four-digit extension.)

Contact Information

Enter the employer's business, technical support, and alternate contact information.

Note: At least one person must be designated to received automated emails.

Business Contact Information

Enter business contact information.

First Name: *   MI: Last Name: *

Email: *

☐ Send email notifications, including file processing information, to this email address.

Phone Number: *   Phone Ext:

Enter numeric characters only.
Include the area code.
Format: 1231231111

Fax Number: *

Enter numeric characters only.
Include the area code.
Format: 1231231111

Technical Contact Information

Enter the network or system administrator who can provide corporate Internet Protocol (IP) address information and batch system information.

First Name: *   MI: Last Name: *

Email: *

☐ Send email notifications, including file processing information, to this email address.

Phone Number: *   Enter numeric characters only.   Phone Ext:
                                           Include the area code.
                                           Format: 1231231111

Fax Number: *   Enter numeric characters only.
                                           Include the area code.
                                           Format: 1231231111

Alternate Business Contact Information

Enter additional business contact information. None of the fields are required.

First Name: MI: Last Name:

Email:

☐ Send email notifications, including file processing information, to this email address.

Phone Number: Enter numeric characters   Phone Ext:
                                           only. Include the area code.
                                           Format: 1231231111)

Fax Number: Enter numeric characters
                                           only. Include the area code.
                                           Format: 1231231111)

Alternate Technical Contact Information

Enter additional technical contact information. None of the fields are required.

First Name:

MI:

Last Name:

Email:

☐ Send email notifications, including file processing information, to this email address.

Phone Number:

Enter numeric characters only. Include the area code. Format: 1231231111

Phone Ext:

Fax Number:

Enter numeric characters only. Include the area code. Format: 1231231111

File Processing Information

How do you want to receive and respond to e-IWOs?

○ No Programming
(PDF or XLS Format)

○ Programming
(System-to-System)

For **No Programming**, fill in the information below. For **Programming (System-to-System)**, skip to page 7.

No Programming File Information

Review the default selections below and make updates as needed, based on the best option for your organization.

Encrypt Files:

YesNo ○

Select **Yes** if you want OCSS to encrypt all files delivered to your server. OCSS uses GPG for encryption.

If you select **Yes**, you must provide your company's PGP or GPG encryption key in a separate email when sending this profile.

Email Notification:

AlwaysWhen Errors ○

Select **Always** if you want to receive emails for notification of files received, acknowledgment of files sent and errors.

Select **When Errors** if you only want to receive emails when there are errors.

Acknowledgment File Format:

PDFExcel ○

PDF files have a format:

123456789.OAD.TEST.360000907020923101.0002.A.PDF - for acknowledgment files
123456789.OAD.TEST.360000907020923101.0002.N.PDF - for result files

Excel files have a format:

123456789.ACW.201001111327040.0000.XLS - for acknowledgment files
123456789.ACW.ERR.201001111327040.0000.XLS - for result files

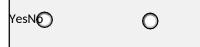**Note:** Adobe Reader is the only PDF editing software compatible with e-IWO.

Programming (System-to-System) File Information

If you selected **No Programming** in the "File Processing Information" section on page 6, skip to "Server Information" section on page 8. Review the default selections below and make updates as needed, based on the best option for your organization.

Select e-IWO file format:

Flat file ○ XML ○

Flat files have a .txt extension.

Do you want a copy of the e-IWO in PDF file format?

Yes ○ No ○

In addition to receiving a flat file or XML document for the orders, the organization can elect to also receive the orders as individual PDF forms.

Enter information about the file exchange.

Encrypt Files:

Yes ○ No ○

Select **Yes** if you want OCSS to encrypt all files delivered to your server. OCSS uses GPG for encryption.

If you select **Yes**, you must provide your company's PGP or GPG encryption key in a separate email when sending this profile.

Email Notification:

Always ○ When Errors ○

Click **Always** if you want to receive emails for notification of files received, acknowledgment of files sent, and errors.

Click **When Errors** if you only want to receive emails when there are errors.

Result File Sent:

Always ○ When Errors ○

The result file is created by the OCSS batch portal and sent to the organization. It is a notification that an acknowledgment file was sent by the organization and received by the Portal.

Click **Always** to always receive a result file.

Click **When Errors** if you only want to receive a result file for the following conditions:

- If there are problems with file header, file trailer, or other file-level structures, the entire file will be returned.
- If errors are in the batch header or batch trailer, the entire batch will be returned with all response records.
- If there are response record errors, the records with errors are returned in the file with their batch header and trailers. There can be multiple batches returned in the file.

File Naming Convention

Files can be named using the OCSS standard file naming convention or the organization's file naming convention. The naming convention for PDF files is standard for this process:

1. In the Standard/Organization-Supplied File Naming Convention column, select whether you want to use your organization's file naming convention or the OCSS standard file naming convention.
2. In the File Naming Convention column, take the following steps:
   - If you are using your organization's file naming convention, enter the file naming convention. For example, for the file with notices (Incoming State Notice Files), you can enter enmsn.mybiz.notices.txt. This is the name of the file you will receive that includes your notices.
   - If you are using the OCSS standard file naming convention, an example file name is in the table below. For more information about file naming conventions and formats, refer to the e-IWO Software Interface Specifications.

File Type	Standard/Organization-Supplied File Name Convention	File Name Convention
Incoming State Order Files	☐ OCSS Standard	(Example: 123456789. RSI.200708060115087.0000.txt
	☐ Organization Supplied	
Incoming Acknowledgement Result Files	☐ OCSS Standard	(Example: 123456789. NEA.200708060115087.0000.txt)
	☐ Organization Supplied	
Outgoing Acknowledgement Files	☐ OCSS Standard	(Example: 123456789. ACK.200708060115087.0000.txt)
	☐ Organization Supplied	

Server Information (Required for Both Options)

This information is required for the No Programming and Programming (System to System) file information.

To send and receive e-IWO files, we need the following server information:

- Different directory/folder names
- Server ID
- Server passwords

An IP address is required; a host name is optional. Information is required for the production environment and optional for the test environment. The Pick-Up and Drop-Off directory names must be different.

The only methods offered for transferring e-IWO data is for our servers to initiate the sending and retrieving of files using SFTP or FTPS.

We can only use FTPS with a partner's server that has installed our Certificate of Authority, (CA) which makes that server dedicated to exchanging files via FTPS only with our server.

File transfer preference: *

SFTP FTPS

Pick-Up Service Information

Enter your organization's server information for the e-IWO server to retrieve files.

Production Server User ID:

Test Server User ID:

Production Server Password:

Test Server Password:

Production Server IP Address:

Test Server IP Address:

Production Server Host Name:

Test Server Host Name:

Production Server Port:

Test Server Port:

Production Server Directory Name: *

Test Server Directory Name:

Drop-Off Server Information

Enter your organization's server information for the e-IWO server to deliver notices.

Production Server User ID:

Test Server User ID:

Production Server Password:

Test Server Password:

Production Server IP Address:

Test Server IP Address:

Production Server Host Name:

Test Server Host Name:

Production Server Port:

Test Server Port:

Production Server Directory Name: *

Test Server Directory Name: