

## TWC Data Exchange Request and Safeguard Plan

<b>CONTRACT BASICS</b>		<b>Please fill in the information regarding the request. Check all that apply.</b>
1.	Name of requesting governmental entity	Williamson County Constable Precinct 1
2.	Entity Tax ID#	74-6000978
3.	Street Address – Line 1	1801 E. Old Settlers Blvd
4.	Street Address – Line 2	Suite 105
5.	City, State, Zip	Round Rock, TX 78664
6.	Is this a new request or renewal of an existing contract?	<input type="checkbox"/> New request <input checked="" type="checkbox"/> Renewal of existing agreement <input type="checkbox"/> There are other contracts with the party not affected by this agreement, which are as follows:
7.	Type of entity and authority to contract	<input checked="" type="checkbox"/> Texas Local Government Code, Interlocal Cooperation Act (e.g., cities, counties) <input type="checkbox"/> Texas Government Code, Interagency Cooperation Act (e.g., state agency) <input type="checkbox"/> Federal Agency Authority <input type="checkbox"/> If state agency, please specify authority
8.	Purpose for requesting information	<i>Check all that apply:</i> <input type="checkbox"/> to assist in criminal investigations <input checked="" type="checkbox"/> to assist in locating defendants, witnesses and fugitives in criminal cases <input checked="" type="checkbox"/> to assist in locating persons with outstanding warrants <input type="checkbox"/> to assist in locating probation absconders <input type="checkbox"/> to assist in determining eligibility for public assistance/services <input type="checkbox"/> other: please specify: (language will be inserted into contract)
<b>DATA REQUEST DETAILS</b>		
9.	Information requested	<i>Check all that apply:</i> <input checked="" type="checkbox"/> wages reported by employers as earned per SSN per quarter (wage records ) [proof of income] <input checked="" type="checkbox"/> addresses of employers who reported wages by SSN <input checked="" type="checkbox"/> addresses of recipients of unemployment insurance benefits by SSN <input type="checkbox"/> unemployment insurance benefits paid by SSN [proof of income] <input checked="" type="checkbox"/> employer reports of wages paid per quarter (list of workers by employer) by employer Tax account [co-worker list]
10.	Method of receiving data	<input checked="" type="checkbox"/> <b>Online access:</b> Contractor access for lookup by SSN through password-protected log-in account. Number of individuals needing access accounts: <input checked="" type="checkbox"/> 1-10 (The subscription rate is \$1,500 per year.) <input type="checkbox"/> 11-25 (The subscription rate is \$2,000 per year.) <input type="checkbox"/> 26-50 (The subscription rate is \$3,500 per year.)* <input type="checkbox"/> Specify other quantity

		<p>Volume/quantity of <b>ONLINE</b> users of Personal Identifiable Information (PII) information per year. Estimated number of individual records requested?</p> <p><input checked="" type="checkbox"/> under 10,000 annually <input type="checkbox"/> 10,000-or more annually  * Please send separate detailed justification on <u>organizational letterhead</u> if more than 25 accounts are requested.</p> <hr/> <p><b>Offline records:</b> Computer match done by TWC staff. Scheduled computer matching against file of SSNs or tax account numbers submitted by Requestor periodically. Frequency of requests:  <input type="checkbox"/> Nightly <input type="checkbox"/> Weekly <input type="checkbox"/> Bi-Weekly <input type="checkbox"/> Monthly  <input type="checkbox"/> Quarterly <input type="checkbox"/> Annually <input checked="" type="checkbox"/> Other – specify: Only if online is down</p> <p><input type="checkbox"/> Ad hoc request for non-scheduled requests. Attach specifications including data field names.  <input type="checkbox"/> One-time request for large quantity of records. Attach specifications including data field names.  <input type="checkbox"/> One-time request for one or few quantity of records. Submit request to <a href="mailto:open.records@twc.state.tx.us">open.records@twc.state.tx.us</a> or fax request to 512-463-2990.</p> <p>Volume/quantity of <b>OFFLINE</b> records requested</p> <p>Per submission:  Estimated number of individual’s records requested? _____  <input type="checkbox"/> Under 10,000 annually  <input type="checkbox"/> 10,000-or more annually. If over 10,000 file additional tracking information will be required.</p> <p><b>De-identification:</b> If submitting SSNs TWC, also include a unique identifier. For enhanced security, the return file will not include SSNs but instead will include the unique identifier.</p>
11.	Volume/quantity of <b>OFFLINE</b> records requested	Volume Per submission: <input type="checkbox"/> under 150 SSNs/Tax IDs <input type="checkbox"/> 151 to 1500 SSNs/Tax IDs <input type="checkbox"/> Over 1500 SSNs/Tax IDs per submission
12.	Requested length of contract	<input type="checkbox"/> 1 year <input type="checkbox"/> 2 years <input checked="" type="checkbox"/> 3 years <input type="checkbox"/> 4 years <input type="checkbox"/> 5 years
13.	Requested start date	<input type="checkbox"/> For federal entities only: to correspond with start of fiscal year starting: 9/1/17
<b>SAFEGUARD REQUIREMENTS</b>		
14.	<b>Please complete this safeguard section, items 15 through 21.</b>	<input type="checkbox"/> We will only view screen information <input checked="" type="checkbox"/> We will use paper copies of screen prints <input type="checkbox"/> We will transfer information into paper records format <input type="checkbox"/> We will use electronic copies of screen prints (PDF) <input type="checkbox"/> We will transfer data into an electronic record
15.	Express written permission and contract language is required for non-employees to access. Will	<input checked="" type="checkbox"/> Only direct employees will be provided access. <input type="checkbox"/> Persons who are not employees may/will be provided access. Please specify those that apply:

	non-employees be provided access to the data? NO	<input type="checkbox"/> Data Center Operators <input type="checkbox"/> Other Governmental Contractors: Please specify:
16.	What access control methods will you use for access to the TWC information?	<input checked="" type="checkbox"/> Texas State Requirements under TAC 202 comparable standards <input type="checkbox"/> National Institute of Secure Technology (NIST) comparable standards <input type="checkbox"/> IRS Publication 1075 comparable standards
17.	How will you protect data at rest? (Both FIPS 140-2 and 128-BIT AES encryption are minimum requirements.	<input type="checkbox"/> Encrypt with FIPS 140-2 or higher and <input type="checkbox"/> Encrypt at 128-BIT AES encryption or higher <input checked="" type="checkbox"/> Other: Please specify: Locked in office with access only to employees that have had a background check
18.	When will data destruction occur?	<input checked="" type="checkbox"/> Consistent with Texas State Libraries and Archives Commission (state records retention laws) <input type="checkbox"/> Consistent with other standards: Please specify:
19.	Will the data you are requesting be disclosed to any other entity? No	Specify No
20.	Describe how your organization assesses your security posture.	<input type="checkbox"/> Vulnerability testing <input type="checkbox"/> Penetration testing <input checked="" type="checkbox"/> Audits; specify frequency <input type="checkbox"/> Other, If Other specify:
21.	Are background checks performed on employees who will access information? Yes	<input type="checkbox"/> No, background checks are not performed <input checked="" type="checkbox"/> Yes, background checks are performed. If yes, state when background checks are performed: <input checked="" type="checkbox"/> Pre-employment <input checked="" type="checkbox"/> Periodic checks during employment
22.	How will you have an audible trail?	<input checked="" type="checkbox"/> I will keep a worksheet that includes at a minimum, the person making the inquiry, the reason for the inquiry, identifying information regarding the case or claim for which the inquiry was made, and the date the inquiry was made. <input type="checkbox"/> Other, If Other specify:
<b>CONTACTS</b>		
23.	Point of Contact Name (for daily matters)	Mike Pendley
24.	Point of Contact Title	Chief Deputy
25.	Point of Contact Phone	512-244-8650
26.	Point of Contact E-mail	<a href="mailto:mpendley@wilco.org">mpendley@wilco.org</a>
27.	Point of Contact Address	1801 E. Old Settlers Blvd Ste #105 Round Rock, TX 78664
28.	Alternate Point of Contact Name and Title	Jennifer Fikac
29.	Alternate Point of Contact Phone	512-244-8650
30.	Alternate Point of Contact E-mail	<a href="mailto:Jennifer.fikac@wilco.org">Jennifer.fikac@wilco.org</a>
31.	Alternate Point of Contact Address	If different from Point of Contact SAME
32.	Signatory Name	Dan Gattis
33.	Signatory Title	County Judge
34.	Signatory Phone Number	512-943-1550
35.	Signatory E-mail	<a href="mailto:dgattis@wilco.org">dgattis@wilco.org</a>

36.	Signatory Address	If different from Point of Contact 710 Main St. Ste #110 Georgetown, TX 78626
37.	Data Technology Contact Name	
38.	Data Technology Contact Phone	
39.	Data Technology Contact E-mail	
40.	Invoice Recipient Name	Mike Pendley
41.	Invoice Recipient Phone Number	512-244-8650
42.	Invoice Recipient Title	Chief Deputy
43.	Invoice Recipient E-mail	mpendley@wilco.org
44.	Invoice Recipient Address	If different from Point of Contact

All statements and information on this form are true and correct to the best of my knowledge.

Contract Signatory \_\_\_\_\_ Date \_\_\_\_\_

For questions on how to complete this request form, contact [ORContracts.Management@twc.state.tx.us](mailto:ORContracts.Management@twc.state.tx.us) or call 512-463-2422.

**STOP HERE if you are only seeking online access.**

**If Sending Batch Files or Computer Matching – Below are the Offline Charge Details:**

**OFFLINE INFORMATION REQUEST SPECIFICATIONS**

(Describe in detail and be as specific as possible.)

Provide a reason for the request (*e.g., statutory citation or rule number*):

Is this a one-time or an ongoing request?

One-time     Ongoing

If ongoing, specify time duration and frequency of data exchange (*e.g., Annual for the next three calendar years, Quarterly, Monthly*):

If other specific data elements are requested, provide a data format.

Description of the request (*If you require a particular data run, clearly specify the data needed, such as wage records, employer records, UI benefits information, etc.*):

Costs for Offline Information:

Rate Schedule for Quarterly Wage Information Only Matched to Submitted SSNs. Rates for TWC quarterly wage record information matched to submitted SSNs are calculated on a per-request basis. Recipient agrees to pay Agency for current wage record matches at the following rates:

Number of SSNs submitted	Rate
150 or less	\$10 for the first SSN; \$2 for each additional SSN; maximum charge \$34
151-599	\$35 per 150 SSNs
600-1,499	\$85
1,500 or greater	\$110 per 1,500 SSNs

Rate Schedule for Technology Services and Other Resources. Rates for technology services and other resources are set out in as follows and may be assessed for data matches or disclosures that require staff or resources to complete.

Type of Units	Description of Unit	Rates <sup>1</sup>
CPU TIME	Number of seconds of computer processing time.	0.27584 per
JOBS RUN	Number of jobs, TSO logons, etc., run during the monthly accounting period.	2.374857
DISK I/O	Number of disks read and write operations x 1000.	0.251
DISK SPACE	Amount of disk space required to perform job functions and store permanent files. Measured in megabyte hours.	0.006584
TAPE I/O	Number of tapes read and write operations x 1000.	0.268429
TAPE MOUNTS	Number of tapes manually placed on tape drive equipment.	1.065082
STANDARD PRINT	1. Number of pages printed on the Xerox 4135 Printer 2. Number of pages printed on the Xerox 4635 MICR Printer	0.014904
SPECIAL PRINT	Number of pages of manufacturer's preprinted forms.	0.128476
PROGRAMMING STAFF TIME	Per hour rate for any necessary programmer time.	45.75 <sup>2</sup>
OTHER STAFF TIME	Per hour rate of staff time spent in connection with processing of a request, other than programming time.	24.11
MATERIALS	Diskette Tape Media Rewritable CD (CD-RW) Non-rewritable CD (CD-R)	1.00 3.00 1.00 1.00
POSTAGE	Actual cost of certified mail return receipt requested	

<sup>1</sup> The listed rates are periodically revised to take into account any significant changes in costs of staff, equipment, system software, etc. Once revised, these rates are automatically applied to all computer utilization jobs.

## TEXAS WORKFORCE COMMISSION

### Access to Information Contained in Unemployment Insurance Records

The information maintained by the Texas Workforce Commission (Agency), as administrator of the unemployment insurance program, is confidential and not subject to public disclosure. There is an exception to this confidentiality requirement for public officials who need the information for the administration or enforcement of a law. The public official must agree to maintain the confidentiality of the information obtained from the Agency.

The request from the public official must be made in writing on official letterhead. The request must identify the requester as a public official, must include a statement that the information requested is necessary for the administration or enforcement of a law, must list the specific purpose for which the information will be used, and must be signed. The requester must also sign an Agency confidentiality agreement.

### Data Sharing Agreements

If the public official anticipates an ongoing need for access to Agency records, the Agency will prepare a contract to facilitate access. The contract can be for online access, off-line access, or both.

### Costs

There is a charge for providing information maintained as part of the Unemployment Insurance program.

## Online Access

Effective May 1, 2010, the charge for online access to the Agency unemployment compensation information (including wage records, unemployment compensation benefits information, and employer tax information) will be based on a yearly subscription fee. The yearly subscription fee will be determined by the number of users authorized in the contract to access information online. Payment of the yearly fee must be received by TWC by the due date listed in the contract. The yearly fee will cover basic online access charges for a twelve calendar month period starting on the beginning date listed in the contract. There will no longer be quarterly billing based on usage.

### Rate Schedule for online access to unemployment compensation information

Number of Authorized Users	Annual Subscription Rate
1-10	\$1,500
11-25	\$2,000
26-50*	\$3,500
51-100*	\$6,000
100-500*	\$25,000
501-1,000*	\$50,000
1,001-2,000*	\$100,000
2,001-3,000*	\$150,000
Over 3,000*	\$200,000

If a contractor wants more than 25 users a year, it must submit a written justification explaining why more than 25 users is needed and must obtain written approval of the number by TWC.

# Ad Hoc and Scheduled Job Runs - Offline

## Rate Schedule for Batch runs of SSNs provided by requester against TWC wage records

- \$110.00 per 1500 SSNs submitted for datasets of over 1499
- \$85.00 for submitted datasets of between 600 and 1499 SSNs
- \$35.00 per 150 SSNs submitted for datasets smaller than 600 SSNs
- \$10.00 for the first SSN and \$2.00 for each additional SSN submitted to a maximum of \$34.00 for data sets less than 150 SSNs.

Datasets must be submitted in electronic format, on 3 ½" diskette or e-mail, as an ASCII text file containing only SSNs in ascending order.

## Rate Schedule for batch runs of Employer Tax Identification numbers (EINs) provided by requester against TWC employer quarterly reports

For Claims Benefits information and Employer Record matches performed by Agency staff, the charge is \$10.00 for first SSN or EIN and \$2.00 for each additional SSN or EIN, for each request submitted.

## Rates for Computer Usage and Staff Resources

Off-line access for special job runs other than those addressed above will be billed based on rate schedules developed by TWC applicable to the job runs.

**For PEFs and PEBs, and NFAs with offline access) Attachment F**

## OFFLINE REQUEST SPECIFICATIONS

**1. Data elements to be submitted to TWC from DADS: SSN – Social Security Number**

**2. Data elements to be matched to data submitted by the requester:**

**Texas Workforce Commission (TWC) will link the DADS seed records to Unemployment Insurance Wage Records and Employer Master File resulting to include the following:**

**Social Security number**

**NAICS – North American Industry Classification System**

**Quarterly Wages**

**Employer Name**

**Employer Address**

**Employer ZIP**

**Employer Contact**

**Employer Telephone**

**Employer TWC Account Number**

### 3. Rates for technology services and resources in connection with processing requests

Type of Units	Description of Unit	Rates <sup>1</sup> (\$)/Unit
CPU TIME	Number of seconds of computer processing time.	0.27584 per second
JOBS RUN	Number of jobs, TSO logons, etc., run during the monthly accounting period.	2.374857
DISK I/O	Number of disks read and write operations x 1000.	0.251
DISK SPACE	Amount of disk space required to perform job functions and store permanent files. Measured in megabyte hours.	0.006584
TAPE I/O	Number of tapes read and write operations x 1000.	0.268429
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OTHER STAFF TIME	Per hour rate of staff time spent in connection with processing of a request, other than programming time.	24.11
MATERIALS	Diskette	1.00
	Tape Media	3.00
	Rewritable CD (CD-RW)	1.00
POSTAGE	Actual cost of certified mail return receipt requested	

<sup>1</sup> The listed rates are periodically revised to take into account any significant changes in costs of staff, equipment, system software, etc. Once revised, these rates are automatically applied to all computer utilization jobs.

<sup>2</sup> If data recipient requests technology services, TWC will bill for services at these rates.

## **Request a Contract**

The contracting process begins with the submission of a contract information form. A copy of this form is attached.

If you have any questions, please feel free to contact the External Data Sharing Contracts Manager at **512-936-3296**, or at one of the following:

- External Data Sharing Contracts Manager  
Texas Workforce Commission  
1117 Trinity St., Rm 104AT  
Austin, Texas 78701
- [RSMContracts@twc.state.tx.us](mailto:RSMContracts@twc.state.tx.us)
- fax: 512-936-0219