



# CRITERIA FOR A PAYMENT PLAN

In order to be considered for an agreed upon payment agreement you must meet the following criteria:

1. NOT currently filing (UI),
2. NOT currently in a wage withholding status,
3. No more than 1 defaulted payment in the past.

Visit [dew.sc.gov/overpayments-and-collections](http://dew.sc.gov/overpayments-and-collections) for more information.

## Getting Started

Log on to [MyBenefits.dew.sc.gov](http://MyBenefits.dew.sc.gov), enter your User ID and click **Next**. Enter your password and click **Login**. On the customer menu page, select **Go To My Home Page** located in the center of the page.

You can also click on the **Claimant Homepage** tab.

| Program | Effective Date | View Claim History End Date | Maximum Benefit Amount | Weekly Benefit Amount | Earnings Allowance | Total Amount Paid | Status | Confirmation Number | View Initial Claim Summary | View Reactivate History | Remaining Balance Amount |
|---------|----------------|-----------------------------|------------------------|-----------------------|--------------------|-------------------|--------|---------------------|----------------------------|-------------------------|--------------------------|
| UI      | 04/05/2020     | <a href="#">04/03/2021</a>  | 6,520.00               | 326.00                | 81.50              | 3,912.00          | Open   | 3109149             | <a href="#">View</a>       |                         | 6,520.00                 |

## Overpayment Balance

On the claim information ribbon, you can locate your **Overpayment Balance** on the far right.

Click **Make Payment** to the above and left of your Overpayment Balance.

You can also click on the SMARTLINKS **Create Payment Plan** located at the bottom left corner.

TI



Claim Status Customer Menu Claimant Homepage Change Personal Info Change Security Prof Confirmation History Debit Card Website Determination History Appeal Information My Documents

**ADVISMENT:** Please do not use your Internet browser "Back" buttons. In the event you need to return to a previous page, please utilize the navigation buttons or the menu links above.

Payment Options

Outstanding Balance : \$ 11,112.00 Minimum Payment: \$ 489.00

One-Time Payment : By clicking this link, you will be directed to SCDEW's payment portal where you will be able to make a payment by credit card, debit card or e-check. Once you are at the portal, please follow the instructions for making your payment.

Payment Agreement : Click this link if you would like to schedule regular payments through an installment pay agreement with SCDEW. This link will also allow you the option of choosing voluntary wage withholding as method of repayment.

Cancel

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## Payment Plan Options

Once you click **Make Payment**, you will be taken to the **Payment Option** screen.

If you have not setup a payment plan you will be provided with two options:

1. **One-Time Payment**
2. **Payment Agreement** - Once your payment agreement is setup you will only be provided with the One-Time Payment Option.

*\*In order to prevent future collection activity you must be in a current and active payment agreement.*

## Overpayment: Payment Agreement

Click **Payment Agreement**. You will be taken to the **Overpayment: Payment Agreement** screen which will display the following fields:

- a. **Initial Overpayment** (Pre-Filled)
- b. **Current Balance** (Pre-Filled)

Initial Overpayment : 4752.00 Balance : 4752.00 Penalty : 0.00 Interest : 0.00

Authorization Date : (MM/DD/YYYY) \*Payment Day : \*Minimum Payment : 144.00 Recurring Payment

I would like to voluntarily have my wages deducted from my current employer

I understand that regardless of this agreement my state income tax refund will be intercepted and applied to this overpayment until the debt is paid in full. I further understand that the terms of this agreement apply to only to my civil liability to repay this overpayment. This agreement does not affect a disqualification or referral for criminal prosecution under the Employment and Workforce law or any other state and/or federal law.

In the event I apply for and become eligible to receive unemployment insurance benefits in the future, I understand this agreement is null and void and such benefits will be applied to the balance of my overpayment account until the debt is paid in full. I further understand that if I default on this agreement wages may be withheld and applied toward this overpayment. I understand, in the event of a default on this agreement, the Department may intercept my federal income tax refund until the debt is paid in full.

By checking this box, I certify that I have read and fully understand the conditions and terms of this agreement as set forth above.

Submit Cancel

- c. **Penalty** (33% Penalty for Fraud)
- d. **Interest**
- e. **Authorization Date** (Date Agreement was submitted)
- f. **Payment Date** (Due date that you would like your payment due each month (1-25 only, 1<sup>st</sup> payment must be made within 30 days of payment plan request))
- g. **Minimum Payment** (Pre-Filled for additional payment options, please visit [dew.sc.gov/individuals/manage-your-benefits/overpayments-new](http://dew.sc.gov/individuals/manage-your-benefits/overpayments-new) for alternate payment options).
- h. **Recurring Payment** - OPTIONAL (Only check this box if you would like to setup a monthly Electronic Funds Transfer).
  - a. Only able to withdraw twice a month on the 1<sup>st</sup> and/or 16<sup>th</sup>.
  - b. **Required Payment Agreement** will be mailed for execution and will require the return of a voided check or letter on Bank letterhead with your **Routing #** and **Account #** provided.
- i. **Voluntary Wage Deduction Statement** - OPTIONAL (only check this box if you would like to have your payment deducted from your paycheck).
 

I would like to voluntarily have my wages deducted from my current employer

  - a. Employer must agree
  - b. Payments will be deducted per pay period



I would like to voluntarily have my wages deducted from my current employer

\* Name of Employer :

\* Employer Address :

\* City :

\* State :

\* Zip :

\* Contact Person :

\* Title :

\* Phone :  Fax :

Email :

- c. You must provide the following information to us:
1. Name of Employer
  2. Employer Address
  3. City
  4. State
  5. Zip
  6. Contact Person
  7. Title
  8. Phone (Employer Contact)
  9. Email

I understand that regardless of this agreement my state income tax refund will be intercepted and applied to this overpayment until the debt is paid in full. I further understand that the terms of this agreement apply to only to my civil liability to repay this overpayment. This agreement does not affect a disqualification or referral for criminal prosecution under the Employment and Workforce law or any other state and/or federal law.

In the event I apply for and become eligible to receive unemployment insurance benefits in the future, I understand this agreement is null and void and such benefits will be applied to the balance of my overpayment account until the debt is paid in full. I further understand that if I default on this agreement wages may be withheld and applied toward this overpayment. I understand, in the event of a default on this agreement, the Department may intercept my federal income tax refund until the debt is paid in full.

By checking this box, I certify that I have read and fully understand the conditions and terms of this agreement as set forth above.

## Conditions & Terms

Check the [Conditions and Terms](#) once you have read and agreed to the terms.

Click [Submit](#) or [Cancel](#).

- [Submit](#) - This will submit the request for payment agreement approval to DEW.
- [Cancel](#) - This will cancel your payment agreement request and DEW will not be notified of a request for a payment plan.

## Confirmation

If your payment agreement has been successfully submitted, you will receive the following message.

Clicking the [Continue](#) button will take you back to the home page.

**Your Payment Agreement has been submitted!**

Once the Payment Agreement is processed and confirmed you will see the change on the following bill.



As long as your payment agreement is equaled to the required minimum payment listed, or within the below parameters, your payment plan will be approved.

| <b>Collections Payment Plan</b> |                            |                       |                                |
|---------------------------------|----------------------------|-----------------------|--------------------------------|
| <b>Minimum Overpayment</b>      | <b>Maximum Overpayment</b> | <b>Payment Period</b> | <b>MINIMUM Monthly Payment</b> |
| \$1                             | \$500                      | 12 months or less     | \$ 50                          |
| \$501                           | \$750                      | 12 months or less     | \$ 70                          |
| \$751                           | \$1,125                    | 24 months or less     | \$ 50                          |
| \$1,126                         | \$1,700                    | 24 months or less     | \$ 80                          |
| \$1,701                         | \$3,000                    | 36 months or less     | \$ 90                          |
| \$3,001                         | \$5,500                    | 36 months or less     | \$ 160                         |
| \$5,501                         | \$9,000                    | 36 months or less     | \$ 250                         |
| \$9,001                         | \$16,000                   | 48 months or less     | \$ 350                         |
| \$16,001                        | HIGHER                     | 48 months or less     | FIXED                          |

DEW must receive the required minimum payment every 30 days or your agreement may default and all collection efforts will resume.

**PAYMENT PLANS MAY NOT PREVENT TAX INTERCEPTIONS.**