

# FSA HANDBOOK

## Loss Adjuster Management

To access the transmittal page click on the short reference.

For State and County Offices

SHORT REFERENCE

2-NAP  
(Revision 1)



**UNITED STATES DEPARTMENT OF AGRICULTURE**

Farm Service Agency  
Washington, DC 20250

<b>Loss Adjuster Management 2-NAP (Revision 1)</b>	<b>Amendment 9</b>
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**Approved by:** Deputy Administrator, Farm Programs



**Amendment Transmittal**

**A Reason for Amendment**

Exhibit 4, LA Pay Rate Table, and Exhibit 5, Inspection Type Attributes and Definitions, have been amended to reflect new loss adjuster pay rates for work completed on or after August 9, 2019.

<b>Page Control Chart</b>		
<b>TC</b>	<b>Text</b>	<b>Exhibit</b>
		1, pages 1, 2 4, page 1 5, pages 1, 2



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- 1 Reports, Forms, Abbreviations, and Redelegations of Authority
- 2 Definition of Terms Used in This Handbook
- 3 Menu and Screen Index
- 4 LA Pay Rate Table
- 5 Inspection Type Attributes and Definitions



**Part 1 General Information**

**1 Overview**

**A Handbook Purpose**

This handbook provides policies and procedures for engaging, training, and compensating LA's.

**B Handbook Supplementation and Withdrawal**

Do **not** withdraw any procedures in this handbook. This handbook may be supplemented under the direction of STC and SED **only** after authorization from DAFP.

**Note:** See 1-AS for proper supplementation procedures.

**C Related Handbooks**

Handbooks related to loss adjustment, LA's, and LA FSA-449-A's are listed in the following table.

<b>Handbook</b>	<b>Purpose</b>
12-AO	County Office Work Measurement and Fund Allocation System
1-AS	Directives Management
1-CM	Common Management and Operating Provisions
*--9-CM	Common Payment System
2-CP	Acreage Compliance Determinations
1-FI	Processing Payments Initiated Through NPS--*
6-FI	Accounting Interface
61-FI	Handling Prompt Payment Interest Penalties
2-INFO	Information Available to the Public
1-NAP	Noninsured Crop Disaster Assistance Program
2-PL	Subsidiary Files

1 Overview (Continued)

D Source of Authority

Authority for this handbook is authorized by the Federal Agriculture Improvement and Reform Act of 1996 (Pub. L. 104-127). Regulations governing NAP are in 7 CFR Part 1437.

2 Responsibilities

\*--A SED Responsibilities

SED's are responsible for:--\*

- engaging, training, and certifying LA's
- designating eligible pay levels and coordinating work assignments for LA's
- \*--annually notifying County Offices and other State Offices, when requested, of contracted LA codes, pay rates, and the crops each LA is eligible to adjust--\*

**Note:** State Offices may delegate LA work assignments to County Offices or DD's.

\* \* \*

- ensuring that County Offices are using correct procedures in FSA-449-A and payment processes
- approving all interstate and air travel in writing
- approving FSA-449-A's and payments exceeding \$1,499.99
- consulting with County Offices on controversial FSA-449-A's
- approving FSA-449-A's submitted more than 30 calendar days from date of work issuance.

## 2 Responsibilities (Continued)

### B County Office Responsibilities

County Offices shall ensure that:

- travel policies and procedures are monitored for payment accuracy and that costs and travel are in the best interest of the Government
- all interstate travel and air travel have the written approval of the State Office
- LA's are fully aware of their responsibilities for incurring reasonable expenses
- LA work is planned to achieve the maximum number of visits with the least amount of travel
- all FSA-449-A's are reviewed and approved for reasonableness and accuracy
- FSA-449-A's submitted are for all work done in the pay period; and if all work is **not** accounted for in the pay period, suspend FSA-449-A for additions.

**Note:** Consult with State Office on controversial FSA-449-A's.

- all lodging has prior approval
- all work done by LA's is assigned before execution.

**Note:** LA's shall **not** initiate or schedule work assignments.

CED is considered the expert on travel and time for appraisals within the county. If LA is ~~traveling~~ between counties, the State Office loss adjustment specialist, or designated ~~person~~, is the expert on travel time to the county where work is being done.

State Offices shall refer any questionable issues about FSA-449-A's to PECD to the attention of the Disaster Assistance Branch. If questions about the same LA and/or matter continue to surface, PECD should be notified for a resolution or notification of termination of CCC-455.

### 3-20 (Reserved)



**Part 2 CCC-455's**

**Section 1 Engaging LA's**

**21 Engaging Process**

**A CCC-455 Authority**

SED's have the authority to enter into CCC-455's with LA's. CCC-455's allow LA's to determine losses on NAP crops for FSA and other program work as may be required and authorized.

SED's shall ensure that advertisement for LA's is conducted timely, to allow persons a chance to apply and receive an invitation for training.

**B Annual CCC-455's**

SED's shall enter into CCC-455's with LA's annually. Ideally, LA's should live within commuting work distances to minimize travel costs. SED or designated representative for training and certifications shall:

- execute CCC-455 with LA and maintain a copy in the State Office LA folder  
\* \* \*
- maintain training documents for CCC-455's.

LA may have only one CCC-455 with FSA for a crop year. CCC-455 authorizes LA to work in any State as requested by SED or State representative assigning work to LA.

State Offices shall:

- review paragraph 44 to comply with LA ethics before engaging LA CCC-455's
- conduct advertising through State and/or County Offices in the regular manner.

22 CCC-455, Loss Adjuster Service Agreement

A CCC-455's

CCC-455's are for 1999 and subsequent crop years and consists of:

- CCC-455, Loss Adjuster Service Agreement
- CCC-455 (Appendix 1), Code of Federal Regulations, 41 CFR Part 60, Obligations of Contractors and Subcontractors
- CCC-455 (Appendix II), Loss Adjuster Service Agreement Payment of Compensation
- CCC-455 (Appendix III), Adjuster Farming Relatives and Other Affiliations
- \*--CCC-455 (Appendix IV), SF-3881, ACH Vendor/Miscellaneous Payment Enrollment Form.--\*

SED is the authorized person for CCC responsible for:

- managing CCC-455's
- training, certification, and work assignments of LA's
- spot checks.

**Note:** SED's may delegate responsibilities for CCC-455 management.

**23 Pay Rates for LA's**

**A Pay Rates**

Use the table in Exhibit 4 to determine the rate of pay for LA's. LA's do **not** earn the full \*-rate of pay until fully certified in at least 1 crop. After certification, LA's earn the eligible--\* rate of pay for all services or training.

**24 (Reserved)**





**\*--25 LA Photo Identification Site Badge****A Overview**

In 2004, Homeland Security issued Presidential Directive 12 which directed U.S. government agencies to issue verifiable credentials to official representatives including employees, contractors, interns and affiliates. LA's are affiliates.

Verifiable credentials for LA's will include a USDA-FSA provided photo identification site badge to be displayed when conducting USDA-FSA business. The site badge will require a favorable FBI fingerprint background check before being issued. A favorable FBI fingerprint determination must be received before an LA's CCC-455 can be signed or renewed.

**Note:** The following are suggested places for LA's to be fingerprinted:

- local, county, or State law enforcement agencies
- search online for local private companies specializing in fingerprinting.

**B Phasing Out FSA-454**

Loss Adjuster ID Card FSA-454 will be phased out beginning with the 2016 crop year and replaced with an FSA-provided photo identification site badge.

The prior year's FSA-454 should be returned and discarded when the new site badge is issued.

**C Obtaining an FBI Fingerprint Background Investigation**

The following documentation is required to obtain an FBI fingerprint background investigation:

- FSA-789
- OF-306
- two completed FD-258's or SF-87 fingerprint charts with signatures and dates of both the applicant and the individual trained in the fingerprinting process.

**Note:** Because of EPD's transition to electronic fingerprint submissions, FD-258 and SF-87 are both acceptable for electronic processing. The fingerprint charts and OF-306 must be dated within 120 calendar days of submission to EPD.--\*

**\*--25 LA Photo Identification Site Badge (Continued)****D Submitting Required Fingerprint Documents**

Ensure that all required documents in subparagraph C are submitted to EPD electronically to the personnel security mailbox at **EPD@fsa.usda.gov**.

All documents must be encrypted with the password provided to the State by EPD. Consult the State Office Administrative Officer for current EPD passwords.

If documents cannot be sent electronically, State Offices must submit documents using UPS to the following address:

USDA, FSA, EPD  
ATTN: Director, EPD  
1400 Independence Ave SW  
South Building, Room 0092-S  
STOP 0543  
Washington, DC 20250-0543.

**Notes:** Expect to wait 2 to 3 weeks to receive a response from EPD about the results of the fingerprint investigation.

Fingerprints taken within the last 120 calendar days for a Federal position submitted to OPM are acceptable, otherwise an updated fingerprint chart must be submitted to EPD.

A favorable FBI fingerprint check remains in effect as long as there is no break in continuous renewals of CCC-455.

**E Obtaining a Required Photo ID Site Badge**

After notification from EPD that LA has been cleared, a site badge may be requested by completing AD-1197. The AD-1197 and a current photo of LA must be e-mailed to **EPD@fsa.usda.gov**. The site badge will be developed and sent to the State Office POC listed on AD-1197.--\*

**\*--25 LA Photo Identification Site Badge (Continued)****F Obtaining a Current Picture of an LA for the USDA-FSA Site Badge**

A current picture can be obtained either by a digital camera or a cell phone for the USDA-FSA site badge. The picture **must** be saved in the file by the person's name. The picture requirements are as follows:

- image should be in .jpg format
- include a full face, front view, upright head and open eyes
- picture should present full head from top of hair to shoulders
- picture should include a plain white or off-white background
- avoid shadows on the face or background
- face in picture should have a natural expression (closed mouth)
- picture should not include sunglasses or hats
- if glasses are worn, glare on glasses is not acceptable
- picture should be in color
- the contrast and lighting in the picture should be normal.

**G Reimbursement for Fingerprinting Costs**

Reimbursement for the cost of the fingerprint process will differ between certified LA's with a current CCC-455 agreement and LA trainees.

- **Reimbursement for Certified LA's**

Certified LA's with a current CCC-455 will be paid for the time, mileage and cost (if any) of the fingerprint process. The time associated to the fingerprint process should be reported as Update training (UTR) in the Loss Adjustment Management System because it is related to keeping their LA certified status. Report any cost of the fingerprint process on FSA-449B as miscellaneous (item 7).

State and County Offices are encouraged to attempt to allow LA's to schedule the fingerprint process in coordination with an inspection assignment or at a time when it is convenient to reduce the cost associated to the fingerprint requirement.

- **Reimbursement for LA Trainees**

Once a trainee has completed all LA training requirements and becomes certified, FSA will reimburse the individual for any cost associated to the fingerprinting process. FSA will not reimburse a trainee for the time or mileage associated to the fingerprinting process since it will be a known requirement for becoming a USDA/FSA LA.--\*

**\*--25 LA Photo Identification Site Badge (Continued)**

**H EPD Contacts**

Contact EPD according to this table if there are questions about obtaining a site badge.

<b>If questions about...</b>	<b>THEN contact...</b>
policy	Jay Van Der Werff by either of the following: <ul style="list-style-type: none"> <li>• e-mail to <b>jay.vanderwerff@kcc.usda.gov</b></li> <li>• telephone at 816-926-3786.</li> </ul>
procedure	Kathy Kroening by either of the following: <ul style="list-style-type: none"> <li>• e-mail to <b>kathy.kroening@kcc.usda.gov</b></li> <li>• telephone at 816-926-1180.</li> </ul>

--\*

**26 LA ID Codes**

**A Elimination of LA ID Codes**

LA ID codes are no longer required. The Loss Adjuster Management System will no longer assign ID numbers.

**27 LA Agreement File**

**A Agreement File**

The State Office shall maintain an agreement file for each LA containing a copy of the following:

- approved CCC-455
- \*--FSA-1065-2--\*
- FSA-454B
- FSA-577 (see 2-CP, subparagraph 332 E).

28 FSA-454B, Loss Adjuster’s Crop Training Certification

**A Using FSA-454B**

The State Office shall use FSA-454B to document LA’s training information and place in LA’s folder. Provide a copy of FSA-454B to each County Office that LA may serve.

**Note:** Crop training data is used to determine the skill level and crops LA’s are authorized to appraise.

**B Completing FSA-454B**

Complete FSA-454B according to the following table.

\*--

Item	Instructions
1	Enter crop year.
2	Enter LA’s name.
3	Enter LA’s mailing address.
4	Enter LA’s telephone number.
5	Enter LA’s county of residence.
6A	Enter initial or 1st crops LA is certified to adjust.
6B	Enter date LA was certified to adjust the crops in item 6A.  <b>Note:</b> Draw solid, double lines beneath each training period or type and sign beneath the lines.
6C	Enter additional crops LA is certified to adjust, in addition to the initial crops.  <b>Note:</b> Number the pages and file the most recent in front.
6D	Enter date LA received update training or was certified to adjust crops in item 6C.
7	State Office loss adjustment specialist or authorized representative shall: <ul style="list-style-type: none"> <li>• provide name</li> <li>• sign, denoting approval</li> <li>• date.</li> </ul>
8	Enter State Office name, mailing address, and telephone number.

--\*



28 FSA-454B, Loss Adjuster's Crop Training Certification (Continued)

C Example of FSA-454B

The following is an example of FSA-454B.

\*--

This form is available electronically. <b>FSA-454B</b> U.S. DEPARTMENT OF AGRICULTURE (09-26-13) Farm Service Agency		1. CROP YEAR  2013
<b>LOSS ADJUSTER'S CROP TRAINING CERTIFICATION</b>		
2. LA'S NAME Norfleet Givens		3. LA'S MAILING ADDRESS (Including Zip Code) 1 Greenplane Place Grizzard, VA 89876
4. TELEPHONE NUMBER (Include Area Code)  804-123-4567		
5. COUNTY OF RESIDENCE Greensville		
<b>6. CROPS CERTIFIED TO ADJUST AND DATE CERTIFIED</b>		
The above named LA in Item 2 is certified to adjust the following crops. Certification data is used to determine skill level and the rate of payment for the adjuster. Below in Item 6A and 6C enter the training LA has completed, and in items 6B and 6D enter the date the training was certified.		
<b>A. INITIAL OR FIRST CROP LA IS CERTIFIED TO ADJUST:</b>		<b>B. DATE CERTIFIED</b>
(1) Corn and small grains		06-01-2013
(2)		
(3)		
(4)		
<b>C. ADDITIONAL OR SUBSEQUENT CROPS LA IS CERTIFIED TO ADJUST IN ADDITION TO INITIAL OR FIRST CROPS LISTED IN ITEM(S) 8A:</b>		<b>D. DATE CERTIFIED</b>
(1) Cotton		01-15-2013
(2) Cotton Update Training		01-15-2013
(3) NAP Update Training, Watermelons		02-15-2013
(4) Cucumbers, Southern Vegetable School		02-15-2013
7A. NAME OF STATE SPECIALIST OR AUTHORIZED REPRESENTATIVE	7B. SIGNATURE OF STATE SPECIALIST OR AUTHORIZED REPRESENTATIVE	7C. DATE (MM-DD-YYYY)
8A. STATE OFFICE NAME AND ADDRESS (Including Zip Code)		8B. STATE OFFICE TELEPHONE NUMBER (Including Area Code)

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--\*

**Note:** Person completing the entry shall draw a solid, double line after the training notation and initial the entry.

29 FSA-1065-2, Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters

A Completing FSA-1065-2

Complete FSA-1065-2 according to the following table.

\*--

Item	Instructions
1	Enter the crop year.
2	Enter State Office name.
3	Enter the LA name.
4	Enter the date the site badge was issued.
5	Enter the expiration date printed on the site badge.
6	If collected or destroyed, enter date.
7	If destroyed, list reason.

--\*



29 FSA-1065-2, Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters (Continued)

B Example of FSA-1065-2

\*--The following is an example of FSA-1065-2.

This form is available electronically.

**FSA-1065-2**  
(03-17-16)

**U.S. DEPARTMENT OF AGRICULTURE**  
Farm Service Agency

**TRACKING USDA-FSA ISSUED SITE BADGES  
FOR NAP/TAP ADJUSTERS**

						1. Crop Year 2016		
						2. State Office Florida		
3. Name that Appears on USDA-FSA Site Badge	4. Badge Issued Date (MM-DD-YYYY)		5. Expiration Date Printed on Badge (MM-DD-YYYY)	6. Date Collected and Destroyed		7. Reason for Destruction (Check Appropriate Box)		
	Date	Initials		Date	Initials	Terminated Employment	Change in Employment Status	Other (Provide Explanation)
Fred Brown	02-09-2016	EEE	02-09-2019			<input type="checkbox"/>	<input type="checkbox"/>	
Joe Smith	02-09-2016	EEE	02-09-2019	10-15-2016	EEE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Retired
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
						<input type="checkbox"/>	<input type="checkbox"/>	
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						<input type="checkbox"/>	<input type="checkbox"/>	

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30-32 (Reserved)

33 (Withdrawn--Amend. 6)

34-42 (Reserved)



## Section 2 LA Responsibilities and Ethics

## 43 LA's Responsibilities

## A LA's Administrative Responsibilities

LA's shall perform the following administrative tasks:

- advise FSA of all insurance or reinsured companies for which loss adjustment work or sales service is performed before signing CCC-455
- advise FSA of all immediate family relatives who have farms

**Note:** LA's shall:

- not adjust crops in which relatives have any interest
- update this information immediately when changes occur.
- comply with all Federal travel regulations
- legibly and properly complete FSA-449A's and FSA-449B's and submit them in a timely manner

**Notes:** FSA-449A's shall be submitted as adjustment assignments are completed. More than one FSA-449A may be submitted in a pay period.

FSA-449A's more than 30 calendar days old must have written approval for payment from the State Office.

- be responsible for any additional expenses incurred for personal preference
- not confer with producers about legal matters
- notify County Office, if contacted about legal hearings or controversial matters.
- keep work records for 3 years

\* \* \*

## 43 LA's Responsibilities (Continued)

## A LA's Administrative Responsibilities (Continued)

- be responsible for the correction of all suspensions received from the County Office. Suspensions shall be given priority for corrections and returned in a timely and efficient manner.

**Note:** If it is determined the error was a result of performance, the error will be corrected **without** additional compensation.

## B LA's Service Responsibilities

LA's shall:

- only be used for NAP-related reasons, unless Washington, DC, authorization is received
- perform loss adjustment services as assigned by State Office representative or CED for NAP-related reasons

**Notes:** This includes all visits for the purpose of appraising damaged or destroyed crops during the growing season or following harvest, for all related loss adjustment functions. **The producer does not pay for services performed by LA \* \* \*.**

LA's shall **never** perform measurement service requests for APH when requested by the producer for production history. This service is **not** related to NAP claims or required spot checks. A producer's request is "paid measurement service" that must be performed by FSA office or field person.

\*--See 1-NAP (Rev. 2), paragraph 587 for guidelines for measurement services.--\*

- explain limited responsibilities and filing procedures to producers, when applicable
- schedule work to ensure timely service, returning producer folder to the County Office within 10 calendar days
- promote a good working relationship between the producer and FSA
- bring controversial claims and other unusual claim situations to the attention of the official who assigned the work, including the knowledge of producer bankruptcy
- accurately complete and timely submit all claim documents and LA pay FSA-449A's preferably in the same pay period, but no later than the following pay period in which the work was performed
- advise all interested parties that findings from inspections and appraisals are for FSA use.

**44 LA's Ethics, Conflicts, and Eligibilities****A Ethics and Conflicts of Interest**

LA's shall:

- **not** solicit or accept any money, gifts, or favors from any party that are designed to influence or give the appearance of influencing any loss adjustment findings or decisions
- **not** use position to gain favor, influence, or financial advantage
- take precaution to ensure that there is no appearance or occurrence of conflict of interest

**Note:** LA's cannot:

- work in the county where he/she is the spouse of CED or COC member
- engage in sales or administration of any MPCCI policy
- adjust any losses for any member of their family including, but not limited to, parents, brothers, sisters, children, spouse, in-laws, grandchildren, aunts, uncles, cousins, and grandparents, or of the family of an employee of LA, or any party with whom LA has a material or financial interest. Relationship by adoption or similar extent is included.
- **not** discriminate against any producer because of race, color, national origin, age, disability, and where applicable sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from public assistance.

44 LA's Ethics, Conflicts, and Eligibilities (Continued)

**B Eligibilities**

LA's shall **not** be:

- a permanent, part-time, or intermittent FSA employee

**Exception:** A field reporter who performs **only** technical field services **may** be an LA. The reporter and LA work **must** be performed on different days.

- a STC or COC member.

\* \* \*

LA's **may** be an employee of another agency, such as NRCS, but shall **not** work for FSA and another agency during the same hours.

45-50 (Reserved)

**Section 3 LA Training and Certification**

**51 General Provisions**

**A Applicability**

This section applies to the training and certification of:

- LA's
- those responsible for reviewing LA work.

**B LA and Employee Training Attendance**

Certified LA's and employees **must** attend update training to maintain certification

Phase II training **must** be attended to qualify to adjust other crops originally not qualified to adjust.

**52-54 (Reserved)**





## 55 Phase I Training

## A Content of Training

\*--Twenty-four hours of Phase I classroom training must cover:--\*

- general NAP policy provisions, and other programs in effect for appraisal (ad hoc disaster)
- procedure modifications and/or changes (updates)
- loss adjustment forms and service functions
- loss adjustment forms completion, documentation, and distribution
- crop handbook, including the following:
  - harvested and stored production
  - verifying the cause and time of loss
  - documentation of uncovered causes of loss
  - documentation of poor farming practices
  - documenting appraisals and performing crop appraisal methods
- verification and use of acreage and production-to-count documentation obtained from area buying stations, processors, and packers, as applicable
- verification of entities and share arrangements policies and procedures
- the requirements of Title VI of the 1964 Civil Rights Act
- ethics contained in paragraph 44
- farm and environmental safety issues for the area.

**Note:** If LA is assigned outside his/her normal work or geographic area with specific environmental safety issues, he/she **must** be coached on these issues before being released for assignment. \* \* \*

## \*--B Maximum Compensation--\*

Compensation for Phase I training is limited to the time essential to complete the training, up to 120 hours.

56 Phase II Training

A Overview

\*--Twenty-four hours of Phase II training must include actual field experience and classroom--\* training for loss situations, including uncovered causes of loss and problem cases. The trainer for OJT must be a fully certified LA or certified employee.

Appraisals completed during OJT shall be signed by the trainee, in the presence of the trainer. The trainer must enter their LA or CED reviewer code (State and county code), initials, title, and date, to indicate their presence during the inspection.

B Training Content

LA must:

\* \* \*

- independently inspect the crop and complete at least 2 final appraisals or 2 structured field appraisals that:
  - are then reviewed by a fully certified LA or employee
  - have no major errors
  - are for diverse and difficult inspection scenarios for the crop when possible

**Note:** When structured field training is substituted for OJT, ensure that 2 independent performances, other than the 2 trial appraisals, are spot checked.

**56 Phase II Training (Continued)**

**B Content of Training (Continued)**

- prove proficiency to the trainer in all phases of loss adjustment activities, including:
  - general NAP, disaster, or other program provisions for which appraisal services may be used
  - determining time and cause of loss
  - verifying entities and share
  - measuring and identifying fields, as needed, to determine acreage
  - completing and calculating various stage crop appraisals
  - measuring and computing production stored in bins
  - accurately establishing deductions to production to count
  - forms completion.

57 **Update Training****A Annual Update Training**

\*--Certified LA's and FSA employees responsible for the oversight of LA work **must** receive--\* update training annually to remain certified. Update training **must** take place before work assignments for the new crop year and after CCC-455 \* \* \* is signed. The extent of the training should be dictated by errors, experience, and new program policies, procedures, or forms.

\* \* \*

Training **must** be documented in the State Office files, including the training statement or certificate, if training is received from a vendor other than FSA. Documentation for County Office employees **must** also be maintained in the State Office files.

**\*--B Update Training for 2014 and Succeeding Crop Years**

Because of the the reduction in funding through sequestration, FSA is charged with identifying ways to reduce NAP loss adjustment costs. To meet these requirements, update training has been modified.

Beginning with the 2014 crop year, State Offices shall annually provide:

- LA's with 3 years or less experience, the required traditional 6 to 8 hours of update training
- LA's with more than 3 years experience, 2 hours of update training via conference call according to the following:
  - LA's shall call the State Office toll-free teleconference telephone number
  - State Offices shall e-mail, when possible, training materials to LA's
  - training is a concentrated abbreviation of traditional update training and should focus on changes, problem areas, and recurring errors.

**Notes:** State Offices have the option to require specific LA's with more than 3 years experience to attend traditional update training if the State Office believes traditional update training is warranted for the specific LA.

If a State Office believes all LA's in their State need the traditional 6 to 8 hours of update training in a given year, the State Office must submit a request to PECD, Attention: Lew Jenkins, explaining why all LA's need the traditional 6 to 8 hours of update training and provide a cost estimate.--\*

**58-60 (Reserved)**

## 61 Determining Training Required

### A General Considerations

SED must determine how many LA's to train in which crops. Balancing training goals requires good management. The decision **must** balance:

- quantity; more LA's may permit faster service on claims
- quality; providing crop specialization may mean the most accurate loss adjustment
- cost to the Government; training costs versus travel costs.

### B Example for Crop Variety Training

The following example displays the considerations based on crop distribution.

**Example:** The adjustment work in a specific area is 85 percent corn, 10 percent apples, and 5 percent nursery. SED contracts 15 LA's for the year. While all 15 LA's should be trained to perform corn inspections, the workload in the area does not support training all LA's in apples and nursery stock.

SED should look at additional criteria, such as reliability, accuracy, and prior experience, to determine LA's to receive certain assignments, such as nursery stock and apple inspection training.

**Note:** Any display or perception of favoritism shall be avoided. Work should be issued equally:

- among LA's, when possible
- in relation to easy versus difficult assignments, if no crop specialization exists.

## 62 Certification Process and Documentation

### A Certification Process

To become certified on a crop, LA must:

- have an active CCC-455
- successfully complete Phase I training
- successfully complete Phase II training for the crop.

### B Documenting Training and Certification

The designated representative (trainer) shall:

- document all training, including update training, on FSA-454B
- notify LA, in writing, of certification on crops and date, pay rate, and any changes.

LA **must** maintain satisfactory work quality to remain fully certified.

## 63 LA Training Report

### A Annual Reporting

State Offices shall submit a report of annual LA and employee training held to PECD,  
\*--Attention: Lew Jenkins.--\*

The report shall be submitted by the 10th of the month following the training and include:

- training type, such as update, Phase I, Phase II
- date held
- place held
- number in attendance
- brief summary of the training.

If States participate in joint training sessions, 1 of the State Offices shall make a report. Include all States participating.

**Note:** Offsite training with crop insurance companies that fulfills the requirements of Phases I and II shall also be reported.

**64 Certification by Special Cases**

**A Certification by Specialty Crops**

Special consideration should be given to certification on specialty crops, because these crops are:

- often more difficult to adjust
- usually of higher value, which means that mistakes will be more costly to the Government
- unlikely to occur in a volume that would allow more than a few LA's in an area to gain sufficient experience.

It may be more cost effective to maintain a smaller, highly experience pool of LA's to inspect specialty crops and incur the cost of their travel than to try to keep all LA's in an area proficient in these crops.

**65 Certification by Experience \* \* \*****A Certification by Experience**

In certain cases, it may be advantageous to FSA to consider CED, insurance adjuster, field reporter, or others certified by experience for previous work done in crop adjusting.

**Example:** An individual with adequate adjustment experience who has demonstrated the ability to effectively carry out the technical phases of loss adjustment work for a crop can be considered certified. Numerous disaster program inspections would be an example of adequate adjustment experience. Training documentation forms must be maintained for these individuals.

To maintain this certification, the employee **must** receive \* \* \* update or Phase II training, \*--annually. For any year after initial certification for which the required training is **not--\*** received, the employee is **not** fully certified.



66 Maintaining Certification and Determining Decertification

A Table of Actions

The following table lists causes that impair or end certification and the corrective action required. If work performed by LA is unacceptable, loss of certification or termination may occur.

<b>IF LA...</b>	<b>THEN certification...</b>	<b>AND the corrective action to recertify or update certification is that LA must...</b>
was previously certified, but did not maintain an active annual agreement	must be updated before work assignment	take Phase I and/or II training, as required by SED or training official.
maintained Service Agreement, but failed to do an inspection for the crop for the crop year	must be updated before work assignment	take Phase I and/or II training, as required by contracting official.
has <b>1</b> major error for a crop appraisal identified by review or otherwise	is not lost	take corrective OJT.
has <b>more than 1</b> major error for a crop appraisal identified by review	for <b>the crop</b> is lost	be terminated or take corrective OJT, if the SED or training official determines that the errors are correctable.
<p><b>Notes:</b> In each of the cases in this table, the Agreement or training official must determine the amount of Phase II OJT needed on an individual basis.</p> <p>LA will be recertified upon completion of the corrective action.</p> <p>If LA is fully certified and paid at the certified rate, the pay rate during decertification reverts back to the training rate per hour, <b>unless</b> LA maintains certification on 1 specific crop. If OJT is required before adjusting <b>any</b> crop, the pay rate reverts back to the training rate. During decertification periods, “TRN” or “OJT” shall be used as service codes. The system will pay the prevailing rates for the training.</p>		

67 Compensation by Training, Certification, and Service Criteria

A LA Compensation

LA's are paid by hourly rates based on a combination of certification and length of service.

**Note:** LA's receive compensation for both travel and training at the training rate effective during the training time period, including any field services performed for OJT.

When training is completed and LA's are considered fully certified, compensation is paid at the fully certified rate effective for the date the services are completed.

\*--LA's may be paid an increased rate after 1 year of fully certified service with FSA as--\* determined by the State Office loss adjustment specialist according to paragraph 68.

**Note:** See Exhibit 4 for the Pay Rate Table.

**\*--68 1-Year Fully Certified Service Criteria****A Effective Date**

State Office specialist responsible for LA management and training shall review LA's folder to determine whether 1 year of fully certified service as FSA LA have been completed. If so, LA is eligible to receive \$20 per hour for adjustment service rendered.

**Note:** Any 1 year of fully certified service by LA with FSA qualifies for the 1-year rate. Work performed by CED, insurance adjuster, or field reporter cannot be used to qualify for the higher rate.

**Example:** Mr. Smith signed his first CCC-455 on February 2, 2012, and was fully certified on March 1, 2012. Mr. Smith had signed CCC-455's and worked in 2012 and 2013. On March 1, 2013, when Mr. Smith attended update training and signed his CCC-455, he had completed 1 year of fully certified service. The State Office shall:

- complete the current CCC-455 with the correct pay rate for the date CCC-455 is signed
- notify County Offices that the effective date that Mr. Smith achieved the 1-year fully certified service was March 1, 2013.

State Offices shall use the Loss Adjuster Management System to update LA's 1-year certification date to March 1, 2013. An effective date shall **not** be entered if LA has not completed 1 year of fully certified service.

**Note:** If the 1-year fully certified service date has **not** been reached at the time CCC-455 is renewed, States shall insert the correct pay rate for the date CCC-455 is signed, but line through the pay rate and initial on the date 1-years certified service is reached, send the corrected copy to LA, and notify the County Office of the date.

**B Notification to County Offices**

State Office loss adjustment specialist is responsible for providing a list of approved LA's and effective 1-year service dates to County Offices.--\*

**69, 70 (Reserved)**

**71 (Withdrawn--Amend. 3)**



72 LA Review

**A Review Required**

SED or designated representative (CED, DD) trained in loss adjustment activities shall be responsible for:

- annually reviewing LA's work on FSA-577, using procedure in 2-CP
- reviewing LA's work, when determined advisable.

**Note:** This review may be triggered by a second party review or by rejection of the claim by producer or County Office.

**B Documenting Review**

The designated reviewer shall:

- document any major errors discovered in the review on FSA-577
- if the error or errors result in decertification, provide documentation to the appropriate State or County Offices
- notify LA, in writing, of decertification or change in pay rate and effective dates.

73-199 (Reserved)



## Part 3 LA Travel and FSA-449A's

## 200 Authority

## A Regulations

The following regulations apply to LA travel:

- GSA Federal Travel Regulations, 41 CFR Chapter 301, Travel Allowances
- Department Manual 2300-1, Agriculture Travel Regulations.

## B CCC-455

CCC-455 authorizes most LA travel on a continuing basis. AD-202's shall be issued for all travel not covered by the agreement authority, such as travel outside the continental U.S.

**Note:** Travel advances and Government-issued credit cards, including telephone credit cards, are **not** approved for LA's.

## C FSA-449A's for \$1,500 or More

CED's shall obtain approval of all FSA-449A's totaling \$1,500 or more from the State Office loss adjustment specialist or designated officer. A register listing all FSA-449A's of \$1,500 or more **must** be maintained and submitted to the State Office at the end of the crop year. County Offices shall submit the register annually, by February 5th of the following calendar year. State Offices shall submit the report to PECD by February 15th. State Office loss adjustment specialist or designee **must** perform a mandatory detail audit by April 1 of at least 10 percent of county FSA-449A's submitted on the register.

The State Office shall submit a brief narrative report of the results of the audit to PECD, Common Disaster Provisions Section. The report should state the following:

- total payments listed on the reports
- number checked
- number of discrepancies found
- the action taken for corrections.

201, 202 (Reserved)

203 (Withdrawn--Amend. 6)

204, 205 (Reserved)





**206 LA Responsibilities**

**A LA's Responsibilities**

LA's shall:

- comply with all Federal travel regulations
- legibly and correctly fill out FSA-449-A's and FSA-449-B's for all work issued in a pay period, and submit to the designated approving official
- be responsible for excess costs and any additional expenses incurred for personal preference or convenience.

**207, 208 (Reserved)**



**209 General Motor Vehicle Travel****A Mileage**

If other than rural area travel is involved, mileage shown in Standard Highway Mileage Guides may be used. Any deviations from distances shown in Standard Highway Mileage Guides must be explained.

**Note:** LA's shall confer with CED's on whether travel from distant areas is allowed to deliver paperwork under various conditions. The most economical and/or expedient method must be used.

**B Arrival and Departure Times**

\*--LA records the time of arrival and departure from the farm on FSA-449-B and in personal--\* daily itinerary records.

**C Reimbursements**

The mileage reimbursement rate for privately-owned vehicles is the rate per mile as published in the Federal Register by GSA. Reimbursement is allowed for necessary parking fees, tolls, etc.

**D Traveling With Others**

To reduce costs, LA's should ride together or with Government employees whenever possible.

**Example:** For OJT or meetings.

**210 Common Carrier****A Costs**

When the use of a common carrier is authorized, every effort should be made to obtain Government-contract rates. Receipts are required before reimbursement is authorized.

**211 General Travel****A Duty Station**

The official duty station is LA's residence. LA may have only 1 official duty station.

The temporary duty station is the location of overnight lodging required by a work assignment or the location of a work assignment.

**B Work Hours**

LA should be limited to 12 hours work per day, including travel time. At the end of a workday, whether LA returns to the official duty station or lodges at the temporary duty station depends on:

- distance from the temporary duty station to the official duty station
- work remaining in the area
- cost to the Government
- guidance from FSA approving official.

**C Within 50 Miles**

If the temporary duty station is within 50 miles of the official duty station, LA is expected to return to the official duty station each day.

**D More Than 50 Miles**

If the distance between the temporary and official duty stations is greater than 50 miles, and there is more than 8 hours work expected at the temporary duty station, it is frequently more economical to the Government to authorize overnight lodging and M&IE. LA may choose to return to the official duty station each day. However, reimbursement for mileage may **not** exceed per diem costs that would have incurred by remaining at the temporary duty station.

**211 General Travel (Continued)****E Weekends and Holidays**

Occasionally, LA's will not be able to complete their work at a temporary duty station before a weekend or holiday, requiring a continuation of duties at the temporary duty station immediately following the weekend or holiday. In these instances, the per diem and mileage costs allowed are the amounts most economical to the Government.

**Example:** If the per diem and mileage costs for LA to return to the official duty station is less than the per diem incurred if LA remained at the temporary duty station, LA is expected to return to the official duty station. Likewise, if it is more economical to the Government for LA to remain at a temporary duty station, but LA elects to return to the official duty station, mileage costs exceeding the per diem for staying at the temporary duty station will not be allowed.

**F Work Assignments**

In making work assignments, the approving official must decide which LA's will accomplish the work in the least amount of time and Government cost. Consideration should be given to the amount of work in the temporary duty station area, the willingness of LA's to lodge at the temporary duty station, and the travel time required between the temporary and official duty stations.

**G FSA-449-A's**

For each day of travel, LA's must:

- indicate on FSA-449-A whether they returned to the official duty station or remained at the temporary duty station
- claim the appropriate mileage or per diem.

**212-216 (Reserved)**



217 Per Diem

**A Definition of Per Diem**

Per diem is a reimbursement for daily food and lodging expenses. The per diem allowance is reported separately from transportation and other miscellaneous travel expenses. LA’s may be allowed per diem for assigned work away from the official duty station according to the rules in this paragraph.

**B Definition of Maximum Per Diem Rates**

Maximum per diem rates, published in the Federal Register by GSA:

- are the maximum reimbursements for daily food and lodging expenses within the continental U.S.
- consist of a fixed amount for the M&IE rate, plus a maximum allowable amount for lodging, including State and local taxes
- differ by locality; higher rates are allowed for higher cost geographic areas.

**\*--Note:** These are the same rules used for regular employees and may be found in either of the following:

- <http://intranet.fsa.usda.gov/travel/travel.htm>
- 118-FI.--\*

**C Reimbursement Without Lodging**

Use the following table to determine eligibility for per diem without lodging.

**Note: Per diem must be approved in advance, in writing,** by the FSA approving official. A FAX approval may be accepted, followed by receipt of the hard copy.

<b>IF the temporary duty station for LA is...</b>	<b>THEN...</b>
<b>within</b> a 50-mile radius of the official duty station, or the total time required to complete work assignments and travel to and from the temporary duty station is 12 hours or less	per diem shall <b>not</b> be approved.
<b>outside</b> a 50-mile radius of the official duty station, and the total time required to complete work assignments and travel to and from the temporary duty station is more than 12 hours	if LA returns to the official duty station within the same calendar day or secures lodging at the temporary duty station, LA will be entitled to M&IE reimbursement according to subparagraph D.

## 217 Per Diem (Continued)

**D Reimbursement With Lodging**

Per diem reimbursement when lodging is claimed is determined by the following:

- the maximum per diem rate applicable to a calendar day (12:01 a.m. to 12 midnight) is determined by LA's location at midnight on that day
- when LA is at a temporary duty station for an entire day, the entire M&IE rate will be used as the reimbursement for that day
- partial day M&IE reimbursement is determined to be 3/4 of applicable M&IE
- total per diem reimbursement for a day is the M&IE reimbursement plus actual lodging cost, including State and local taxes, not to exceed the maximum per diem rate.

**E Times of Arrival and Departure**

Information from FSA-449-A and FSA-449-B is used to determine LA pay. LA must record on FSA-449-B itinerary section, the dates, hours, and places that each workday began and ended.

- The workday begins at the actual time of departure from the place of lodging, either the official or temporary duty station. The workday ends at the actual time of return to the place of lodging.

**Note:** Travel time is included in the workday length.

- The times recorded should be the time zone in effect at the duty station.
- Place is the authorized official or temporary duty station.



217 Per Diem (Continued)

**E Times of Arrival and Departure (Continued)**

- Start and stop time must be **actual** times.

**\*--Example:**

Start	Amount of Time per Activity	Time of Day	Round To
Leave official duty station at 8 a.m.		8 a.m.	
Drive time to farm	50 minutes	8:50 a.m.	
1 <sup>st</sup> inspection	45 minutes	9:35 a.m.	
2 <sup>nd</sup> inspection	1 hour, 20 minutes	10:55 a.m.	1 hour, 15 minutes
3 <sup>rd</sup> inspection	30 minutes	11:25 a.m.	
4 <sup>th</sup> inspection	10 minutes	11:35 a.m.	15 minutes
Return to official duty station	50 minutes	12:25 p.m.	
<b>Total hours</b>	4 hours, 25 minutes		
<b>Round total hours for the day to the nearest 15-minute increment</b>	4 hours, 30 minutes		

**Note:** Some inspection hours may need to be rounded to a 15-minute increment to comply with the Loss Adjuster Management web-based voucher system. However, compensation for a day of work cannot exceed the amount of hours between the start and end of the day (4 hours, 30 minutes from this example).--\*

**F Partial Day M&IE Reimbursement**

Federal Travel Regulation Amend. 54 allows a flat 3/4 of the applicable M&IE rate.

**Example:** M&IE rate is \$30. LA leaves official duty station at 5:50 a.m. and arrives at temporary duty station at 6:30 p.m.

\$22.50 M&IE (flat 3/4 rate of \$30)

On day of return, LA departs temporary duty station and arrives at official duty station at 11:30 a.m.

\$22.50 M&IE (flat 3/4 rate of \$30)

**G 12-Hour Allowance**

Federal Travel Regulation Amend. 54 established that 3/4 of the applicable M&IE rate would be the appropriate per diem allowance payment for travel of **more than 12 hours**, but not exceeding 24 hours, when no lodging is required and the temporary duty station is located more than 50 miles from the official duty station.

Reviewers shall ensure the per diem rate is entered correctly before key entry of FSA-449-B.

**218 Interrupted Travel****A Definition of Interrupted Travel**

Interrupted travel is when LA engages in other activities during an FSA-assigned workday, such as work for a private company or other personal activities.

**B Adjusted Reimbursements**

The travel expenses allowed shall not exceed what would have been incurred on uninterrupted travel. Mileage claimed shall not be greater than mileage to the duty station by a usually traveled route. Time spent on other activities must be subtracted from the workday before per diem is calculated.

**C Documentation of Nonassigned Activity**

Record the following on FSA-449-A, remarks section, or on an attachment:

- a description of the nonassigned activity

**Note:** If the interruption was work performed for a private company, include the name of the company.

- dates
- time interruption began to the time interruption ended.

## 219 Long-Distance Telephone Calls

### A Work-Related Telephone Calls

Work-related long-distance telephone calls will be reimbursed, if they are itemized on the telephone log showing the following:

- date
- locations of origination and designation of the call
- amount paid
- **unit number** for the inspection
- producer's name
- purpose of the call.

The telephone bill is required as supporting documentation as an attachment to the telephone log.

### B Personal Telephone Calls

A personal long-distance telephone call will be reimbursed, if all of the following are relevant:

- LA secures overnight lodging
- calls are brief to a member of the immediate family
- maximum aggregated amount for each travel period, such as consecutive days of official travel, does not exceed an amount equal to \$5 multiplied by the number of lodging nights.

**Note:** The aggregated amount includes access charges and charges for calls not completed.

Calls to the official duty station on the date of return from travel for notifying a change in schedule are acceptable.

**219 Long-Distance Telephone Calls (Continued)**

\* \* \*

**C Documentation**

On FSA-449-A:

- enter the total amount of official calls from the telephone log
- attach the telephone log to FSA-449-A as supporting documentation
- itemized telephone bills will be required as supporting documentation for calls itemized on the telephone log, unless the calls were placed from a pay telephone.

**220 Miscellaneous Expenses**

**A Limits**

Miscellaneous expenses are limited to small items necessary to perform loss adjustment. Whenever possible, obtain small items, such as pens, paper clips, photocopies, etc., from the County Office. Receipts for all expenses **must** be provided with FSA-449-A's.

**B Exclusions**

\*--Items, such as gloves, boots, calculators, cell phones, etc. are not considered FSA--\* miscellaneous expenses, as these items are considered the LA's responsibility and will not be accepted for reimbursement.

**221-223 (Reserved)**

224 Completing FSA-449A’s and FSA-449B’s

A FSA-449A’s and FSA-449B’s Responsibilities

The following table lists LA and approving official’s roles for completing FSA-449A’s and FSA-449B’s.

**Note:** FSA-449A’s and FSA-449B’s are on FSA Intranet.

Responsibility	Step	Action
LA	1	<p>Prepares FSA-449A and FSA-449B for <b>each pay period</b>, submitting separate forms for the following:</p> <ul style="list-style-type: none"> <li>• NAP inspections</li> <li>•*--OTHER inspections (all inspections other than NAP and TAP)</li> <li>• different crop years</li> <li>• different rates of pay</li> <li>• each county and State.</li> </ul> <p><b>Reminder:</b> Use separate forms for NAP, TAP, and OTHER. On:</p> <ul style="list-style-type: none"> <li>• FSA-449A, Item 1, mark the appropriate box</li> <li>• FSA-449B, write “NAP”, “TAP”, or “OTHER”--* in the space directly above the form title.</li> </ul>
	2	Reviews for legibility and accuracy.
	3	Signs and dates the forms. Actual date must be used.
	4	Assembles all documents with a paper clip. Forwards to the approving FSA official.

224 Completing FSA-449A's and FSA-449B's (Continued)

A FSA-449A's and FSA-449B's Responsibilities (Continued)

Responsibility	Step	Action
Designated Approving Official	1	Reviews and corrects FSA-449A and FSA-449B. LA's initials are needed if "total amounts" are decreased. If the increase is \$5 or less, initials are not required.  * * *
	2	Assembles in the following order and staple:  <ul style="list-style-type: none"> <li>• FSA-449B</li> <li>• FSA-449A</li> </ul> * * *  <ul style="list-style-type: none"> <li>• FSA's telephone log</li> <li>• bills</li> <li>• receipts.</li> </ul>
	3	Reviews and initials approval in lower right corner of all supporting documents.
	4	Approves FSA-449A and date.  <b>Note:</b> The review is very important. Signing and entering the reviewer's code (State and county code) must signify that a <b>conscious effort</b> was made to critique and examine FSA-449B and FSA-449A.
	5	Keeps copies of FSA-449A's, FSA-449B's, and supporting documents under file NAP 6-3, Voucher Folders, in LA folder.
	6	Enters FSA-449A information into the automated Voucher Entry System according to Part 4. Pay FSA-449A's according to Part 5.

225 Instructions for Completing FSA-449A's

A Completing FSA-449A's

Use the following table to complete FSA-449A. Do **not** use ditto marks or asterisks.

\*--

Item	Instructions
1	Check "NAP" or "OTHER" on FSA-449A. Specify "other".
2	Enter LA's name as shown on CCC-455.
3	Enter 5-digit State and county code where the work is being done.  <b>Note:</b> FSA-449A <b>must</b> be completed and submitted in each county where the work is performed. <b>Submit FSA-449A's</b> for training and hourly pay <b>as directed</b> by the State Office loss adjustment specialist.
4	<b>Leave blank.</b> FSA-449A number will be assigned by LA automated Voucher Entry System when processed by FSA employee. <b>FSA employee shall enter this number when assigned by the automated process.</b>
5	Enter the <b>crop year</b> for the inspection. Disregard the calendar or FY the inspection occurred for this entry.  <b>Example:</b> An inspection on a given farmer's 2001 winter crop performed may be done on the same day as an inspection for the 2002 crop. <b>Separate FSA-449A's must be submitted to avoid mixing crop years.</b> Ensure that CCC-455 exists for the timeframe for which the work is performed.
6	Number consecutively for every valid line entry. Do not number blank lines or whole lines that have been lined out. Continue numbering from 1 page to the next of a multi-page FSA-449A.  <b>Note:</b> A separate line must be used for every variation in the combination of producer, dates, crops, planting period, inspection types, or unit number, etc.
7	Enter month, day, and year of the line inspection.

--\*

225 Instructions for Completing FSA-449A's (Continued)

A Completing FSA-449A's (Continued)

Item	Instructions
*--8	<p>Enter the abbreviation for the type of inspection made according to the definitions of inspections in Exhibit 5.</p> <p>If 2 types of inspections were performed on the farm, make 2 line entries, 1 for each type of inspection. The automated system will generate the hourly rate and compute the payment.</p>
9	<p>Enter producer's name for the inspection performed and any other helpful information.</p>
10--*	<p>Enter the numeric crop code of the crop inspected from 2-CP, Exhibit 10.5. Each line must carry a crop code.</p>



225 Instructions for Completing FSA-449A’s (Continued)

A Completing FSA-449A’s (Continued)

Item	Instructions
*--11	Enter unit number for the inspection. Leave blank if the inspection is not for a specific unit or CCC-576 is not applicable at this point, such as APH, growing season inspection, or preharvest inspection.
12	Enter travel hours for the inspection. This is the amount of time required to travel to the inspection site. See subparagraph 217 E for guidance.  <b>Note:</b> Travel hours can be hours from office to site or from site to site, the actual time spent driving, riding with someone else, or on a common carrier.
13	Enter number of hours required to complete the inspection at the particular site.
14	Enter total compensation hours by totaling line items 12 and 13.
15	Enter line total for items 12 through 14, total the results of items 12 and 13 in items 15A and 15B, and enter the sum in item 15C.  <b>Note:</b> Entry for item 15C should equal the total of line items for item 14.
16	Enter any remarks about the inspection in this item.
17	Enter total compensation hours from item 15C.
18	Enter hourly rate (\$20, \$18, or \$10).
19	Enter total pay due for total compensation hours by multiplying item 17 by item 18. This is the amount due for both travel and inspection (compensatory) hours.
20	Enter travel dollar amount from FSA-449B, item 7.
21	Enter amount for the total claim by totaling items 19 and 20.
22	LA must sign and date.
23--*	Approving official shall sign, date, and enter proper approval code as follows:  <ul style="list-style-type: none"> <li>• CED enter State/county code</li> <li>• State Office representative enter State code and 000.</li> </ul>

Use FSA-449A to dataload the automated voucher according to Part 4. The automated voucher will compute total compensation and total claim amount. If the automated and paper FSA-449A totals do not agree, make adjustments to either the automated line item entries or paper FSA-449A calculations. Ensure that LA initials changes to the paper FSA-449A or FSA-449B.

225 Instructions for Completing FSA-449A's (Continued)

B FSA-449A, Example 1

The following is an example of FSA-449A, displaying line item work performed on the same day, for the same unit, by LA.

\*--

This form is available electronically.										Page 1 of 1	
FSA-449A (09-26-13)				USDA FSA		1. Check Below if Claim Numbers Filed are for NAP or "Other." <input checked="" type="checkbox"/> NAP <input type="checkbox"/> OTHER If "Other" specify:			2. Adjuster's Name (As shown on Loss Adjuster Agreement) Danny Noble		
<b>VOUCHER FOR PAYMENT OF SERVICES FOR LOSS ADJUSTMENT</b>						3. State and County Code 48-051		4. Voucher Number		5. Crop Year 2013	
6. Line No.	7. Date			8. Type of Inspection	9. Producer's Name for Inspection Performed	10. Crop Code	11. Unit Number	12. Travel Hours	13. Inspection Hours	14. Total Comp. Time (Total of Items 12 and 13)	
	Month	Day	Year								
1	1	9	2013	FIN	John Doe	0102	0123	1.0	2.5	3.5	
2	1	9	2013	PLI	Sam Smith	0146	0123	.5	1.0	1.5	
3	1	9	2013	FIN	Joe Jones	0146	0123	1.0	3.0	4.0	
<b>15. TOTALS:</b>								15A. Total Travel Hours 2.5+	15B. Total Inspection Hours 6.5=	15C. Total Comp. Time (Total of Items 15A and 15B.) 9.0	
16. Remarks				17. Total Comp. Time (Total from Item 15C.) 9.0	18. Hourly Rate x 20	19. Total Compensation (Item 17 times Item 18) = 180		20. Travel (Enter travel dollar amount from FSA-449B, Item 8) + \$ 40.26	21. Total Claim (Total of Items 19 and 20) = \$ 220.26		
22. I certify that this claim is correct and proper and the payment or credit has not been received.						23. I certify that the information provided on this form is true and correct to the best of my knowledge and belief.					
22A. STATE LOSS ADJUSTMENT REPRESENTATIVE'S SIGNATURE /s/ Signature				22B. DATE (MM-DD-YYYY) 01-12-2013	23A. APPROVING OFFICIAL'S SIGNATURE /s/ CED			23B. CODE NO. 48-051	23C. DATE (MM-DD-YYYY) 03-02-2013		
<small>The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish).</small>											
<small>If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at <a href="http://www.ascr.usda.gov/complaint_filing_cust.html">http://www.ascr.usda.gov/complaint_filing_cust.html</a>, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 696-7442 or email at <a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a>. USDA is an equal opportunity provider and employer.</small>											

\*--

225 Instructions for Completing FSA-449A's (Continued)

C FSA-449A, Example 2

The following is an example of FSA-449A, displaying line item work performed over several days, for different units, by LA.

\*--

This form is available electronically.										Page 1 of 1	
FSA-449A (09-26-13)				USDA FSA		1. Check Below if Claim Numbers Filed are for NAP or "Other." <input checked="" type="checkbox"/> NAP <input type="checkbox"/> OTHER If "Other" specify:			2. Adjuster's Name (As shown on Loss Adjuster Agreement) Danny Noble		
<b>VOUCHER FOR PAYMENT OF SERVICES FOR LOSS ADJUSTMENT</b>						3. State and County Code 48-453		4. Voucher Number		5. Crop Year 2013	
6. Line No.	7. Date			8. Type of Inspection	9. Producer's Name for Inspection Performed	10. Crop Code	11. Unit Number	12. Travel Hours	13. Inspection Hours	14. Total Comp. Time (Total of Items 12 and 13)	
	Month	Day	Year								
1	1	12	2013	FIN	John Smith	0146	0123	4.5	3.5	8.0	
2	1	13	2013	PLI	Sam Joe	0102	0365	1.0	3.0	4.0	
3	1	13	2013	FIN	Sally Doe	0146	0284	0	2.0	2.0	
4	1	13	2013	PLI	Ted Jones	0102	0123	.5	2.0	2.5	
5	1	14	2013	FIN	ABC, Inc.	0146	0123	4.0	5.0	9.0	
<b>15. TOTALS:</b>								15A. Total Travel Hours 10.0+	15B. Total Inspection Hours 15.5=	15C. Total Comp. Time (Total of Items 15A and 15B) 25.5	
16. Remarks				17. Total Comp. Time (Total from Item 15C.) 25.5	18. Hourly Rate x 20	19. Total Compensation (Item 17 times Item 18) = 510	20. Travel (Enter travel dollar amount from FSA-449B, Item 8) + \$ 417.89	21. Total Claim (Total of Items 19 and 20) = \$ 927.89			
22. I certify that this claim is correct and proper and the payment or credit has not been received.						23. I certify that the information provided on this form is true and correct to the best of my knowledge and belief.					
22A. STATE LOSS ADJUSTMENT REPRESENTATIVE'S SIGNATURE /s/ Signature				22B. DATE (MM DD YYYY) 01-12-2013	23A. APPROVING OFFICIAL'S SIGNATURE /s/ CED		23B. CODE NO. 48-453	23C. DATE (MM DD YYYY) 03-02-2013			
<small>The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 945-6136 (in Spanish). If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at <a href="http://www.ascr.usda.gov/complaint_filing_cust.html">http://www.ascr.usda.gov/complaint_filing_cust.html</a>, or at any USDA office, or call (866) 632-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 690-7442 or email at <a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a>. USDA is an equal opportunity provider and employer.</small>											

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226, 227 (Reserved)



228 Instructions for Completing FSA-449B's

A Completing FSA-449B's

Use the following table to complete FSA-449B.

\*--

Item	Instructions
1	Enter LA's name as shown on CCC-455.
2	Enter State and county code where the work was performed.  <b>Note:</b> County name may also be entered.
3	Enter crop year for the inspection.
4	Enter month and date of the travel for each day's itinerary.
5	<p>The itinerary is a daily travel log. It must always show the actual time the travel began and ended. If there is an interruption in the daily itinerary for personal reasons the circumstances must be recorded in the remarks section and on FCI-6, if applicable:</p> <ul style="list-style-type: none"> <li>• dates</li> <li>• times</li> <li>• time interruption began to time interruption ended.</li> </ul> <p>All travel originates at the official duty station (LA's residence) or, while traveling on per diem, the temporary duty station (LA's place of lodging).</p>
<b>Itinerary From</b>	
City and State	Enter the city and State, such as Des Moines, IA.
Time (AM or PM)	Enter time, such as 8:10 a.m. When changing time zones, enter time in effect from place of travel. Military time may be used (hours 00:00 to 23:59).
Carrier and Flight Number	Enter carrier's name, such as Delta, and flight number. Enter transportation, such as Greyhound, etc. If transportation was by privately-owned vehicle, ENTER "POV". If no transportation expense is claimed, enter the type of work. (When no compensation is claimed, but temporary duty station expenses are claimed, enter approved explanation that prevented work from occurring.)

--\*

228 Instructions for Completing FSA-449B's (Continued)

A Completing FSA-449B's (Continued)

Item	Instructions	
*--5--*	<b>Itinerary To</b>	
(Cont)	City and State	Enter city and State where workday was completed. City or State abbreviations are acceptable. For each day of travel, enter city in which official travel duty is performed.
	Time (AM or PM)	Enter time workday was completed.
	Mealtime Deducted	Enter, in half hour increments, the amount of mealtime taken each day. <b>It is expected that LA will take appropriate mealtimes without compensation.</b> If more than 1 mealtime is taken, enter only the total amount to be deducted that day. If no mealtime is taken, ENTER "0."
	Daily Comp. Hours	Compute time for each day by subtracting the mealtime from the number of hours between start work (from) and stop work (to) times, and enter in whole and half hours. Total compensation hour for the pay period should be computed by totaling this line and entering the total in the "Total Comp. Hours" box to the right. This figure must agree with *--the figure on FSA-449A, item 17.--*
	Total Comp. Hours	Total the compensations hours for the line in the far right column.

228 Instructions for Completing FSA-449B's (Continued)

A Completing FSA-449B's (Continued)

Item	Instructions	
*--6	<b>Per Diem</b>	
	Per Diem Days	Enter, to 2 decimal places, the total number of per diem days claimed.  <b>Example:</b> 1.00.  Total the number of days in the far right column.
	Lodging Amount	Enter total dollars and cents for lodging per day (excluding taxes), but not more than the allowable rate per day. Total the lodging amounts in the far right column.
	M&IE	Enter amount for M&IE allowed per day. Total M&IE in the far right column.
	Total Per Diem	Enter total for daily per diem, lodging, and M&IE for each day. Total the line item in the far right column.
7--*	<b>Other</b>	
	Telephone (log attached)	Enter total amount claimed for telephone expenses.
	Miscellaneous	Enter small expenses not properly charged under any other item. This item provides for the reimbursement of materials, such as replacement batteries for testing equipment, photocopies, and motel taxes. Explanations should be made in remarks sections. Receipts must be attached.
	Other Travel (toll, parking, etc.)	Enter charges for toll and parking. Receipts must be attached. Car rental must be approved in advance.
	Mileage	If private vehicle is used, enter total mileage driven each day in whole miles. Enter total miles in the far right column and on the last page. For each day a mileage is shown, the itinerary section must show "from city and State" and "to city and State." Enter the miles and rate in the far right column, and compute the total mileage.

228 Instructions for Completing FSA-449B's (Continued)

A Completing FSA-449B's (Continued)

Item	Instructions
*--8--*	Enter total amount of claim by totaling the following: <ul style="list-style-type: none"> <li>• total per diem</li> <li>• telephone calls</li> <li>• miscellaneous</li> <li>• other travel expenses and mileage.</li> </ul> *--If none, leave blank. Transfer total to FSA-449A, item 20.--*
Remarks	Enter any pertinent remarks needed to explain any unusual entry or lack of entry in item 10.
*--9--*	LA shall sign and date, certifying that entries are correct and proper and that payment has not been received for the work.



228 Instructions for Completing FSA-449B's (Continued)

B FSA-449B, Example 1

The following is an example of FSA-449B, displaying travel and expenses for work performed on the same day, for the same unit, and carried forward to FSA-449A.

\*--

This form is available electronically.													
<b>FSA-449B</b> (09-26-13)		U.S. DEPARTMENT OF AGRICULTURE Farm Service Agency							1. Adjuster's Name (As shown on Loss Adjuster Agreement, CCC- 456) Danny Noble				
<b>LOSS ADJUSTER'S TRAVEL AND EXPENSE CLAIM FORM</b>											2. State and County Code 46-051 (Burleson Co.)		
This form must be completed by loss adjusters/contractors for travel and expenses claimed.													
3. CROP YEAR	4. Dates →		MO	DAY	MO	DAY	MO	DAY	MO	DAY	MO	DAY	Remarks
2013	1	9											
I T I N E R A R Y	<b>FROM: City/State</b>		Bryan TX										
	Time (AM or PM)		8:00 am										
	Carrier and Flight No.		POV										
	<b>TO: City/State</b>		Bryan TX										
	Time (AM or PM)		5:30 pm										
	Mealtime Deducted	.50											
	Daily Comp Hours	9.0										Total Comp. Hours 9.0	
P E R D I E M	Per Diem Days	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total No. Per Diem Days \$	
	Lodging Amount	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Lodging Amount \$	
	M&IE (\$ )	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total M&IE \$	
	Total Per diem	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Per Diem \$	
O T H E R	Telephone (Phone log attached)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Telephone Calls \$	
	Miscellaneous	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Miscellaneous \$	
	Other Travel (toll, parking, etc.)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Other Travel \$	
Mileage	\$83	\$	\$	\$	\$	\$	\$	\$	\$	\$	03 Miles x .565 =46.90		
											8. Total Travel Claimed (Carryover over to FSA-449A Item 20) (Total Per Diem + Telephone + Misc. + Travel + Mileage) →		\$46.90
9. I certify that this statement is correct and proper and that payment or credit has not been received.							9A. ADJUSTER'S SIGNATURE /s/ Signature				9B. DATE (MM-DD-YYYY) 03-02-2013		
<small>The U.S. Department of Agriculture (USDA) prohibits discrimination against its customers, employees, and applicants for employment on the bases of race, color, national origin, age, disability, sex, gender identity, religion, reprisal, and where applicable, political beliefs, marital status, familial or parental status, sexual orientation, or all or part of an individual's income is derived from any public assistance program, or protected genetic information in employment or in any program or activity conducted or funded by the Department. (Not all prohibited bases will apply to all programs and/or employment activities.) Persons with disabilities, who wish to file a program complaint, write to the address below or if you require alternative means of communication for program information (e.g., Braille, large print, audiotape, etc.) please contact USDA's TARGET Center at (202) 720-2600 (voice and TDD). Individuals who are deaf, hard of hearing, or have speech disabilities and wish to file either an EEO or program complaint, please contact USDA through the Federal Relay Service at (800) 877-8339 or (800) 845-6136 (in Spanish). If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at <a href="http://www.ascr.usda.gov/complaint_filing_cust.html">http://www.ascr.usda.gov/complaint_filing_cust.html</a>, or at any USDA office, or call (866) 832-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 696-7442 or email at <a href="mailto:program.intake@usda.gov">program.intake@usda.gov</a>. USDA is an equal opportunity provider and employer.</small>													

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228 Instructions for Completing FSA-449B's (Continued)

C FSA-449B, Example 2

The following is an example of FSA-449B, displaying travel and expenses for work performed over several days, for different units, and carried forward to FSA-449A.

\*--

3. CROP YEAR		4. Dates		MO	DAY	MO	DAY	MO	DAY	MO	DAY	MO	DAY	MO	DAY	MO	DAY	MO	DAY	Remarks
2013		1	12	1	13	1	14													
6. ITINERARY	FROM: City/State	Bryan TX	Austin TX	Austin TX																
	Time (AM or PM)	8:00 am	8:00 am	8:00 am																
	Carrier and Flight No.	POV	POV	POV																
	TO: City/State	Austin TX	Austin TX	Bryan TX																
	Time (AM or PM)	4:30 pm	5:00 pm	5:30 pm																
	Mealtime Deducted	.50	.50	.50																
Daily Comp Hours	8.0	8.5	9.0																	Total Comp. Hours 25.5
6. PER DIEM	Per Diem Days	\$ .75	\$ 1.0	\$ .75	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total No. Per Diem Days \$2.5
	Lodging Amount max \$73.00	\$65.00	\$65.00	\$0	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Lodging Amount \$130.00
	M&IE (\$39.00)	\$29.25	\$39.00	\$29.25	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total M&IE \$97.50
	Total Per diem	\$94.25	\$104.00	\$29.25	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Per Diem \$327.5
7. OTHER	Telephone (Phone log attached)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Telephone Calls \$
	Miscellaneous Hotel Tax	\$4.50	\$4.50	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Miscellaneous \$9.00
	Other Travel (toll, parking, etc.)	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	Total Other Travel \$
Mileage	\$138	\$72	\$164	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	\$	374 Miles x .565 =211.31
8. Total Travel Claimed (Carryover over to FSA-449A Item 20) (Total Per Diem + Telephone + Misc. + Travel + Mileage) →																			\$46.90	
9. I certify that this statement is correct and proper and that payment or credit has not been received.																			9A. ADJUSTER'S SIGNATURE /s/ Signature	9B. DATE (MM-DD-YYYY) 03-02-2013

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If you wish to file a Civil Rights program complaint of discrimination, complete the USDA Program Discrimination Complaint Form, found online at [http://www.ascr.usda.gov/complaint\\_filing\\_cust.html](http://www.ascr.usda.gov/complaint_filing_cust.html), or at any USDA office, or call (866) 832-9992 to request the form. You may also write a letter containing all of the information requested in the form. Send your completed complaint form or letter by mail to U.S. Department of Agriculture, Director, Office of Adjudication, 1400 Independence Avenue, S.W., Washington, D.C. 20250-9410, by fax (202) 696-7442 or email at [program.intake@usda.gov](mailto:program.intake@usda.gov). USDA is an equal opportunity provider and employer.

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229-299 (Reserved)

**Part 4 Loss Adjuster Management System****300 Operating Environment****A Accessing the Loss Adjuster Management System**

Access the Loss Adjuster Management Home Page from the FSA Applications Intranet web site at [http://intranet.fsa.usda.gov/fsa/FSAIntranet\\_applications.html](http://intranet.fsa.usda.gov/fsa/FSAIntranet_applications.html). Under “Production Adjustment & Disaster Programs”, CLICK “Loss Adjuster Management”.

**Note:** Internet Explorer shall be used when accessing the Loss Adjuster Management System. Users will be prompted to login through the USDA eAuthentication Login Screen.

The Loss Adjuster Management System will use role-based access according to eAuthentication levels of National Administrative, State Administrative, and County Office, allowing users to:

- engage and use LA’s
- update core LA information
- complete a voucher for payment of services.

**Note:** LA’s will **not** have access to the Loss Adjuster Management System.

**\*--B Requesting Access for New State Office User Role**

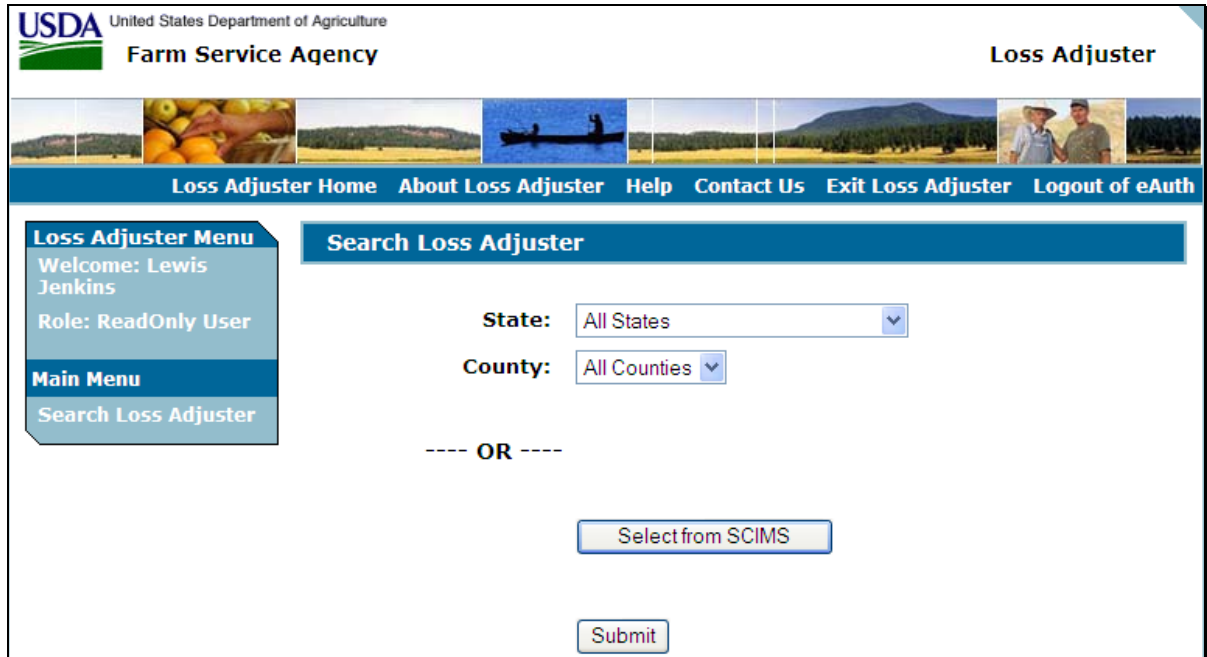
If State Office administrative access is needed for new State Office users, following instructions in 1-NAP, paragraph 1525.--\*

301 Search Loss Adjuster Screen

A Example of Search Loss Adjuster Screen

After a user is logged in and has been authenticated, the Search Loss Adjuster Screen will be displayed.

\*--



--\*

From the Search Loss Adjuster Screen, users may choose to search for a specific LA by:

- State and county
- selecting LA through SCIMS.

\* \* \*

B Action

From the Search Loss Adjuster Screen:

- State Office users may search for or add LA
- County Office users may search for LA.

302 Adding New LA

A Overview

Only State Administrative users may add a new LA.

A new LA’s core information must be entered into SCIMS according to 1-CM, paragraph 176, **before** processing 2012 and subsequent crop year vouchers can begin. The following must be taken into consideration when loading LA’s into SCIMS:

- some LA’s already exist in SCIMS
- headquarter county (county where LA lives) shall have the initial responsibility to load LA into SCIMS
- SCIMS no longer supports a customer type of “LA”

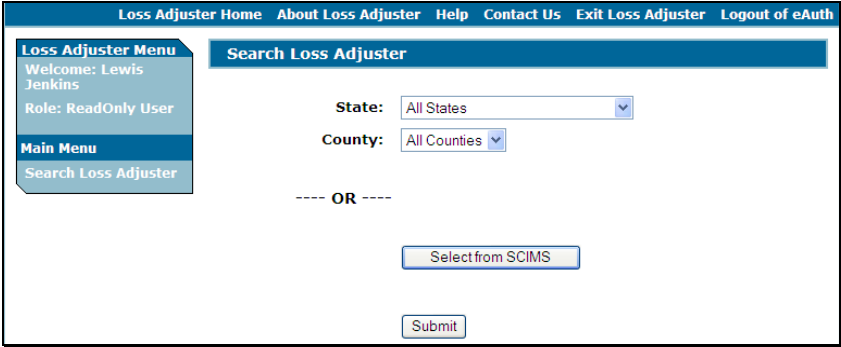
**Note:** Enter LA in SCIMS as either “individual” or “business”, using the business type they represent.

- a Legacy Link is required in all counties where LA performs duties following instructions in 1-CM.

**Note:** Do **not** delete LA from the Other Name and Address file, as prior year voucher processing revisions will still use that file.

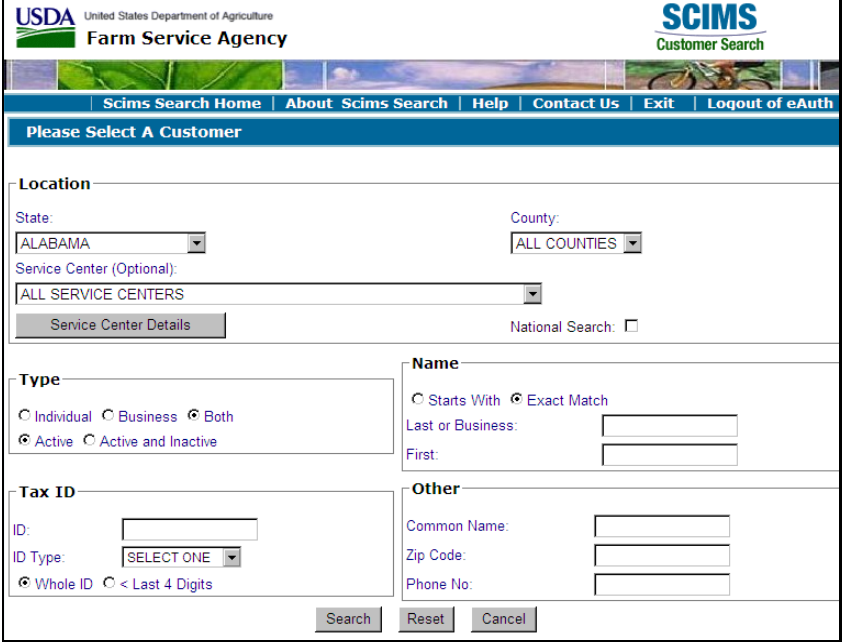
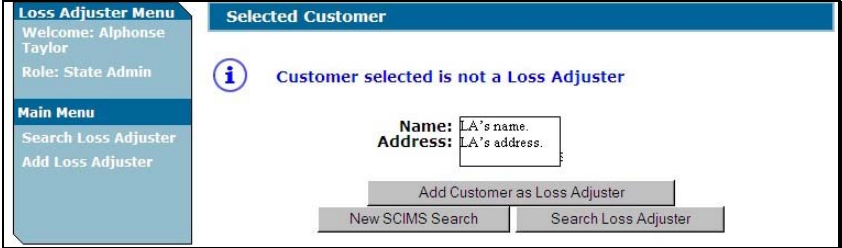
B Action

Follow this table to add a new LA to the Loss Adjuster Management System.

Step	Action	Result
1	<p>CLICK “Add Loss Adjuster” from the left navigation window of the Search Loss Adjuster Screen.</p> <p>*--</p>  <p style="text-align: right;">--*</p>	<p>Users will be directed to the SCIMS Please Select a Customer Screen.</p>

\*--302 Adding New LA (Continued)

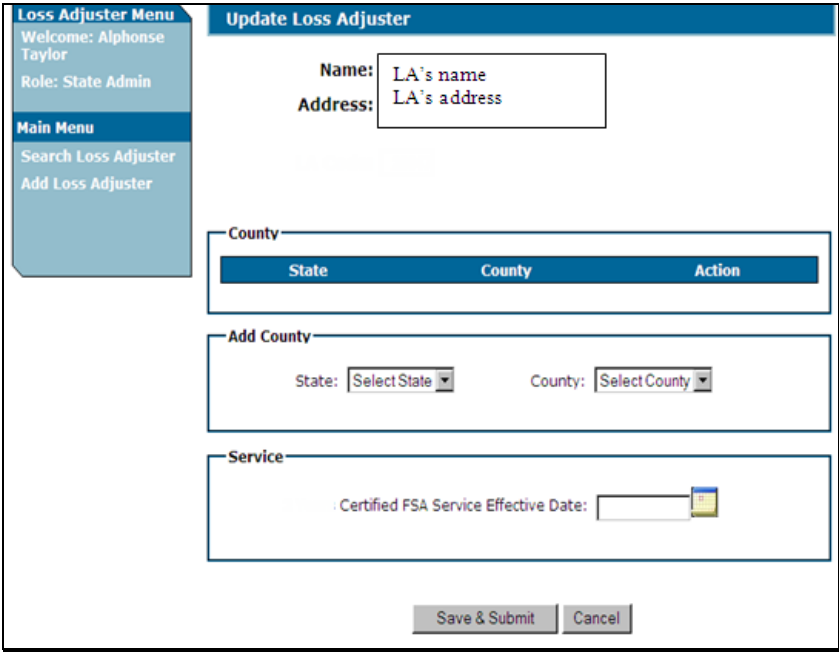
B Action (Continued)

Step	Action	Result
2	<p>Enter the new LA's core information and CLICK "Search".</p> 	<p>The Selected Customer Screen will be displayed.</p>
3	<p>CLICK "Add Customer as Loss Adjuster".</p> 	<p>The Update Loss Adjuster Screen will be displayed.</p>

--\*


302 Adding New LA (Continued)

B Action (Continued)

Step	Action	Result
4	<p>Use the drop-down lists to select the State and counties where it is anticipated LA will do the majority of work.</p> <p><b>*--Note:</b> Do <b>not</b> enter a date in the “1 Year Certified FSA Service Effective Date” box until the new LA has completed the 1-year certification requirements.</p> 	<p>The State and county will be displayed.</p>
5	<p>CLICK “Save &amp; Submit”.</p>	<p>LA will be added to the Loss Adjuster Management System, and the Select Loss Adjuster Screen will be displayed.</p>

302 Adding New LA (Continued)

B Action (Continued)

Step	Action	Result
6	<p>The Select Loss Adjuster Screen will display the following:</p> <ul style="list-style-type: none"> <li>• new LA</li> <li>* * *</li> <li>• counties where LA adjusts losses</li> <li>• “Vouchers” link.</li> <li>* _ _</li> </ul> 	



### 303 Updating LA’s Information

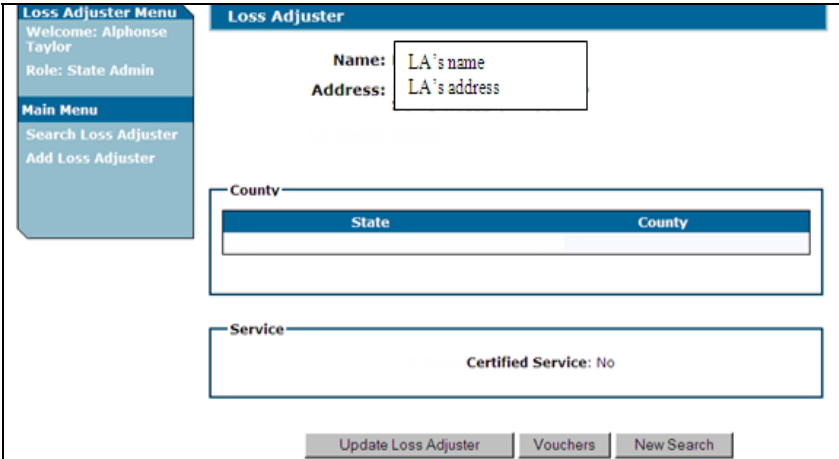
#### A Overview

\*--There may be times when LA’s information needs to be updated, such as a 1-year certification date or additional counties where LA adjusts losses.

**Note:** Do not enter a 1-year certification date into the system until LA has completed the requirements. The system reads the certification date to calculate the correct pay rate.

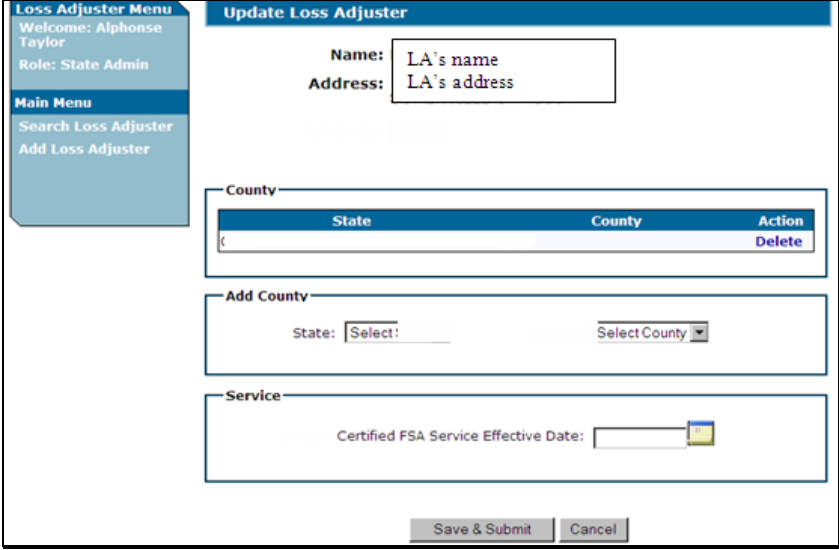
#### B Action

Follow this table to update LA’s information, such as their 1-year certification date.

Step	Action	Result
1	Select LA from either of the search methods from the Search Loss Adjuster Screen.	The Loss Adjuster Screen will be displayed with LA’s name and address.
2	<p>CLICK “Update Loss Adjuster”.</p> 	The Update Loss Adjuster Screen will be displayed.

303 Updating LA’s Information (Continued)

B Action (Continued)

Step	Action	Result
3	<p>*--Enter updated information, such as a 1-year certification date, and CLICK “Save &amp; Submit”.</p> 	<p>LA’s information will be updated.</p>

304 Creating New LA Voucher

A Overview

Voucher data entry must be loaded in the State or county where the adjustment service was performed. Most vouchers require CCC-576 to be filed for the unit.

**Exception:** Vouchers with:

- Review, Training, Update Training, Teaching, and Travel inspections may be entered without CCC-576
- APH, Growing Season, and Pre-Harvest inspections may be used with or without CCC-576.

304 Creating New LA Voucher (Continued)

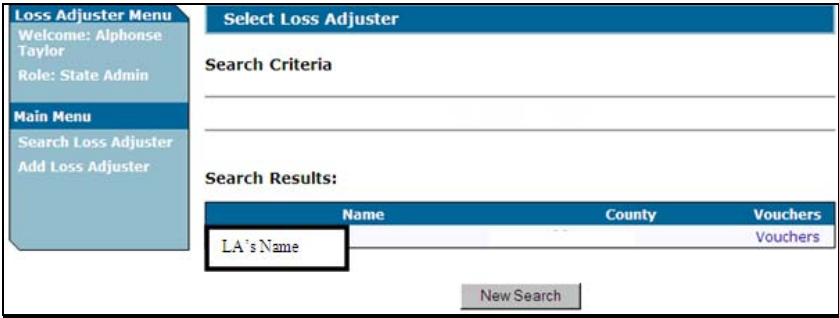
**B Prompt Payment Act Interest**

Prompt Payment Act interest shall be imposed for payments **not** made within 30 calendar days of the date LA submits the voucher and all supportive documents to the County Office.

**Note:** The Loss Adjuster Management System will **not** automatically compute prompt payment interest. See prompt payment procedure in 61-FI.


**C Creating New Voucher**

Follow this table to create a new voucher.

Step	Action	Result
1	*--Select LA from either of search methods from the Search Loss Adjuster Screen.	The Select Loss Adjuster Screen will be displayed with LA's name.
2	<p>CLICK "Vouchers".</p> 	The Select Voucher Screen will be displayed.

304 Creating New LA Voucher (Continued)

C Creating New Voucher (Continued)

Step	Action	Result
3	<p>A new voucher can be created, and current and past vouchers can be viewed, updated, or deleted. Use the drop-down list to select the desired crop year.</p> <p>*--</p>  <p>--*</p> <p><b>Note:</b> The Select Voucher Screen will display all vouchers for the crop year selected in the drop-down list.</p>	<p>The desired crop year will be displayed.</p>
4	<p>CLICK “Add Voucher”.</p>	<p>The Update Loss Adjuster Voucher Screen will be displayed.</p>

304 Creating New LA Voucher (Continued)

D Example of Update Loss Adjuster Voucher Screen

The following is an example of the Update Loss Adjuster Voucher Screen.

\*--

**Loss Adjuster Menu**  
Welcome: Alphonse Taylor  
Role: State Admin

**Main Menu**  
Search Loss Adjuster  
Add Loss Adjuster

**Update Loss Adjuster Voucher**

**Loss Adjuster:** \_\_\_\_\_ **State:** Select State

**Voucher:** \_\_\_\_\_ **County:** Select County

**Year:** 2012

**FSA-449-B Travel Data**

Submission Date:

Per Diem(\$):  Mileage(\$):

Other Travel(\$):  Car Rental(\$):

Common Carrier(\$):  Subsistence(\$):

Telephone(\$):  Miscellaneous(\$):

Total Travel Claim (\$): 0.00

**Recalculate**

**FSA-449-A Inspection Data**

Date	Insp. Type	Unit No.	Crop	Travel Hours	Insp. Hours	Action
------	------------	----------	------	--------------	-------------	--------

**Add Inspection Line**

**Approval**

Approval Date:

**Save and Submit** **Delete** **Cancel**

--\*

304 Creating New LA Voucher (Continued)

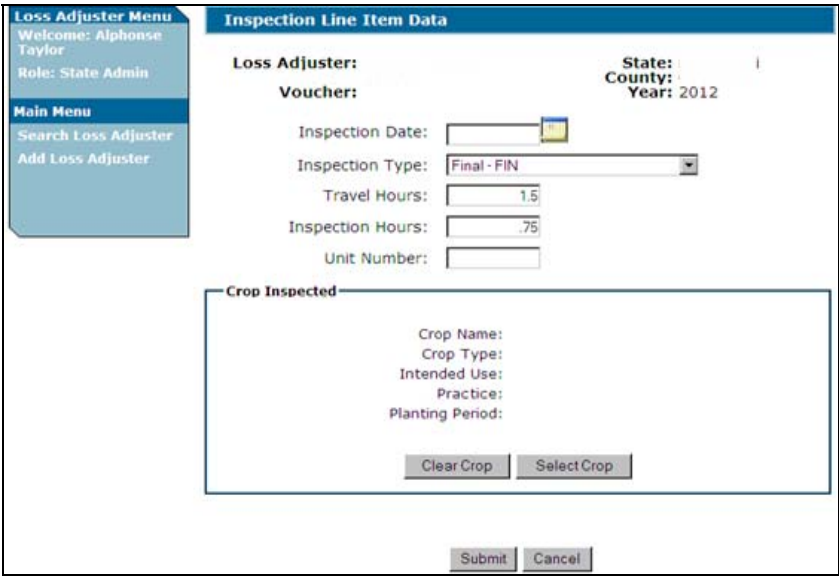
**E Completing New Voucher**

Follow this table to complete a new voucher using the Update Loss Adjuster Voucher Screen.

Step	Action	Result
1	Use the drop-down lists to select the State and county where the work was performed.	The State and county will be displayed.
2	In the FSA-449B Travel Data box, enter the submission date by clicking the calendar icon and enter all applicable expenses.	The submission date and expenses will be displayed.
3	In the FSA-449A Inspection Data box, CLICK “Add Inspection Line”.	The Inspection Line Item Data Screen will be displayed.

**F Completing Inspection Line Item Data Screen**

Follow this table to complete the Inspection Line Item Data Screen.

Step	Action	Result
1	<p>Click the calendar icon to enter the inspection date. *--</p>  <p>--*</p>	The inspection date will be displayed.
2	<p>Use the drop-down list to select the inspection type.</p> <p><b>Note:</b> All inspection types are included in the drop-down list.</p>	The inspection type will be displayed.

\*--304 Creating New LA Voucher (Continued)

F Completing Inspection Line Item Data Screen (Continued)

Step	Action	Result																							
3	Enter travel and inspection hours. Travel and inspection hours must be numeric up to 2 digits with 1 or 2 decimals. Valid decimal amounts are: <ul style="list-style-type: none"> <li>• .25 for 15 minutes</li> <li>• .5 for 30 minutes</li> <li>• .75 for 45 minutes.</li> </ul>	Travel and inspection hours will be displayed.																							
4	Some inspection types, such as “Final”, require a unit number and crop information. If required, enter the unit number and CLICK “Select Crop”.	The Select Crop Screen will be displayed with the crops associated to the unit number.																							
5	Select the crop and CLICK “Submit”. <div data-bbox="337 835 1198 1159" style="border: 1px solid black; padding: 5px; margin: 10px 0;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="background-color: #4F81BD; color: white; padding: 2px;"><b>Loss Adjuster Menu</b></td> <td style="background-color: #4F81BD; color: white; padding: 2px;"><b>Select Crop</b></td> </tr> <tr> <td style="padding: 2px;">Welcome: Alphonse Taylor Role: State Admin</td> <td style="padding: 2px;">Unit Number: 200</td> </tr> <tr> <td style="background-color: #4F81BD; color: white; padding: 2px;"><b>Main Menu</b></td> <td style="padding: 2px;"> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #4F81BD; color: white;">Crop</th> <th style="background-color: #4F81BD; color: white;">Type</th> <th style="background-color: #4F81BD; color: white;">Intended Use</th> <th style="background-color: #4F81BD; color: white;">Practice</th> <th style="background-color: #4F81BD; color: white;">Planting Period</th> </tr> </thead> <tbody> <tr> <td><input type="radio"/> ASPARAGUS</td> <td></td> <td></td> <td></td> <td>01</td> </tr> <tr> <td><input type="radio"/> BEETS</td> <td>HYBRID</td> <td></td> <td></td> <td>01</td> </tr> </tbody> </table> </td> </tr> <tr> <td style="padding: 2px;">Search Loss Adjuster Add Loss Adjuster</td> <td style="text-align: center; padding: 2px;"> <input type="button" value="Submit"/> <input type="button" value="Cancel"/> </td> </tr> </table> </div>	<b>Loss Adjuster Menu</b>	<b>Select Crop</b>	Welcome: Alphonse Taylor Role: State Admin	Unit Number: 200	<b>Main Menu</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #4F81BD; color: white;">Crop</th> <th style="background-color: #4F81BD; color: white;">Type</th> <th style="background-color: #4F81BD; color: white;">Intended Use</th> <th style="background-color: #4F81BD; color: white;">Practice</th> <th style="background-color: #4F81BD; color: white;">Planting Period</th> </tr> </thead> <tbody> <tr> <td><input type="radio"/> ASPARAGUS</td> <td></td> <td></td> <td></td> <td>01</td> </tr> <tr> <td><input type="radio"/> BEETS</td> <td>HYBRID</td> <td></td> <td></td> <td>01</td> </tr> </tbody> </table>	Crop	Type	Intended Use	Practice	Planting Period	<input type="radio"/> ASPARAGUS				01	<input type="radio"/> BEETS	HYBRID			01	Search Loss Adjuster Add Loss Adjuster	<input type="button" value="Submit"/> <input type="button" value="Cancel"/>	A voucher summary will be displayed.
<b>Loss Adjuster Menu</b>	<b>Select Crop</b>																								
Welcome: Alphonse Taylor Role: State Admin	Unit Number: 200																								
<b>Main Menu</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="background-color: #4F81BD; color: white;">Crop</th> <th style="background-color: #4F81BD; color: white;">Type</th> <th style="background-color: #4F81BD; color: white;">Intended Use</th> <th style="background-color: #4F81BD; color: white;">Practice</th> <th style="background-color: #4F81BD; color: white;">Planting Period</th> </tr> </thead> <tbody> <tr> <td><input type="radio"/> ASPARAGUS</td> <td></td> <td></td> <td></td> <td>01</td> </tr> <tr> <td><input type="radio"/> BEETS</td> <td>HYBRID</td> <td></td> <td></td> <td>01</td> </tr> </tbody> </table>	Crop	Type	Intended Use	Practice	Planting Period	<input type="radio"/> ASPARAGUS				01	<input type="radio"/> BEETS	HYBRID			01									
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<input type="radio"/> ASPARAGUS				01																					
<input type="radio"/> BEETS	HYBRID			01																					
Search Loss Adjuster Add Loss Adjuster	<input type="button" value="Submit"/> <input type="button" value="Cancel"/>																								


--\*

\*--304 Creating New LA Voucher (Continued)

**G Example of Voucher Summary**

Review the voucher summary for any data entry errors. CLICK "Recalculate" to revise FSA-449-B Travel Data. CLICK "Edit" or "Delete" to revise FSA-449-A Inspection Data.

**FSA-449-B Travel Data**

Submission Date:  

Per Diem(\$): <input type="text" value="20.00"/>	Mileage(\$): <input type="text" value="0.00"/>
Other Travel(\$): <input type="text" value="0.00"/>	Car Rental(\$): <input type="text" value="0.00"/>
Common Carrier(\$): <input type="text" value="0.00"/>	Subsistence(\$): <input type="text" value="0.00"/>
Telephone(\$): <input type="text" value="0.00"/>	Miscellaneous(\$): <input type="text" value="0.00"/>

Total Travel Claim (\$): 20.00

---

**FSA-449-A Inspection Data**

Date	Insp. Type	Unit No.	Crop	Travel Hours	Insp. Hours	Action	
07/31/2012	FIN	200	ASPARAGUS, 01	2.0	0.75	Edit	Delete


---

**Total Expenses**

Compensation Hours (Certified): 2.75	Hourly Rate (\$): 15.00
	Total Compensation (\$): 41.25
	Total Travel Claim (\$): 20.00
	Total Claim (\$): 61.25

---

**Approval**

Approval Date:  

--\*



304 Creating New LA Voucher (Continued)

H Approving Voucher Summary

Follow this table to approve the voucher summary.

Step	Action	Result
1	Click the calendar icon to enter an approval date.	The approval date will be displayed.
2	CLICK "Save and Submit".  <b>Note:</b> Vouchers \$1,500 or more require State Office approval.	The voucher is considered approved and will immediately be processed for payment.

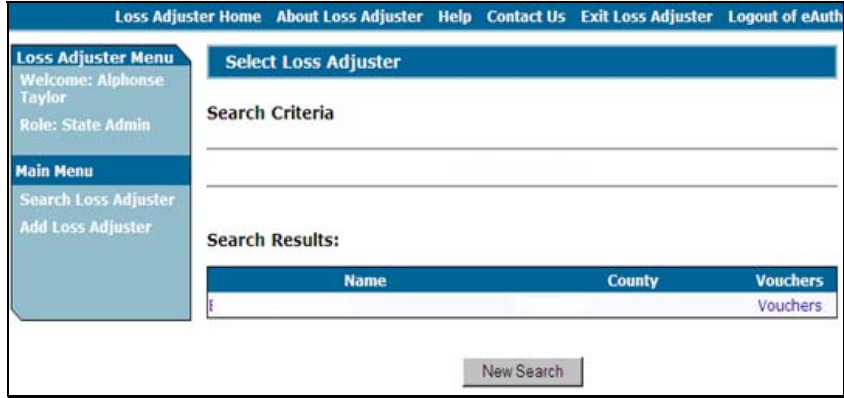
305 Revising or Deleting Part of Voucher

A Overview

Only State Office users have the authority to revise or delete a voucher that has already been submitted for payment.


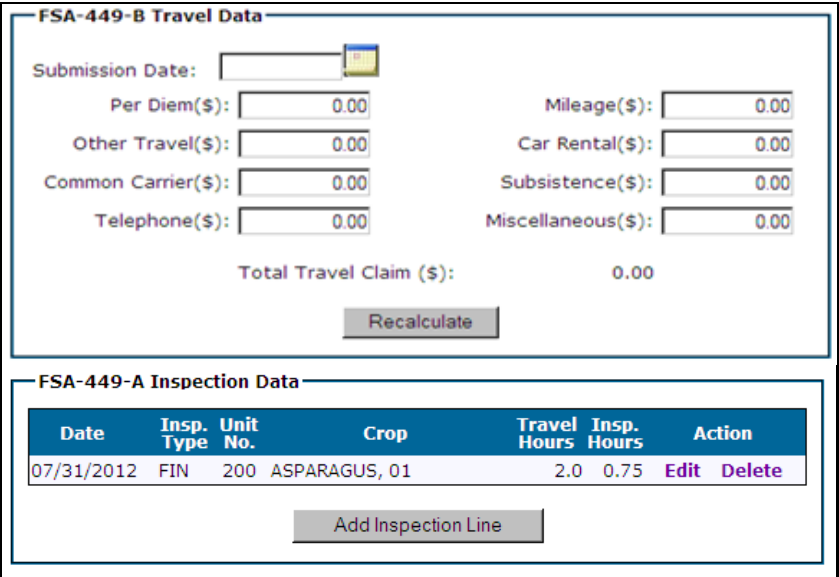
B Action

Follow this table to revise or delete a voucher.

Step	Action	Result
1	*--Select LA from either of the search methods from the Search Loss Adjuster Screen.	The Select Loss Adjuster Screen will be displayed with LA's name.
2	CLICK "Vouchers".  	The Select Voucher Screen will be displayed.

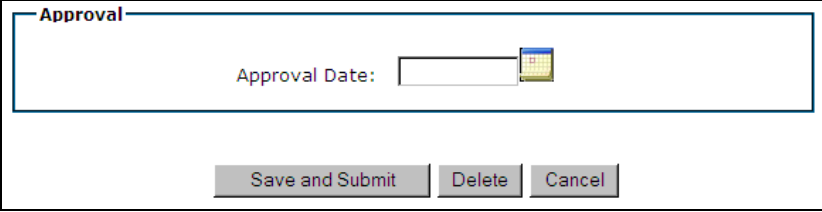
305 Revising or Deleting Part of Voucher (Continued)

B Action (Continued)

Step	Action	Result
3	<p>Use the drop-down list to select the desired crop year. *--</p>  <p>--*</p>	<p>All of LA's vouchers for the crop year selected will be displayed.</p>
4	<p>CLICK "View/Print Edit" for the specific voucher to be revised or deleted.</p>	<p>The voucher will be displayed.</p>
5	<p>CLICK "Recalculate" to revise FSA-449B Travel Data. *--</p>  <p>--*</p>	<p>The user may revise FSA-449B Travel Data.</p>
6	<p>Do either of the following.</p> <ul style="list-style-type: none"> <li>• CLICK "Edit" to revise FSA-449A Inspection Data.</li> <li>• CLICK "Delete" to delete the inspection line.</li> </ul>	<p>The user may edit FSA-449A Inspection Data.</p> <p>A delete screen will ask the user to confirm deletion request.</p>

**\*--305 Revising or Deleting Part of Voucher (Continued)**

**B Action (Continued)**

Step	Action	Result
7	<p>Whenever the “Recalculate” or “Edit” button is clicked, the approval date is deleted and a new approval date must be re-entered. To enter the new approval date, click the calendar icon to enter the date the revision or edit was made.</p> 	<p>The new approval date will be displayed.</p>
8	<p>CLICK “Save and Submit”.</p> <p><b>Note:</b> Failure to CLICK “Save and Submit” may create a potential overpayment or receivable issue.</p>	

--\*

**306-308 (Withdrawn--Amend. 5)**

**309-320 (Reserved)**

**321, 322 (Withdrawn--Amend. 5)**

**323-499 (Reserved)**



**Part 5 LA Payment Processing**

**Section 1 Preparation for Issuing Payments**

**500 (Reserved)**

**501 Prerequisites for Making Payments**

**A Introduction**

LA automated payment process requires certain action to be completed to ensure that LA is eligible for payment.

**B Action To Be Completed Before Issuing LA Payments**

This table contains action that must be completed before issuing LA payments. COC, CED, or designee shall ensure that the action is completed.

<b>Step</b>	<b>Action</b>
1	LA voucher information has been data loaded and approved * * * .
2	Ensure that EFT requirements have been met according to 1-FI.

**502 LA Payments****A Introduction**

LA payments can be issued at any time. At a minimum, the County Office shall ensure that payments are issued within 2 weeks of voucher submission.

**B Payment Method**

Payments will be made by direct deposit or check according to the following:

- if direct deposit information has been completed for LA according to 1-FI, LA payment will be issued through direct deposit
- \*--if the direct deposit information has **not** been completed according to 1-FI, the LA payment will be issued by Treasury check.--\*

**C Payment Rates**

See Exhibit 4 for LA payment rates.

**D Prompt Payment Due Dates**

According to the Prompt Payment Act, a prompt payment interest penalty applies if LA payment is not issued in a timely manner. See 61-FI for additional information on handling prompt payment interest penalties.

**E Funds Control for LA Payments**

- \*--Beginning in August 2012, eFunds for LA payments will be allocated at the National level. Therefore, allocation to State or County Offices is **not** required.

The National Office will advise the State Office:

- if the National allocation is exhausted
- once additional funds are received.

**Notes:** State Office employees will no longer have access to LA eFunds.

When eFunds are exhausted, LA payments will appear on the Insufficient Funds Report. See 9-CM, Part 5.--\*

**\*--503 2012 and Future Year LA Payments**

**A Introduction**

Beginning August 2012, LA payments will be moved to a web-based process.

**B Triggering Payments**

Payments will be triggered through events that occur in the web-based LA Voucher System. As a result, processing will now be “behind the scenes” for the most part. Calculations and determinations will occur during the evening and nighttime hours without user intervention.

The following is an explanation of the types of triggers that will occur during payment processing.

Trigger Description	Description
Initial	<p>When payment software is released, a process will automatically run to determine all LA vouchers that are approved for payment.</p> <p>This does <b>not</b> require any County Office user interaction. The following will occur automatically:</p> <ul style="list-style-type: none"> <li>• payments will be sent to NPS for certification and signature</li> <li>• overpayments will be sent to NRRS.</li> </ul>
Primary	<p>Subsequent payments will be initiated when an approval date is entered on LA vouchers.</p>
Secondary	<p>Payments that <b>cannot</b> be issued during any payment process are sent to the Nonpayment Report. If a condition causing the LA voucher to be on the Nonpayment Report is corrected, the payment will be triggered to reprocess to determine whether the payment can be issued.</p> <p><b>Note:</b> See 9-CM for information on the Nonpayment Report.</p>
Tertiary	<p>The payment system will periodically recalculate all payments.</p>

--\*

**\*--503 2012 and Future Year LA Payments (Continued)****C Common Payment Reports for LA Payments**

The following LA payment reports are available by accessing the Common Payment Reports System:

- Submitted Payments Report (live data)
- Submitted Overpayments Report
- Pending Overpayment Report
- Nonpayment/Reduction Report (report database)
- Insufficient Funds Report (live data)
- Payments Computed to Zero Report
- Summary Payment History Report (report database)
- Detail Payment History Report (report database).

**Notes:** To access the Common Payment Reports System, go to [http://intranet.fsa.usda.gov/fsa/FSAIntranet\\_applications.html](http://intranet.fsa.usda.gov/fsa/FSAIntranet_applications.html). Under “Common Applications”, CLICK “Common Payment Reports System”.

See 9-CM for instruction on the common payment reports.

**504 2011 and Prior Year LA Payment Authorization Requests****A Introduction**

System 36 NAP LA payment processing for 2004 through 2011 will be disabled in September 2012. After that date, County Offices must obtain authorization to issue 2004 through 2011 LA payments. County Offices shall provide documentation listed in this paragraph to request payment authorization.--\*



**\*--504 2011 and Prior Year LA Payment Authorization Requests (Continued)****B County Office Action**

To receive authorization to issue 2004 through 2011 LA payments, County Offices shall submit the following fully completed and approved documentation to the State Office:

- FSA-449-A and/or FSA-449-B for the requested authorized payment amount
- LA Payment History Report for the applicable crop year. See paragraph 750 for instructions for printing the LA Payment History Report.

**Note:** An accounting history or transaction statement will **not** be accepted in place of the LA Payment History Report from LA processing menus.

**C State Office Responsibility**

State Offices shall:

- review the documentation submitted by County Offices to ensure that:
  - the payment should be issued
  - all applicable documentation has been provided
- submit documentation to PECD on the SharePoint site.

**D Submitting Payment Authorization Requests**

To provide for a more streamlined process, payment authorization requests shall be provided through a SharePoint site. The SharePoint site will provide for:

- submitting documentation for the initial request
- submitting additional documentation, when applicable
- tracking the status of the request
- obtaining a copy of the authorization or denial FAX.

**Note:** A future amendment will provide the SharePoint link.--\*

**\*--505 2011 and Prior Year LA Payment Overpayment Processing**

**A Introduction**

Overpayments can occur for a number of reasons. County Offices are **required** to take necessary action to collect overpayments.

If it is determined that a 2011 or prior year LA payment is overpaid, a manual receivable shall be established in NRRS . County Offices shall follow instructions in 64-FI to establish the manual receivable.

**B Overpayment Due Dates**

The following table lists situations that may cause overpayments and the overpayment due dates.

<b>Time of Determination</b>	<b>Situation</b>	<b>Overpayment Due Date</b>
Anytime	Payment is issued to the wrong LA	Immediately
After something affecting the payment amount is changed		Immediately

--\*

**506-549 (Reserved)**

**Section 2 (Withdrawn--Amend. 4)**

**550-554 (Withdrawn--Amend. 4)**

**555-599 (Reserved)**

**Section 3 (Withdrawn--Amend. 4)**

**600 (Withdrawn--Amend. 4)**

**601 (Reserved)**

**602 (Withdrawn--Amend. 4)**

**603-619 (Reserved)**

**Section 4 (Withdrawn--Amend. 4)**

**620, 621 (Withdrawn--Amend. 4)**

**622-652 (Reserved)**

**Section 5 (Reserved)**

**653-693 (Reserved)**

**Section 6 (Reserved)**

**694-715 (Reserved)**

**Section 7 (Withdrawn--Amend. 4)**

**716 (Withdrawn--Amend. 4)**

**717-749 (Reserved)**



## Section 8 Payment Reports

### 750 Printing LA Payment History

#### A Introduction

LA Payment History Print is a report that indicates information in the payment history file. This print contains all payments issued, canceled, and refunded in date order.

**\*--Note:** This option is available for 2004 through 2011 payments only. 2012 and future LA payment history reports must be accessed from the Common Payment System. See 9-CM.--\*

#### B Accessing LA Payment History Report

Access LA Payment History Print from Menu FAX250 according to this table.

Step	Menu	Action
1	FAX250	ENTER "3" or "4", "Application Processing", as applicable.
2	FAX09002	Enter the appropriate county on the Office Selection Menu, if applicable.
3	FAX07001	ENTER "11", "PFC/Compliance".
4	M00000	ENTER "7", "Loss Adjuster Processing".
5	MHBLA0	ENTER "2", "Enter Loss Adjuster Voucher and Payment Processing".
6	MHBLS000	Enter the appropriate crop year.
7	MHBL00	ENTER "6", "Voucher Payment Processing for All Programs".
8	MLBLP0	ENTER "4", "Loss Adjuster Payment History Report".

**750 Printing LA Payment History (Continued)**

**C Selecting Printer**

After selecting Menu MLBLP0, option 4, “Loss Adjuster Payment History Report”, Screen MLBLPRT2 will be displayed. Enter the printer ID for the printer on which LA Payment History report will be printed.

**D Print Process**

After selecting the printer ID, PRESS “Enter” to print the report. The print of LA Payment History Report is evoked.

**E Print Options**

Print LA Payment History report according to the following table.

Selection	Action	Result
Process by LA	Enter the full name of LA	A report is sent to the selected printer for LA if payments are recorded in LA Payment History file.
	Enter the last 4 positions of the ID number	<b>Note:</b> A negative report will not print for LA’s that do not have payments recorded in LA Payment History file.

## Reports, Forms, Abbreviations, and Redelegations of Authority

### Reports

This table lists the required reports in this handbook.

Report Control Number	Title	Reporting Period	Submission Date	Negative Report	Reference
	LA Vouchers of \$1500 or More Require State Office Approval	Monthly	State Office submit to PECD by 10 <sup>th</sup> of the month.	Not required.	200
	Training Reports: <ul style="list-style-type: none"> <li>Phase I and Phase II update.</li> </ul>	Monthly from January through July	State Office submit to PECD by 10 <sup>th</sup> of the month following training, January through July.	Required	63

### Forms

This table lists all forms referenced in this handbook.

Number	Title	Display Reference	Reference
AD-202	Travel Authorization (Temporary Duty Travel)		200
AD-1197	Request for USDA Identification Badge		25
CCC-455	Loss Adjuster Service Agreement		Text
CCC-576	Notice of Loss		225, 304, Ex. 5
FCI-6	Statement of Facts		228
FD-258	Fingerprint Chart		25
FSA-449A	Voucher for Payment of Services for Loss Adjustment	225	Text
FSA-449B	Loss Adjuster's Travel and Expense Claim Form	228	Text
FSA-454	Loss Adjuster ID Card		25, 27, 29
FSA-454B	Loss Adjuster's Crop Training Certification	28	27, 62, Ex. 2
FSA-501	Statement of Facts		Ex. 5
FSA-577	Report of Supervisory Check		27, 72
FSA-789	Applicant Background Investigation Processing Checklist		25
FSA-1065-2	Tracking USDA-FSA Issued Site Badges for NAP/TAP Adjusters	29	27
OF-306	Declaration of Federal Employment		25
SF-87	Fingerprint Chart		25
SF-3881	ACH Vendor/Miscellaneous Payment Enrollment Form		22

**Reports, Forms, Abbreviations, and Redelegations of Authority (Continued)**

**Abbreviations Not Listed in 1-CM**

The following abbreviations are not listed in 1-CM.

<b>Approved Abbreviation</b>	<b>Term</b>	<b>Reference</b>
EPD	Emergency Preparedness Division	25
MPCI	Multi-Peril Crop Insurance	44
OJT	on-the-job training	56, 66, 67, 209, Ex. 4, 5
PFC	production flexibility contract	750

**Delegations of Authority**

None.



## Definition of Terms Used in This Handbook

### Certified Employee

Certified employee is an FSA employee who has done either of the following:

- successfully completed LA training for a crop and can adjust when authorized through critical loss situation and/or is qualified to review paperwork for an adjustment
- has substantial field appraisal and inspection experience that FSA could substitute for Phases I and II

**Note:** State Offices shall maintain FSA-454B for certified employees.

### Certified LA

Certified LA means that LA has successfully completed Phase I and II on a specific crop.

### Employee

Employee is a person employed, not contracted, by FSA.

### Interrupted Travel

Interrupted travel is when the LA engages in other activities during an FSA-assigned workday, such as work for a private company or other personal activities.

### Major Error

A major error on a claim is 1 or more of the following:

- producer's signature was **not** obtained on the loss adjustment paperwork
- entries affecting the outcome of the appraisal not discussed with producer

**Example:** Difference in acres certified and appraised, cause of loss verified or **not** verified.

- approved policies or procedures were not followed
- incorrect unit arrangements were not identified and corrected
- failure to account for all acreage on the acreage report during the LA appraisal or inspection.

**Definition of Terms Used in This Handbook (Continued)****Maximum Per Diem Rates**

Maximum per diem rates, published in the Federal Register by GSA:

- are the maximum reimbursements for daily food and lodging expenses within the continental U.S.
- consist of a fixed amount for the M&IE rate, plus a maximum allowable amount for lodging, including State and local taxes
- differ by locality. Most rural travel is covered by the standard rate, which is currently \$80 (\$50 lodging amount + \$30 M&IE rate). However, higher rates are allowed for higher cost geographic areas.

**Minor Error**

Minor error is any error on a claim that can be corrected by the County Office without requiring the producer to sign the correction.

**Per Diem**

Per diem is a reimbursement for daily food and lodging expenses. The per diem allowance is reported separately from transportation and other miscellaneous travel expenses. LA's may be allowed per diem for assigned work away from the official duty station according to the rules in paragraph 217.

**Menu and Screen Index**

The following menus and screens are displayed in this handbook.

<b>Menu or Screen</b>	<b>Title</b>	<b>Reference</b>
	Inspection Line Item Data Screen	304
	Loss Adjuster Screen	303
	SCIMS Please Select a Customer Screen	302
	Search Loss Adjuster Screen	301, 302
	Select Crop Screen	304
	Select Loss Adjuster Screen	302, 304, 305
	Select Voucher Screen	304, 305
	Selected Customer Screen	302
	Update Loss Adjuster Screen	302, 303
	Update Loss Adjuster Voucher Screen	304



**LA Pay Rate Table**

Use the following table for pay rates for LA's. \* \* \*

\*--

<b>LA Pay Rate Table</b>		
<b>Inspection Type</b>	<b>Beginning Date of Pay Rate for Work Completed</b>	<b>Pay Rate Per Hour</b>
TRN: for Phase 1 and 2 training (those not yet certified)	8/9/2019	\$13.50
UTR (Update training) and services performed by a fully certified LA with <b>less than 1 year</b> of satisfactory service.	8/9/2019	\$19.55
UTR (update training) and services performed by a fully certified LA with <b>1 or more</b> years of satisfactory service.	8/9/2019	\$21.75

**Notes:** Service code “TRN” will always pay the uncertified training level regardless of LA status. Therefore, do **not** use TRN for certified LA’s unless an LA is working toward recertification.

The LA management system will compare and compute the voucher payment based on the work completion date and effective pay rate.

Pay rates may include a cost-of-living adjustment in accordance with an increase to the GS salary table.--\*



## Inspection Type Attributes and Definitions

### A Inspection Type Attributes

This table lists inspection types that:

- are related to NAP
- may be used in special circumstances if authorized by the National Office, such as “Other” Ad Hoc disaster programs.

Abbreviation	Term	Applicable Inspection Type		Requires a Notice of Loss for NAP	Requires a Unit Number
		NAP	Other Program		
APH	Actual Production History	X	X		X
FIN	Final	X	X	X	X
GSI	Growing Season Inspection	X			X
NCI	No Compensation	X	X	X	X
PLI	Preliminary Inspection	X	X	X	X
PWK	LA Paperwork	X	X		
REV	Review	X	X		
TRN	Training	X			
TRV	Travel	X	X		
UTR	Update Training	X			

\*--Note: Voucher pay rates are driven by certification, **except** “TRN” that pays \$13.50 per hour.--\*

Inspection Type Attributes and Definitions (Continued)

B Inspection Type Definitions

Abbreviation	Term	Definition
APH	Actual Production History	*--Used when a producer requests an APH determination.--* <b>Example:</b> U-pick operations needing a record of their production.
FIN	Final Inspection	Used when producer has an approved CCC-576 on file. LA determined if any potential production remains. Inspection allowed the field to be released before crop destruction. CCC-576 and unit number are <b>required</b> .
GSI	Growing Season Inspection	*--Used for spot checking when there is not a notice of loss on file. For example, if suspecting poor (or to verify good) management practices. Use FSA-501 to document LA observations and accompanying photos. <b>Example:</b> Verifying orchard tree count, age, spacing, etc.--*
NCI	No Compensation	LA will <b>not</b> be compensated for a subsequent inspection, including travel, if initial work is found to be incomplete or in error and must be performed again. See CCC-455, Appendix II, Item 9.
PLI	Preliminary Inspection	Used to document the initial inspection of a crop after CCC-576 has been filed. CCC-576 and unit number are <b>required</b> .
PWK	Paperwork	Time spent completing FSA-449A (voucher for LA services) and FSA-449B (travel/M&IE) * * *.
REV	Review	Used for reviewing documents with superior, for example, spot check results.
TRN	Training	*--Classroom, field training, including travel, for new LA applicants before minimum certification has been achieved. Pay is \$13.50--* per hour.
TRV	Travel	<ul style="list-style-type: none"> <li>Amount of time required to travel from duty station to the inspection site, and back to the duty station. See subparagraph 225 A, item 12.</li> <li>Travel is included in length of the workday. See subparagraph 217 E.</li> <li>Walking between fields is <b>not</b> considered travel time, even if the nearby field is a different pay crop and/or pay type. However, according to subparagraph 209 A, CED's may approve travel in unusual circumstances. The most economical and/or expedient method <b>must</b> be used.</li> </ul>
UTR	Update Training	Used for fully certified LA's for annual update training or when teaching specific loss adjustment procedures (usually field training). See paragraph 57 for annual requirements.