FITTING THE PIECES TOGETHER
CONFERENCE

Coordination of Leave Programs

November 3, 2016
Presented by CSU Human Resources Management
INTRODUCTION- CSU Presenters

CSU Human Resources Management, Benefits Chancellor’s Office
- Beth Ryan – CSU, Director of Benefits & HR Programs
- Delta Williams – CSU, Senior Human Resources Analyst

Panel
- Jennifer Acfalle – CSU-SDSU, Assistant Director Benefits & Workers’ Compensation
- Heather Cain – CSU-Sonoma State, Payroll & Benefits Manager
- Trisha Ramos – CSU-Sonoma State, Managing Director of Payroll, Benefits & Workers’ Compensation
- Kevin Mackey – CSU-Sacramento State, Administrative Analyst/Specialist
- Nora Johnson – State Controller’s Office – Payroll Officer Workers’ Compensation
- Pliny Reynolds – State Controller’s Office – Manager of Disability Benefits
OVERVIEW OF LEAVE OF ABSENCE PROGRAMS

CSU offers a variety of paid and unpaid leave of absence programs based upon eligibility guidelines and length of leave limitations. Leaves being presented today are:

- Family Medical Leave (FML) – Unpaid
- Non-Industrial Disability Leave (NDI) – Paid
- Workers’ Compensation (Industrial Disability Leave (IDL)/Temporary Disability)
  - Enhanced Industrial Disability Leave (Unit 8 only)
- Catastrophic Leave Program
RELATIONSHIPS, ROLES & RESPONSIBILITY

Handling disability leaves of absence is complex and involves coordination from the disabled employee, campus administration, the Chancellor’s Office, the State Controller’s Office, the Employment Development Department, the CSU’s contracted industrial injury TPA and CalPERS. The following lists each party’s roles and responsibilities.
CAMPUS ROLE

**Disabled (non-industrial) Employee:**
- Responsible for informing appropriate campus administrator of the disability in a timely manner;
- Provides acceptable documentation which indicates timelines of non-work status and any needed work accommodations if the employee is able to work.

**Injured (work-related) Employee:**
- Responsible for reporting all accidents promptly, e.g., within 24 hours after the work-related injury becomes known. The injured employee is required to explain to his/her supervisor or other appropriate administrator how the accident occurred and complete the Employee’s Claim for Worker’s Compensation Benefits Form to report the injury.
- Responsible for informing appropriate campus administrator of the physician’s advice concerning his/her ability to work, submit absence reports each pay period, maintain communication with his/her appropriate administrator on their medical condition, and as substantiated by appropriate documentation, the status of his/her performance capabilities and limitations, the need for reasonable accommodation, modified duty assignment, etc. and the ability to return to work as soon as medically feasible.
CAMPUS ROLES

Appropriate Administrator/Campus Leave Coordinator (varies by campus):

• Responsible for understanding California State University (CSU) policy on the various disability leave programs, carrying out campus injury prevention programs, implementing campus procedures to report the disability or injury when it becomes known, and advising the affected employee of the appropriate actions they need to take at the campus.

(Work-related)

• Responsible for initiating action to obtain prompt medical treatment for the employee. This could include accepting examination and treatment by a physician or facility arranged by the campus, unless the employee has pre-designated a physician. Contact TPA to obtain authorized medical treatment for the injured employee.

• Responsible for informing the campus Workers Compensation Coordinator/Administrator of the employee’s injury and completing the Supervisor Report of Injury.

• Ensures employee receives the required forms and notices within the appropriate timelines and provide information pertinent to rights, benefits and obligations in the process.

• Provides advice and prescribe “next steps” of the process with both the disabled employee and the employee’s manager/supervisor.
CAMPUS ROLES

Campus Payroll Office or Campus Leave Coordinator (varies by campus):
- Collects documentation regarding dates of leaves and the use of accrued leave credits.
- Maintains PeopleSoft and SCO (PIMS) leave transactions to ensure pay is processed correctly.
- Completes SCO paperwork needed to initiate pay transactions when the employee is on a full/intermittent leave.
- For Non-Industrial Disability – prepare and submit EDD paperwork on behalf of the employee for NDI approval, once approved initiate subsequent payments with the SCO.
- For Industrial Disability – Once employee has chosen TD or IDL, pay is issued accordingly by the submittal of required paperwork to the SCO.
- Ensure that PeopleSoft Absence Management is coordinated to reflect the use of leave credits that have been applied during the leave.

Return-To-Work Coordinator:
- Establishes, implements and monitors effective Return-To-Work Programs.
- Works with the injured worker’s supervisor to return employee back to work as soon as medically feasible by identifying regular and/or limited duty that accommodates the doctor's restrictions.
- Communicates with the injured worker to explain benefits he/she is entitled to.
STATE CONTROLLER’S OFFICE (SCO)

- Audits and processes documents accurately, pursuant to state laws, rules, regulations, policies and collective bargaining provisions, as they pertain to employment history and payroll transactions.

- Interacts with appropriate campus staff and management and not with the employee. Interactions between the SCO and the campus typically are via telephone or by sending the Disability Irregularity Notice form (PR250), which requests corrections to employment history, time certified, or related information.
CHANCELLOR’S OFFICE

• Provides policy guidance, interpretation, clarification, and direction when unique and/or complex situations arise and cannot be resolved at the campus.

• Approves variances or exceptions to prescribed procedures when necessary.
THIRD PARTY ADMINISTRATOR (TPA)

• Reviews all claims and medical reports, determines and approves benefit periods.

• Issues temporary disability payments.

• Represents the CSU when appearing before the Worker’s Compensation Appeals Board.
FAMILY MEDICAL LEAVE (FML)

FML provides employees with unpaid leave time for up to twelve (12) weeks in a 12 month period calculated on a forward rolling basis to care for an employee’s own serious health condition or to care for eligible family members. FML incorporates both the Federal Family Medical Leave Act (FMLA) and California Family Rights Act (CFRA) leave entitlements. Both entitlements run currently with each other.

Coordination of Leave Program

Most leaves for purposes which qualify for FML must run concurrently and will count against the employee’s FML entitlement. This includes Sick Leave longer than allowed by the collective bargaining agreement (CBA), Non-Industrial Disability Leave (NDI), Industrial Disability Leave (IDL), Temporary Disability (TD), and Catastrophic Leave. The only leave that doesn’t run concurrently with FML is Pregnancy Disability Leave (PDL). Employee may use accrued Sick Leave, Vacation, and CTO credits (use of accrued vacation and CTO credits are optional, however, if using, then the employee must exhaust before being able to use NDI).
FAMILY MEDICAL LEAVE (FML)

Qualifying Purposes for FML

• Birth of a child and to care for a newborn
• A child placed with employee for adoption or foster care
• Care of an employee’s spouse or registered domestic partner, child, or parent with a serious health condition
• Employee’s own serious health condition that makes the employee unable to perform the essential functions of his/her job
• Military Exigency Leave (MEL) arising out of the fact that the employee’s spouse, registered domestic partner, child, or parent is a member of any branch of the military, including the National Guard or Reserves, and is deployed or called to active duty
• Service Member Care Leave (SMCL) for a covered service member with a serious injury or illness, if the employee is the spouse or registered domestic partner, child, parent, or next of kin of the service member
NON-INDUSTRIAL DISABILITY LEAVE (NDI)

Non Industrial Disability Insurance (NDI) provides income for an eligible employee who is disabled from work due to a non-work related medical condition and is suffering wage loss as a result. Employees who have exhausted their sick leave, who are on an approved medical leave of absence due to pregnancy, childbirth or recovery, or for their own serious illness or injury may be eligible for NDI.

Waiting Period
The eligible disabled employee must serve a seven (7) consecutive day waiting period commencing on the first full day of disability for each period of disability. However, if the employee is confined in a hospital or EDD approved nursing home for one full day, the waiting period may be waived. The waiting period may be with or without pay depending upon whether the employee has accrued sick leave, vacation, Compensatory Time Off (CTO), or any other eligible leave benefits.
NON-INDUSTRIAL DISABILITY LEAVE (NDI)

Benefit Payments
NDI benefit payment checks will be issued monthly by the State Controller’s Office following the submission of the required documents by the campus. NDI benefits are considered a salary or wage and will be reported as earnings for tax purposes. NDI benefit payment amounts vary based upon employee class or collective bargaining agreements and can last up to 26 weeks.

Voluntary and Mandatory Payroll Deductions

• The employee’s CalPERS contributions shall not be deducted from the NDI benefit payment since the employee does not earn service credit while on NDI leave, however, OASDI (Social Security) will be deducted from NDI benefit payments.

• **Please note:** If an employee is on NDI with Catastrophic Leave supplementation, the donated leave portion of the pay is subject to the CalPERS deduction since it is treated as regular pay in the payroll system.

• Voluntary deductions shall continue to be made **unless canceled by the employee.**

• The employee’s regular contribution to his or her health insurance premiums shall be deducted from his/her NDI benefit payment **unless canceled by the employee.**

• The CSU shall continue to pay the employer’s contribution for all appropriate insurance premiums as long as the employee continues health insurance coverage.
WORKERS’ COMPENSATION INDUSTRIAL DISABILITY LEAVE (IDL)/TEMPORARY DISABILITY

Workers’ Compensation provides medical benefits if an employee experiences a work-related injury or illness. The CSU has two types of disability benefit programs available under Workers' Compensation:

- Industrial Disability Leave (IDL)/Enhanced Industrial Disability Leave (EIDL) and CSU IDL Sick Leave Supplementation
- Temporary Disability (TD)
- Workers' Compensation is to provide compensation to employees for work-related injuries or illnesses, including medical treatment costs, temporary payment for lost wages and permanent disability payments that compensate the injured worker for a decreased ability to compete in the open labor market. Some of the benefits provided include: temporary and/or permanent disability payments, medical, surgical, hospital and any other covered treatment required to cure and relieve the effects of such injury or illness.
WORKERS’ COMPENSATION INDUSTRIAL DISABILITY LEAVE (IDL)/TEMPORARY DISABILITY

Benefit Payment Choice (IDL verses TD)

- A disabled employee shall have 15 calendar days from the mailing of the notice of benefit eligibility to notify his/her campus that s/he elects Workers’ Compensation Temporary Disability (TD) benefits with or without supplementation, rather than IDL benefits. The employee’s choice shall be retroactive to the first day of eligibility for disability benefits. Upon failure to respond within the time limit, the employee shall be placed on IDL unless TD benefits are greater. In such a case, the employee shall be determined to have rejected IDL in accordance with Education Code Section 89529.05, and all provisions of Workers’ Compensation Temporary Disability shall apply.

- If a disabled employee is incapable of making decisions for himself/herself, the campus or the disabled employee’s spouse or representative shall request through the State Compensation Insurance Fund that the Workers’ Compensation Appeals Board appoint a guardian or trustee in accordance with Section 5307.05 of the Labor Code. In such cases, the 15 calendar-day time limitation on the benefit choice provisions shall be waived.
WORKERS’ COMPENSATION INDUSTRIAL DISABILITY LEAVE (IDL)/TEMPORARY DISABILITY

Employee Waiver of Selection
• If a disabled employee waives his/her right to make his/her benefit selection, Education Code Section 89529.05 provides that s/he will receive IDL benefits unless Workers’ Compensation Temporary Disability payments are greater, in which case all provisions of Workers’ Compensation Temporary Disability shall apply.

BENEFITS - Change
• Employees will be given a one-time opportunity to change benefits. At any time during the first 90 calendar days of absence, the disabled employee may notify his/her campus to change benefits from IDL to Workers’ Compensation Temporary Disability benefits or vice versa. Such change shall be a one-time opportunity and shall be effective on the 90th calendar day of absence. The amount of benefit shall be that which the employee would have received on the 90th calendar day had the benefit been initially elected.

• No later than the 60th calendar day of absence, the campus shall notify the disabled employee of his/her benefit modification rights provided for in this section. The employee must submit written notification of his/her desire to change benefits no later than the 90th calendar day of absence. Regardless of the change in benefits, the eligibility period for IDL benefits remains at 52 weeks within two years from the first day of disability. A failure of the employee to exercise his/her option by the 90th day shall result in no further opportunity for a change in benefits.
Workers' Compensation Benefit Types

- **Medical Treatment**: Treatment that is reasonably required to cure or relieve the effects of the injury. This includes medical, surgical, chiropractic, psychiatric, acupuncture, and hospital treatment, nursing care, medicine, medical and surgical supplies, crutches, and apparatus and artificial members (LC4600).

- **Industrial Disability Leave (IDL) and Temporary Disability (TD) Leave Payments**: Payments for lost work time to the worker while the injury is being treated and the worker is unable to return to full time work and before it is determined whether or not the injury is permanent.
WORKERS’ COMPENSATION INDUSTRIAL DISABILITY LEAVE (IDL)/TEMPORARY DISABILITY

- **Permanent Disability (PD) Payments**: PD payments are made to compensate an employee who does not completely recover from an injury. The amount of compensation is based on the type and condition of the disability and can be paid by a lump sum or a monthly payment. An employee can return to his/her former job and continue to receive permanent disability. If the disability prevents the employee's returning to the former job, vocational rehabilitation may be provided to train the employee in another field or occupation. Then permanent disability will be determined once the employee has completed the vocational rehabilitation training.

- **Supplemental Job Displacement Benefit Program**: Provides a nontransferable voucher for education-related retraining and/or skill enhancement to eligible employees who are unable to return to their regular position.

Employees receiving Workers' Compensation continue to accrue sick leave, vacation, holiday and service credit as well as any service salary increase (SSI) or General Increase (GEN) if applicable. Employees also continue to receive all benefits as if the injury not occurred. As a result, at the beginning of every pay period, employees on TD or IDL must continue to have the appropriate hours credited to their leave balances.
INDUSTRIAL DISABILITY LEAVE (IDL)

Industrial Disability Leave (IDL) is designed to offer injured employees (who are active CalPERS or CalSTRS members) an alternative benefit program to Temporary Disability.

• IDL benefit payments are based on the employee’s full pay for the first 22 working dates of disability and thereafter, will be at two-thirds (2/3rds) of the employee’s normal salary.

• An employee can be released to return to work full or part time and still receive IDL benefits for the period of time off work, provided this period is approved by the TPA.

• The only mandatory deduction that is taken on IDL pay will be the retirement contribution based on the employee’s actual or true gross. Retirement contributions will not be deducted solely from sick leave supplementation amounts, it will be computed on the employee’s “full pay.”

• All voluntary deductions continue to be taken, except Deferred Compensation and Tax Shelter Annuities, because these are non-taxable items and these types of deductions cannot be taken against non-taxable income.

• Income received from CSU IDL Sick Leave Supplementation is taxable and will be reported on the employee’s W-2 form. Supplementation pay is subject to Social Security and Medicare.
INDUSTRIAL DISABILITY LEAVE (IDL)

Delay in Determination

- Under certain circumstances, it may take some time before a determination can be made by the third party administrator as to whether an employee’s disability is or is not work-related. During this period, the employee should be allowed to use sick leave, vacation, and/or CTO leave credits as long as they are available. The employee should also be encouraged to apply for NDI, if eligible. After all leave credits have been exhausted, the individual will be placed on leave without pay status until a determination is reached. If it is determined the disability is job-related and the employee is eligible for IDL or Workers’ Compensation Temporary Disability, appropriate adjustments will be made to the employee’s leave account balance in accordance with the procedures of the particular program selected by the employee.
ENHANCED INDUSTRIAL LEAVE (EIDL)

The Enhanced Industrial Disability Leave (EIDL) Program is a wage continuation program that became available exclusively to State University Police Association (SUPA – Unit 8) employees effective October 1, 1995. EIDL is in lieu of Workers' Compensation Temporary Disability (TD) benefits.

• Since full IDL is paid for the first 22 working days of disability, EIDL benefits begin on the 23rd working day of disability and will continue to be paid as full IDL.

• The EIDL benefit will be equivalent to the injured employee's net take home salary on the date of occurrence of the injury. “Net take home salary" is defined as the amount of salary received after federal income tax, state income tax and employee's retirement contribution has been deducted from the employee's gross salary.

• An employee can be released to return to work full or part time and still receive EIDL benefits for the period of time off work, provided that this period is approved by TPA.

• EIDL eligibility and benefits may continue for no longer than one (1) year after the date of occurrence of the injury.
TEMPORARY DISABILITY (TD)

All CSU employees are covered under Workers' Compensation and are eligible for Temporary Disability benefits. When Workers' Compensation was enacted in 1914, the original benefit was Temporary Disability (TD). To this day, it remains the only one available to employees in both the public and private sectors.

- TD payments are based on 2/3rds of the employee's weekly wage, not to exceed statutory maximums.
- The benefit rate is determined by the date of the injury and the employee's salary.
- The waiting period is three (3) calendar days and is waived (1) if the employee is hospitalized; (2) if the injury was incurred due to a criminal act of violence, or (3) if the employee is disabled for more than 14 calendar days.
- An employee who is released to work part-time can still be eligible for TD benefits. Usually benefits will end if the employee returns to work full-time or if the condition stabilizes. After an employee has been released by the attending physician and returns to work full-time, absences are charged as follows:
TEMPORARY DISABILITY (TD)

• Visits to the doctor for appointments or therapy treatment are charged to sick leave or vacation. In some cases, based on the amount of time an employee has lost for appointments or therapy treatments, TPA may evaluate whether the employee has lost enough wages to be entitled to a TD payment based on the wage lost concept.

• Absence to take a physical or other examination ordered by TPA may be taken with pay and is not charged to sick leave, vacation, extra hours, excess hours or holiday credit. This should be substantiated with a notice from TPA.

• Absence of the employee to appear before the Workers' Compensation Appeals Board or to confer with his/her attorney is not a valid reason for sick leave. Vacation, extra hours, excess hours or holiday credits may be used.

• Temporary Disability payments issued by TPA to the employee have no mandatory or voluntary deductions withheld after FML has been exhausted.

• Supplementation payments are subject to all mandatory deductions such as taxes, retirement contribution, garnishments, union dues/fair share, etc.

• Any voluntary deductions such as health benefits, deferred compensation, credit unions, insurance, etc., can also be withheld if there is sufficient wages.

• Mandatory deductions have priority over voluntary deductions.
USE OF ACCRUED LEAVE CREDITS

IDL

• The CSU IDL Sick Leave Supplement Program option is a benefit available to all employees who otherwise qualify for IDL and who have elected to supplement two-thirds (2/3) IDL pay with accumulated sick leave credits.

• Employees shall have a one-time election to participate in the Supplemental program. This election must be made no later than fifteen (15) calendar days from the mailing of the Notice of Eligibility of IDL.

• Supplementation is allowed beginning on the 23rd day of IDL and may continue until: (1) the employee is no longer on IDL, or (2) the employee exhausts accrued sick leave credits, or (3) the employee elects to discontinue supplementation.

• Any accrued sick leave credits (available as of the date of injury or the first date of lost time) may be used for supplementation. Other leave credits (e.g., vacation, CTO, holiday credit) may not be used except under certain circumstances when an employee is eligible for Catastrophic Leave. (Note: to be eligible for Catastrophic Leave, all leave balances must be exhausted.)

• An employee cannot waive IDL benefits and his/her option and apply for Catastrophic Leave donations.
USE OF LEAVE CREDITS

IDL Supplementation

• Employees whose disabilities are determined by the CSU to be work-related shall have a one-time opportunity to elect to receive Industrial Disability Leave benefits with or without supplementation of accrued sick leave credits up to regular salary or wages. Total benefit and supplementation shall not be in excess of an employee’s regular salary or wage.

• Before an employee may elect to supplement IDL with accrued sick leave credits, s/he must have sufficient credits to provide an IDL and supplementation amount equal to his/her regular daily salary or wage. The campus will stop supplementation when the combined IDL and supplementation amount is less than the employee’s daily salary or wage. Supplementation is limited to the use of sick leave accrued up to the date of the work-related injury or the first day of disability (which may be different than the date of injury) for which IDL with supplementation is sought, except as indicated under the Catastrophic Leave program. If an employee is released to return to work but goes out on IDL at a later time for the same work-related injury, sick leave accrued during the time in work status may be used for supplementation purposes.

• Supplementation shall be made only upon written notification to the campus by an eligible employee. The notification shall be given to a designated member or representative of CSU management no later than fifteen (15) calendar days from the mailing of the notice of benefit eligibility. The employee’s election commences with the 23rd day on IDL. Supplementation shall continue until the employee has exhausted his/her pre-disability accrued sick leave credits or until the employee provides written notification to the campus s/he wishes to discontinue supplementation.
USE OF LEAVE CREDITS

Non-Industrial Leave (NDI)

• An employee must use all accrued sick leave before any NDI benefits may be paid. Use of accrued vacation or compensatory time off (CTO) credit during a disability is optional. However, if the use of vacation leave or CTO is elected, all of the accrued time must be used before NDI benefits will be paid.

FML

• When an employee is placed on CSU Family Medical Leave (FML) for his/her own illness or injury, it is CSU policy to require the employee to use his/her sick leave and/or vacation credits prior to going on any unpaid portion of FML.

• When an employee requests CSU FML to care for an eligible family member who suffers an illness or injury that meets the criteria for CSU FML, the employee is required to use eligible sick leave and/or vacation credits prior to going on any unpaid portion of FML. For unrepresented employees, leave credit usage is approved by the appropriate administrator based on campus practice. For represented employees, please refer to the appropriate collective bargaining agreement to determine any restrictions on leave credit usage.
The Catastrophic Leave Donation Program allows for the donation and receipt of vacation and sick leave credits between eligible employees. Donated leave credits may be used by an employee who has a catastrophic illness or injury and has exhausted all types of pay normally available to cover the required absence from work. Catastrophic illness/injury also includes incapacitating conditions of immediate family members ("immediate" as defined in the respective collective bargaining unit agreements) when the employee must take an extended period of time to care for the family member.

The use of catastrophic leave while on IDL is problematic due to the fact that all leave credits (sick leave, vacation, CTO, and in some cases the personal holiday) must be exhausted before an employee may request participation in the Catastrophic Leave Program. Most employees that incur a work-related injury or illness have vacation balances on account. Since use of vacation balances are excluded from supplementation of the IDL benefit, an employee with a vacation balance would be ineligible to apply for the Catastrophic Leave benefit.
CATASTROPHIC LEAVE PROGRAM

• If an employee is out of leave credits and requests and is deemed eligible to participate in the Catastrophic Leave Program, the employee’s sick and vacation leave credits should be used as accrued while on the IDL benefit. Do not continue to process donated leave without exhausting the employee’s own leave credits. An employee’s participation in the Catastrophic Leave Program while on IDL is the only exception for use of the injured employee’s vacation credits or use of the employee’s sick leave credits after the date of the injury or the first day of disability, if different.

Coordination of Leave Programs

• Employees on Catastrophic Leave must apply for Non Industrial Disability Leave (NDI) to be approved for Catastrophic Leave (when applicable). Catastrophic Leave runs concurrently with FML entitlement.
CATASTROPHIC LEAVE PROGRAM

To be Eligible an Employee must:

• Accrue sick leave and/or vacation,
• Has exhausted all accrued leave credits (available sick leave, vacation, personal holiday, additional day off (ADO), and compensatory time off (CTO)), and
• Suffers from a catastrophic illness or injury which totally incapacitates individual OR must take time off from work for an extended period of time to care for an immediate family member who suffers from a catastrophic illness or injury.
• Must be on an approved leave of absence.

Catastrophic illness or injury Defined

• Has totally incapacitated the employee from work for an extended period of time
• Is catastrophic in nature
• Conditions which are short term in nature, such as colds, flu, minor injuries, or normal pregnancies, are generally not deemed catastrophic. Chronic conditions such as cancer, AIDS, and residual effects of a stroke may be considered catastrophic even if the condition results in only intermittent absences.
CATASTROPHIC LEAVE PROGRAM

Duration of Catastrophic Leave
• The total donated leave credits normally shall not exceed an amount necessary to continue the employee’s full salary for a period of three (3) calendar months calculated from the first day of Catastrophic Leave. The President or designee may approve an additional three-month period in exceptional cases.

Types of Leave to Donate
• Sick leave and vacation credits up to forty (40) hours (Except: Unit 1, Physicians – sixteen (16) hours) may be donated. CTO may not be donated. For family care Catastrophic Leave, only vacation credits may be donated. Leave may be donated in increments of one hour or more per fiscal year. Donations that are used are irrevocable.
PANEL DISCUSSIONS
SDSU’s Industrial Disability Leave (IDL) Workflow

1. Notify campus of total temporary disability status
2. Verify TTD information
3. Provide VOD voucher to Benefits Services
4. Notify EE, EE’s manager and Payroll Services
5. Complete forms in LOA packet and return to Benefits Services
6. Enter IDL information into PeopleSoft/PIMS and send forms to SCO as applicable
7. Make adjustments to meet operational needs
8. Coordinate medical treatment
9. Attend all medical appointments and provide update on work status
10. Notify Benefits Services of release to work
11. Released to full duty
12. EE is released to modified duty
13. Conduct ADA interactive process to discuss restrictions
14. Participate in discussion about restrictions
15. Participate in discussion about EE’s restrictions
16. Accommodate restrictions
17. Notify EE, EE’s manager, Sedgwick and Payroll Services
18. Send “end IDL VOD voucher” to Benefits Services
19. Key return-to-work in PeopleSoft/PIMS and send forms toSCO as applicable
20. Make arrangements to re-integrate EE to workplace
21. EE returns to work

Employee | Benefits Services | Sedgwick | Payroll Services | Employee’s Manager
---|---|---|---|---
1 | Notify campus of total temporary disability status | | | |
2 | Verify TTD information | | | |
3 | Provide VOD voucher to Benefits Services | | | |
4 | Notify EE, EE’s manager and Payroll Services | | | |
5 | Complete forms in LOA packet and return to Benefits Services | | | |
6 | Enter IDL information into PeopleSoft/PIMS and send forms to SCO as applicable | | | |
7 | Make adjustments to meet operational needs | | | |
8 | Coordinate medical treatment | | | |
9 | Attend all medical appointments and provide update on work status | | | |
10 | Notify Benefits Services of release to work | | | |
11 | Released to full duty | | | |
12 | EE is released to modified duty | | | |
13 | Conduct ADA interactive process to discuss restrictions | | | |
14 | Participate in discussion about restrictions | | | |
15 | Participate in discussion about EE’s restrictions | | | |
16 | Accommodate restrictions | | | |
17 | Notify EE, EE’s manager, Sedgwick and Payroll Services | | | |
18 | Send “end IDL VOD voucher” to Benefits Services | | | |
19 | Key return-to-work in PeopleSoft/PIMS and send forms to SCO as applicable | | | |
20 | Make arrangements to re-integrate EE to workplace | | | |
21 | EE returns to work | | | |
### The California State University
#### Comparison of Workers' Compensation Temporary Disability and Industrial Disability Leave Benefits

<table>
<thead>
<tr>
<th>Questions about your benefits</th>
<th>Workers’ Compensation Temporary Disability</th>
<th>Workers’ Compensation Temporary Disability with supplementation of applicable leave credits (sick leave, vacation, personal holiday and/or CTO)</th>
<th>Industrial Disability Leave</th>
<th>Industrial Disability Leave with supplementation of sick leave credits accrued up to the date of injury or date of disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who is eligible for benefit payments?</td>
<td>All CSU employees</td>
<td>All CSU employees with available leave credits</td>
<td>PERS &amp; STRS members; except for those included in Labor Code Section 4800</td>
<td>Same as under Industrial Disability Leave</td>
</tr>
<tr>
<td>Is there a waiting period before I begin to receive weekly benefits?</td>
<td>3 days unless hospitalized, disabled more than 14 days or if injury is a result of criminal act of violence against employee</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
</tr>
<tr>
<td>How are my absences from scheduled work during the three-day waiting period charged?</td>
<td>Absences are to be charged against the employee’s sick leave balance or other paid leave credits. If a non-exempt employee is out of leave credits, the salary must be docked. Exempt employees are charged leave credits for absences only on a full day basis.</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
</tr>
<tr>
<td>How much will my benefits be?</td>
<td>Temporary Disability rate is based on 2/3 of date of injury earnings up to allowable maximum. For injuries on or after 01/01/16, the minimum rate is $169.26 and the maximum rate is $1,128.43 per week. Benefit is not subject to federal, state, social security &amp; Medicare taxes.</td>
<td>Same as under Temporary Disability, plus supplementation of leave credits up to full pay. Only supplementation is subject to federal, state, social security &amp; Medicare taxes.</td>
<td>First 22 days: full gross pay less federal, state, social security &amp; Medicare taxes; retirement contribution and voluntary deductions. After 22 days: 2/3 gross pay less retirement contributions and voluntary deductions. Benefit is not subject to federal, state, social security &amp; Medicare taxes.</td>
<td>Amount varies, may supplement to full net pay for as long as leave credits last. Only supplementation is subject to federal, state, social security &amp; Medicare taxes.</td>
</tr>
<tr>
<td>How are my medical bills to be paid?</td>
<td>Sedgwick Insurance Company pays for all eligible hospital, medical and surgical expenses.</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
</tr>
</tbody>
</table>


# The California State University
## Comparison of Workers' Compensation Temporary Disability and Industrial Disability Leave Benefits

<table>
<thead>
<tr>
<th>Questions about your benefits</th>
<th>Workers' Compensation Temporary Disability</th>
<th>Workers' Compensation Temporary Disability with supplementation of applicable leave credits (sick leave, vacation, personal holiday and/or CTO)</th>
<th>Industrial Disability Leave</th>
<th>Industrial Disability Leave with supplementation of sick leave credits accrued up to the date of injury or date of disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>How long are benefits provided?</td>
<td>Until able to return to work. For injuries prior to 04/19/04, 240 weeks within 5 years from date of injury maximum. For injuries between 04/19/04 – 12/31/07, aggregate T.D. will cap at 104 weeks from the first payment made. For injuries on or after 01/01/08, aggregate T.D. will cap at 104 weeks within a five-year period from the date of injury.</td>
<td>Same as under Temporary Disability</td>
<td>Until able to return to work (52 weeks within 2 years from first date of disability maximum). After expiration, may be eligible for Workers’ Compensation Temporary Disability Benefits.</td>
<td>Same as under Industrial Disability Leave</td>
</tr>
<tr>
<td>Does the CSU contribution to my health insurance premium continue?</td>
<td>No. You must pay full premium (CSU share plus employee share) directly to carrier to maintain coverage.</td>
<td>CSU contribution continues as long as leave credits remain</td>
<td>CSU contribution continues</td>
<td>Same as under Industrial Disability Leave</td>
</tr>
<tr>
<td>Do I continue to receive service credit for vacation, sick leave and seniority?</td>
<td>You continue to receive full credit</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
<td>Same as under Temporary Disability</td>
</tr>
<tr>
<td>Do I continue to make my PERS contribution?</td>
<td>Your option. If you wish to continue membership, you must pay directly to PERS.</td>
<td>You make PERS contributions on the leave credit portion of pay. You may pay remainder directly to PERS.</td>
<td>You continue to make your full PERS contribution</td>
<td>Same as under Industrial Disability Leave</td>
</tr>
<tr>
<td>How will disability benefits from other sources affect my benefits?</td>
<td>No effect</td>
<td>Same as under Temporary Disability</td>
<td>Your benefits may be reduced, if you receive other employer-subsidized programs</td>
<td>Same as under Industrial Disability Leave</td>
</tr>
</tbody>
</table>

*CSU contribution continues as long as leave credits remain.*
**INDUSTRIAL DISABILITY/WORKERS’ COMPENSATION**
**TEMPORARY DISABILITY COMPARISON ESTIMATE**

Name: 
Date of Injury/Disability: 
Direct Deposit: Yes: No: 
Gross Monthly Salary: 
Tax Status: 
Exemptions: Federal: State: 

**LEAVE CREDIT AVAILABLE AS OF:**
Sick leave: Vacation: 
Total leave credits: 
Total leave credits needed for a full month of supplementation: 

**INDUSTRIAL DISABILITY LEAVE (IDL):** Provides a benefit of up to 22 days at full pay, which is the employee’s gross salary less the amount that is normally deducted for mandatory deductions. After 22 days, the employee is paid at a rate of 2/3rds of his or her gross salary, less retirement contributions and certain voluntary deductions. The following computations establish monthly net benefit under each option. **THESE CALCULATIONS ARE ONLY AN ESTIMATE.**

<table>
<thead>
<tr>
<th>Gross Salary without IDL</th>
<th>$</th>
<th>-</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>First 22 days:</th>
<th></th>
<th>After 22 days (w/o supplement):</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. $</td>
<td>-</td>
<td>Gross IDL Full Pay</td>
<td>$ -</td>
</tr>
<tr>
<td>2. Less $</td>
<td>-</td>
<td>Retirement Contributions</td>
<td>$ -</td>
</tr>
<tr>
<td>$</td>
<td>-</td>
<td>Allowable Voluntary Deductions</td>
<td>$ -</td>
</tr>
<tr>
<td>$</td>
<td>-</td>
<td>Medical FlexCash</td>
<td>$ -</td>
</tr>
<tr>
<td>3. Total $</td>
<td>-</td>
<td>Estimated Monthly Net Benefit</td>
<td>$ -</td>
</tr>
</tbody>
</table>

**IDL with supplementation of Sick Leave Credits**

| 4. | $ - | Est. Net Benefit from #3 above |
| 5. Plus | $ - | Sick Leave Supplementation |
| 6. Less | $ - | Federal tax |
| $ - | State tax |
| $ - | Social Security Tax |
| $ - | Medicare Tax |
| $ - | Other Voluntary Deductions |
| 7. Total $ | - | Estimated Monthly Net Benefit |

**WORKERS’ COMPENSATION TEMPORARY DISABILITY (TD):** Provides a benefit that is based on 2/3rds of date of injury earnings up to allowable maximum set by state law. TD benefit (without supplementation) is not subject to federal, state, social security & Medicare taxes. The following computations establish monthly net benefit under each option. **THESE CALCULATIONS ARE ONLY AN ESTIMATE.**

<table>
<thead>
<tr>
<th>TD without supplementation:</th>
<th></th>
<th>Supplementation of Available Leave Credits:</th>
</tr>
</thead>
<tbody>
<tr>
<td>$</td>
<td>-</td>
<td>Estimated Monthly TD Benefit</td>
</tr>
<tr>
<td>$</td>
<td>-</td>
<td>Average Weekly Wage</td>
</tr>
</tbody>
</table>

| 1. | $ - | Leave credit supplementation |
| 2. Less | $ - | Federal Tax |
| $ - | State Tax |
| $ - | Social Security Tax |
| $ - | Medicare Tax |
| $ - | Retirement Contributions |
| $ - | Health Insurance (EE's portion) |
| $ - | Voluntary Deductions |
| $ - | Medical FlexCash |
| 3. Total $ | - | Estimated Monthly Net Benefit |
INDUSTRIAL DISABILITY/WORKERS’ COMPENSATION
TEMPORARY DISABILITY COMPARISON ESTIMATE

Name: Example TTD Employee  
Date of Injury/Disability: 01/12/2015  
Direct Deposit: Yes: X  
Tax Status: Married

Gross Monthly Salary: $ 3,885.00
Today’s Date: 09/07/2016
Exemptions: Federal: 0   State: 0

LEAVE CREDIT AVAILABLE AS OF: August 2, 2016

<table>
<thead>
<tr>
<th>Credit Type</th>
<th>Available Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sick leave</td>
<td>710.50</td>
</tr>
<tr>
<td>Vacation</td>
<td>250.16</td>
</tr>
<tr>
<td>Personal Holiday</td>
<td>8</td>
</tr>
<tr>
<td>CTO</td>
<td>234.92</td>
</tr>
<tr>
<td>Total leave credits</td>
<td>1,203.58</td>
</tr>
</tbody>
</table>

Total leave credits needed for a full month of supplementation: 57.78

INDUSTRIAL DISABILITY LEAVE (IDL): Provides a benefit of up to 22 days at full pay, which is the employee’s gross salary less the amount that is normally deducted for mandatory deductions. After 22 days, the employee is paid at a rate of 2/3rds of his or her gross salary, less retirement contributions and certain voluntary deductions. The following computations establish monthly net benefit under each option. THESE CALCULATIONS ARE ONLY AN ESTIMATE.

Gross Salary without IDL $ 3,885.00

First 22 days:
1. $ 3,174.22 Gross IDL Full Pay
2. Less $ (168.60) Retirement Contributions
   $ (150.19) Allowable Voluntary Deductions
   $ - Medical FlexCash
3. Total $ 2,855.43 Estimated Monthly Net Benefit

After 22 days (w/o supplement):
1. $ 2,590.00 2/3rds Gross Monthly Salary
2. Less $ (168.60) Retirement Contributions
   $ (150.19) Allowable Voluntary Deductions
   $ - Medical FlexCash
3. Total $ 2,271.21 Estimated Monthly Net Benefit

IDL with supplementation of Sick Leave Credits
4. $ 2,271.21 Est. Net Benefit from #3 above
5. Plus $ 1,295.00 Sick Leave Supplementation
   $ (9.44) State tax
   $ (80.29) Social Security Tax
   $ (18.78) Medicare Tax
   $ (100.00) Other Voluntary Deductions
7. Total $ 3,309.45 Estimated Monthly Net Benefit

WORKERS’ COMPENSATION TEMPORARY DISABILITY (TD): Provides a benefit that is based on 2/3rds of date of injury earnings up to allowable maximum set by state law. TD benefit (without supplementation) is not subject to federal, state, social security & Medicare taxes. The following computations establish monthly net benefit under each option. THESE CALCULATIONS ARE ONLY AN ESTIMATE.

TD without supplementation:
$ 2,590.00 Estimated Monthly TD Benefit
$ 597.69 Average Weekly Wage

Total Cost of Health Insurance
(employee pays directly to carrier)
$ 1,900.28

Supplementation of Available Leave Credits:
1. $ 1,295.00 Leave credit supplementation
2. Less $ (48.25) Federal Tax
   $ (9.44) State tax
   $ (80.29) Social Security Tax
   $ (18.78) Medicare Tax
   $ (39.10) Retirement Contributions
   $ - Health Insurance (EE’s portion)
   $ (250.19) Voluntary Deductions
   $ - Medical FlexCash
3. Total $ 848.95 Estimated Monthly Net Benefit
PANEL DISCUSSIONS
CAMPUS QUESTIONS

• Overlay of the process flow for EDD NDI claim approvals, payroll cut-off and green cycle processing windows, and how an employee can be paid promptly for these claims. Late claim submission to EDD results in slower processing. Campus has been informed that the SCO has to cut the NDI payment check after the window closes at the campus level.

• What is the best way to handle “pending NDI” once an employee has exhausted all of their leave credits? While an employee is on pending NDI and not receiving any type of pay, no deductions are withheld, thus the potential for losing eligibility (medical, dental, vision, ltd, etc.) if the employee does direct pay particularly for employees who have not exhausted FML.

• Payments – 10/12 Ten-Month or 11/12 Eleven-Month Pay Plan Employees: Employee is out on IDL 2/3, how does this effect their salary on their months “off” when they aren’t in work status? Do they receive a reduced Master because they have not set aside enough for full pay or is the pay IDL?
CAMPUS QUESTIONS

• If the employee is on NDI how does this affect the pay in their month off? What type of pay do they receive, NDI or their full salary? How is this documented.

• Employee is working 2 hours per day while on IDL, IDL is exhausted mid-month and employee is placed on TD with supplementation all in the same month, how is this documented?

• How is TD calculated for hourly rate, regular hours and supplementation when it occurs in the same month? Can employees continue to use their ongoing accruals during the TD period? Can any type of accrual be used?

• How are other campuses addressing overtime for employees with work restrictions? Industrial and non-industrial? Is overtime allowed? Is it on a case by case basis?

• Does NDI need to be full day/consecutive leave at the initial start of a leave?

• Can we offer/approve Catastrophic Leave for a personal illness if employee doesn’t qualify for NDI due to the intermittent basis of their need for time off?
STATE CONTROLLER’S OFFICE

Samples of Forms STD. 674 and 674D
Working While On IDL

**STATE OF CALIFORNIA - CONTROLLER'S OFFICE**

**INDUSTRIAL/NON-INDUSTRIAL/STATE DISABILITY PAY/ADJUSTMENT REQUEST**

STD. #400 (REV. 8/2013)

TO: STATE CONTROLLER - PPSD / DISABILITY UNIT

1. CRID  
2. SOCIAL SECURITY NUMBER  
3. F.I.L. LAST NAME

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |   |

5. PAY PERIOD
6. ENTER NUMBER OF HOURS AND CODE - Inter alia activity/working while on Disability (W=Worked; C=Industrial Disability (IDL)) or O=Off during the regular period of pay.

7. INDUSTRIAL DISABILITY (IDL)
   a. EMPLOYEE ON IDL FROM: THROUGH: 04/01/2016 04/29/2016
   b. EMPLOYEE ENTITLED TO ENHANCED IDL
   c. AVERAGE HOURS COMPUTED FOR INTERMITTENT EMPLOYEE: _________

8A. NON-INDUSTRIAL DISABILITY (NDI)
   a. EMPLOYEE ON NDI FROM: THROUGH:
   b. AVERAGE HOURS WORKED DURING PREVIOUS 18 MONTHS FOR INTERMITTENT EMPLOYEE: _________
   c. EMPLOYEE ON ANNUAL LEAVE PROGRAM Elected ______% SUPPLEMENTATION

9. PAYMENT PER CONTROLLER
   a. ISSUE DATE
   b. TIME WORKED
   c. WARRANT OR A/R NUMBER
   d. RET

10. PAYMENT SHOULD BE
   a. TYPE
   b. TIME WORKED
   c. TIMEBASE FRACTION

11. ADDITIONAL INFORMATION
    a. EMPLOYEE WORKING WHILE ON IDL
    b. Please transfer funds from Regular to IDL and issue IDL Supplementation

12. AUTHORIZED SIGNATURE
    a. DATE SIGNED
    b. YOUR SIGNATURE COMPLETE

13. CONTACT PERSON (other than authorized signature):
    a. COMPLETE

14. TELEPHONE NUMBER
    a. COMPLETE

15. EMAIL ADDRESS
    a. COMPLETE

42
IDL and TD in the same Pay Period
(Submit 674 and 674D as a package)
IDL and TD in the same Pay Period – con’t
(Submit 674 and 674D as a package)
Two Fractional Positions in the same Pay Period
(Submit separate 674Ds for each position)

STATE OF CALIFORNIA - CONTROLLER'S OFFICE
INDUSTRIAL/NON-INDUSTRIAL/STATE DISABILITY PAY/ADJUSTMENT REQUEST
STD. 674D (REV. 1/2013)

TO: STATE CONTROLLER - PPSPD / DISABILITY UNIT

1. CBID 2. SOCIAL SECURITY NUMBER 3. F.I.T. LAST NAME
R03 123-45-6789 D.T. Ross

5. PAY PERIOD
6. ENTER NUMBER OF HOURS AND CODE: Intervening activity working while on Disability: W = Worked, W = Worked, C = Industrial Disability (IDL) or Dock during the regular period of pay (L = Dock).
Please complete if employee is on alternate work schedule before, during and after Disability.

<table>
<thead>
<tr>
<th>T</th>
<th>MO</th>
<th>YR</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>10</td>
<td>16</td>
</tr>
</tbody>
</table>

7. INDUSTRIAL DISABILITY (IDL)
   a. EMPLOYEE IDL: FROM: THROUGH:
      10/01/2016 10/24/2016
   b. EMPLOYEE ENTITLED TO ENHANCED IDL
   c. AVERAGE HOURS COMPUTED FOR INTERMITTENT EMPLOYEE

8A. NON-INDUSTRIAL DISABILITY (NDI)
   a. EMPLOYEE ON NDI: FROM: THROUGH:
   b. AVERAGE HOURS WORKED DURING PREVIOUS 18 MONTHS FOR INTERMITTENT EMPLOYEE:
   c. EMPLOYEE ON ANNUAL LEAVE PROGRAM

8B. STATE DISABILITY INSURANCE (SDI)
   a. EMPLOYEE ON SDI: FROM: THROUGH:
   b. EMPLOYEE ELECTED SUPPLEMENTATION
   c. SID WEEKLY RATE:

9. PAYMENT PER CONTROLLER
   ISSUE DATE:
   TIME WORKED:
   WARRANT OR A/N NUMBER:

10. PAYMENT SHOULD BE
    TYPE:
        PT:
        TIME WORKED:
        SUPPLEMENTAL:
        NDI:
        IDL FULL:
        IDL 2/3:
        IDL 1/2:
        REGULAR:

11. ADDITIONAL INFORMATION
    EMPLOYEE WITH TWO FRACTIONAL POSITIONS
    1st Position - 7/15 Timebase

12. AUTHORIZED SIGNATURE
    DATE SIGNED

I hereby certify that the employee named above is entitled to this pay based on the appropriate government codes and/or employee has been notified of the impending account receivable. Prior to submitting this SSD 674D, the employee was given a reasonable time to respond.

13. CONTACT PERSON
    COMPLETE

14. TELEPHONE NUMBER
    COMPLETE

15. EMAIL ADDRESS
    COMPLETE
Two Fractional Positions in the same Pay Period – con’t
(Submit separate 674Ds for each position)

STATE OF CALIFORNIA - CONTROLLER'S OFFICE
INDUSTRIAL/NON-INDUSTRIAL/STATE DISABILITY PAY/ADJUSTMENT REQUEST
STD. 674D (REV. 02/13)

TO: STATE CONTROLLER - PPSD / DISABILITY UNIT

1. OBJ
   R03
2. SOCIAL SECURITY NUMBER
   123-45-6789
3. F.I. M.I. LASTNAME
   D T Ross

5. PAY PERIOD
   ENTER NUMBER OF HOURS AND CODE - Intervening activity working while on Disability (W=Worked; IDLL=Industrial Disability IDL) or Dock during the regular period of pay (L=Dock).
   Please complete if employee is on alternate work schedule before, during, and after Disability.

<table>
<thead>
<tr>
<th>T</th>
<th>MO</th>
<th>YR</th>
</tr>
</thead>
<tbody>
<tr>
<td>0</td>
<td>10</td>
<td>16</td>
</tr>
</tbody>
</table>

7. INDUSTRIAL DISABILITY (IDL)
   a. EMPLOYEE ON IDL
      FROM: THROUGH: 10/01/2016 10/24/2016
   b. ☐ EMPLOYEE ENTITLED TO ENHANCED IDL
   c. ☐ AVERAGE HOURS COMPUTED FOR INTERMITTENT EMPLOYEE:

8A. NON-INDUSTRIAL DISABILITY (NDI)
   a. EMPLOYEE ON NDI
      FROM: THROUGH:
   b. ☐ AVERAGE HOURS WORKED DURING PREVIOUS 18 MONTHS FOR INTERMITTENT EMPLOYEE WAS:
   c. ☐ EMPLOYEE ON ANNUAL LEAVE PROGRAM
      Elected % SUPPLEMENTATION

8B. STATE DISABILITY INSURANCE (SDI)
   a. EMPLOYEE ON SDI
      FROM: THROUGH:
   b. ☐ EMPLOYEE ELECTED SUPPLEMENTATION
   c. SDI WEEKLY RATE: $

9. PAYMENT PER CONTROLLER
   ISSUE DATE
   MO | DY | YR | PT | DAYS | HOURS | WARRANT OR authority | RET |

10. PAYMENT SHOULD BE
    TIME WORKED
    TYPE | PT | DAYS | HOURS | TIMEBASE FRACTION
    REGULAR | 0 | 5 | | 8/15 |
    SUPPLEMENTAL
    NDI | T | | | |
    IDL FULL | 6 | 16 | | 8/15 |
    IDL 2/3 | N | | | |
    IDL 1/3 | U | | | |

11. ADDITIONAL INFORMATION
    EMPLOYEE WITH TWO FRACTIONAL POSITIONS
    2nd Position • 8/15 Timebase

I hereby certify that the employee named above is entitled to this pay based on the appropriate government codes and/or employee has been notified of the impending account receivable. Prior to submitting this STD. 674D, the employee was given a reasonable time to respond.

AUTHORIZED SIGNATURE   DATE SIGNED

YOUR SIGNATURE   COMPLETE

COMPLETE

COMPLETE

COMPLETE

COMPLETE

COMPLETE

COMPLETE

COMPLETE

COMPLETE
# NDI with Catastrophic Leave

## STATE OF CALIFORNIA - CONTROLLER'S OFFICE

### INDUSTRIAL/NON-INDUSTRIAL STATE DISABILITY PAYMENT/ADJUSTMENT REQUEST

**STD. 0710 (REV. 0/2013)**

**TO:** STATE CONTROLLER - PSID / DISABILITY UNIT

<table>
<thead>
<tr>
<th>CBID</th>
<th>SOCIAL SECURITY NUMBER</th>
<th>F.I.</th>
<th>M.I.</th>
<th>LAST NAME</th>
</tr>
</thead>
<tbody>
<tr>
<td>R07</td>
<td>123-45-6789</td>
<td>M J</td>
<td>TAYLOR</td>
<td></td>
</tr>
</tbody>
</table>

**5. PAY PERIOD**

- ENTER NUMBER OF HOURS AND CODE: Intervening activity/working while on Disability (WeWorked), Catastrophic Disability (CDL) or Dock during the regular period of pay (LaDock).

Please complete if employee is on alternate work schedule before, during, and after Disability.

| T | MO | YR | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 | 12 | 13 | 14 | 15 | 16 | 17 | 18 | 19 | 20 | 21 | 22 | 23 | 24 | 25 | 26 | 27 | 28 | 29 | 30 | 31 |
|---|----|----|---|---|---|---|---|---|---|---|---|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 1 | 0  | 10 | 16 |

**7. INDUSTRIAL DISABILITY (IDL):**

- EMPLOYEE ON IDL FROM: THROUGH:

- EMPLOYEE ENTITLED TO ENHANCED IDL

- AVERAGE HOURS COMPUTED FOR INTERMITTENT EMPLOYEE:

**8A. NON-INDUSTRIAL DISABILITY (NDI):**

- EMPLOYEE ON NDI FROM: THROUGH:

**9. PAYMENT PER CONTROLLER**

<table>
<thead>
<tr>
<th>ISSUE DATE</th>
<th>TIME WORKED</th>
</tr>
</thead>
<tbody>
<tr>
<td>MO</td>
<td>DY</td>
</tr>
<tr>
<td>0</td>
<td>10</td>
</tr>
</tbody>
</table>

**11. ADDITIONAL INFORMATION**

- Please issue Partial Supplementation and NDI.

**10. PAYMENT SHOULD BE**

<table>
<thead>
<tr>
<th>TYPE</th>
<th>TIME WORKED</th>
</tr>
</thead>
<tbody>
<tr>
<td>REGULAR</td>
<td>0</td>
</tr>
</tbody>
</table>

**12. AUTHORIZED SIGNATURE**

I hereby certify that the employee named above is entitled to this pay based on the appropriate government codes and an employee has been notified of the reporting accountable. Prior to submitting this STD 0710, the employee was given a reasonable time to respond.

**13. CONTACT PERSON**

**14. TELEPHONE NUMBER**

**15. EMAIL ADDRESS**
## Temporary Disability Allowance

### PAYROLL ADJUSTMENT NOTICE

**STATE OF CALIFORNIA**

**TO STATE CONTROLLER’S OFFICE**

- ADMIN & DISBURSEMENTS
- PPSS/PAYROLL OPERATIONS

**PPSS UNIT DESTINATION:**
- PAYROLL
- GARNISHMENTS
- DISABILITY
- RETIREMENT
- W2/1099 UADS
- BENEFIT DEDUCTIONS
- MISC. DEDUCTIONS

#### TO: 123-45-8789

#### FROM: MB SANCHEZ

#### DOC NO.: 1

#### AGENCY: 123
#### UNIT: 456
#### CLASS: 2358
#### SERIAL: 001

### PAYMENT DETAILS

#### PAYROLL PERIOD:

- **Issue Date:**
- **Pay Period:**
- **Salary Type:**
- **Salary Full:**
- **Time Worked:**
- **APPT. ITN:**
- **GROSS:**
- **NET PAY:**
- **ACCT. REC. OR WARRANT NO.:**
- **RELEASED:**
- **PAID BY:**

#### PAYMENT

- **payment per 500 warrant register:**
- **Payment should be:**
- **Date:**
- **Time:**
- **GROSS:**
- **NET PAY:**

#### TOTAL

- **$3400.00**
- **$1263.00**

### CERTIFICATION

- **I certify that the employee named above is entitled to this pay based on the appropriate government codes.**
- **PAYMENT INFORMATION CORRECT IN ACCORDANCE WITH 8 C. R. 5.33.7.**
- **AUTHORIZED SIGNATURE:**
- **DATE:**

### COMPLETION

- **FORM COMPLETED BY:**
- **TELEPHONE NUMBER AND EXTENSION:**
- **AGENCY NAME:**
- **COMPLETE:**
- **COMPLETE:**

---

*Note: The form contains detailed payroll information and signature fields.*
Completion of Form STD. 674D

- Item 1  CBID
- Item 2  Social Security Number
- Item 3  Employee Name
- Item 4  Position number for pay period of the request
- Item 5  Pay Period
- Item 6  Must be completed when employee is Working While on Disability
- Item 7  Industrial Disability (IDL)
  a. Enter all-inclusive dates employee is entitled to IDL benefits
  b. Check this item if employee is entitled to Enhanced IDL
Completion of Form STD. 674D – con’t

• Item 7  
  c. Enter average hours for Intermittent Employee

• Item 8  
  Non-Industrial Disability
  a. Enter all-inclusive dates employee is entitled to NDI benefits
  b. Enter average hours for Intermittent Employee
  c. Check this item if employee is on Annual Leave

• Item 9  
  Payment Per Controller
Completion of Form STD. 674D – con’t

• Item 10 Payment Should Be
  (Total time for the pay period must be completed)
• Item 11 Additional Information
• Item 12 Authorized Signature
• Item 13 Contact Person
• Item 14 Telephone Number
• Item 15 Email Address
Completion of Form STD. 674

- **Item 1** Mark PPSD/Disability box
- **Item 2** Social Security Number
- **Item 3** Employee Name
- **Item 4** Position number for pay period of the request
- **Item 5** Check Payment or Adjustment Request
- **REMARKS** Enter TD Period
  - **A.** Hourly Rate
  - **B.** TD Hours
  - **C.** Partial or Full Supplementation Hours
  - **D.** Enter dates and hours worked while on TD (if applicable)
  - **E.** Enter Sedgwick daily rate
Completion of Form STD. 674D – con’t

- Item 6
  - A. Payment Per Controller
  - B. Payment Should Be
  - C. Underpayment

- Item 7
  - Form Completed By
# SCO Contact Information

Customer Contact Center (916) 372-7200

<table>
<thead>
<tr>
<th>Disability</th>
<th>CSU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Press 4</td>
<td>Press 1 Personnel</td>
</tr>
<tr>
<td>Press 1</td>
<td>Press 2 Payroll</td>
</tr>
<tr>
<td>Press 2</td>
<td>Press 3 Benefits</td>
</tr>
<tr>
<td></td>
<td>Press 4 Garnishments</td>
</tr>
<tr>
<td></td>
<td>Press 5 Misc. Deductions</td>
</tr>
<tr>
<td>Press 1 Disability</td>
<td>Fax (916) 327-7205</td>
</tr>
<tr>
<td>Press 1 IDL</td>
<td>Fax (916) 327-7205</td>
</tr>
<tr>
<td>Press 2 NDI/TD/TDA</td>
<td></td>
</tr>
</tbody>
</table>

Website: [www.sco.ca.gov](http://www.sco.ca.gov)

References: PPM Section E and Z
QUESTIONS