ADMINISTRATORS' SICK LEAVE BANK GUIDELINES

The Administrators' Sick Leave Bank (ASLB) is available to employees in the following *work schedule* groups:

- CSE
- MSE
- PSE
- SPE (Principal Salary Schedule).

This provides benefits to participants who have exhausted all accrued leave (personal, sick, annual) and are experiencing a catastrophic illness or injury. Application for compensation benefits from the ASLB while on an approved leave of absence must be made in a timely manner prior to exhaustion of available leave in order to ensure no interruption of pay. The ASLB's purpose is to provide sick leave coverage to those employees intending to return to work upon recovery from their illness or injury.

- To be eligible for an APS extended medical leave of absence, an employee must have actively worked for APS a minimum of one full year (contract or calendar) immediately prior to the Leave start date.
- To receive ASLB benefits, an employee must be eligible for both an APS extended medical leave and ASLB benefits.
- Generally, pregnancy, intermittent or chronic conditions are not covered by the ASLB.
- Employees must contact the Sick Leave Bank Specialist or Extended Leaves Specialist to determine FMLA eligibility.

A. ELIGIBILITY

Each eligible employee must complete the Administrators' Sick Leave Bank Enrollment form, authorizing payroll deductions for membership in the ASLB. Part-time employees are also eligible for enrollment in the ASLB.

Per paycheck payroll deductions are stated and are subject to committee review annually.

New Hires, New Enrollees:

- Deductions will begin on the first paycheck of the month after the ASLB enrollment form is processed.
- For all new enrollees to the ASLB, eligibility to apply for ASLB benefits will begin ninety (90) days after the enrollment form is processed, subject to extended medical leave of absence eligibility.

Open Enrollment/Disenrollment:

- Annually, an open enrollment period will occur during the month of October. Previously enrolled employees need not re-enroll. For all new enrollees to the ASLB, eligibility to apply for ASLB benefits will begin ninety (90) days after the enrollment form is received. New employees to APS will have sixty (60) days from the date of hire to enroll in the ASLB.

For new enrollees to the ASLB, deductions will begin on the first of the month after the ASLB enrollment form is processed.

- A member may disenroll only during the open enrollment period during the month of October, effective November 1.
- It is the member's responsibility to notify the Sick Leave Specialist when a position change has occurred, such that the employee is no longer in an ASLB eligible position. The employee will then be disenrolled from the ASLB.
- Payroll deductions to the ASLB are irretrievable/nonrefundable.

Employees on Extended Leaves of Absence:

- Employees on an extended leave of absence are not eligible to enroll in the ASLB until reinstated to active status.
- ASLB members on a paid extended leave of absence will remain active in the ASLB. Members on an unpaid extended leave of absence may continue ASLB membership by paying the fees monthly, as outlined in the Leave of Absence Letter (contact the APS Employee Benefits Office for additional information).
- Members that drop ASLB while on an unpaid extended leave of absence must re-enroll within sixty (60) days of reinstatement to active status, and must again satisfy the ninety (90)-day waiting period before being eligible to apply for ASLB benefits.
- Members returning from an extended leave of absence should verify their re-enrollment in the ASLB with the Sick Leave Bank Specialist at Extended.Leaves@aps.edu or 505-830-6246.

B. ADMINISTRATION

1. The ASLB Review Committee consists of one (1) voting member appointed by each of the participating units for consultation as necessary and the ASLB administrator. Such consultation may include responding to committee requests for technical assistance in administering benefits through payroll, support from the Employee Assistance Program (EAP) when working with mental health/substance abuse related claims, and other assistance as requested by the ASLB Review Committee.

2. The ASLB Review Committee reviews all applications requesting benefits from the ASLB.

3. ASLB Review Committee decisions are final and are not subject to grievance procedures. By enrolling in the ASLB, the employee waives any right to seek redress for any claim, real or imagined, against the district, the ASLB Review Committee, any of its members or any of the units represented on the committee as a result of any decision made by the committee.

4. Approved requests are subject to on-going review by the ASLB Review Committee to assure that all guidelines are being followed. If the committee finds that an employee is not complying with guidelines, requested ASLB benefits will terminate. In addition, the ASLB Review Committee reserves the right to terminate membership/privileges and the employee may be held responsible for repaying any inappropriately obtained benefits from the ASLB. The ASLB reserves the right to seek garnishment to retrieve inappropriately obtained benefits.

5. An operations report will be prepared and submitted to the APS Board and the participating bargaining units on an annual basis by the ASLB administrator.

6. Benefits are available subject to the ASLB's ability to pay.

C. USAGE/OTHER CONDITIONS

1. To receive ASLB benefits, an employee must be eligible for both an APS extended medical leave of absence **and** ASLB benefits. To be eligible for an APS extended medical leave of absence, an employee must have actively worked for APS a minimum of one contract year immediately prior to the Leave start date. For new enrollees to the ASLB, eligibility to apply for ASLB benefits will begin ninety (90) days after the enrollment form is processed.

2. The maximum benefit provided by the ASLB will be determined by the ASLB Review Committee on a case-by-case basis and will not exceed forty (40) days per eligible condition, per lifetime. Claims for benefits that suggest a 'pattern of usage' are subject to denial by the committee.

3. Alteration or falsification of information on either form (enrollment or application for benefits) could result in termination of benefit and disenrollment from ASLB.

4. The maximum life-time benefit for all combined sick leave claims by an individual shall not exceed $25,000.00. This limit shall become effective for all claims filed after August 1, 2025.

5. Claims are subject to a ten (10) day deductible/waiting period for each eligible condition. The deductible may be met through the use of all accumulated leave (sick, personal, annual). Without such accumulated leave, a payroll docking will occur (unpaid leave). Employees must exhaust all available accrued leave time before benefits from the ASLB will be started. If a claim extends into a new fiscal year and the deductible has been met in the previous year, no further deductible shall be required to be met for the particular claim.

   Sick leave days utilized for needs directly related to a specific claim may also be counted toward meeting the deductible requirement. Documentation from the physician treating the claimant must be provided as verification that usage of those sick leave days was related to the claim. Sick leave days used in relation to a claim prior to eligibility may be applied toward meeting the ten (10) day deductible.

   If an additional unrelated claim occurs in the same fiscal year as a previous claim, no additional deductible need be met.

6. Benefits from the ASLB may be drawn only for those days of the year identified by the district as workdays for the applicant.

7. While on an approved extended leave of absence through the ASLB, an employee may not volunteer or perform any duties for APS or utilize APS property for personal use. Employees who are on an approved extended leave of absence through the ASLB may not engage in any form of self-employment, may not perform work for any other employer and may not accept any employment elsewhere, including part-time or a temporary position.

8. Payroll deductions to the ASLB are irretrievable/nonrefundable.

9. Membership in the ASLB is continuous and may be canceled by a member (in writing) only during the annual open enrollment period.

10. It is the employee's responsibility to inform their supervisor of their application for a benefit to the ASLB at the time the application is submitted.

D. INFORMATION AND GUIDELINES FOR REQUESTING DAYS FROM THE ADMINISTRATORS' SICK LEAVE BANK

1. Request must be submitted on the official APS Administrators' Sick Leave Bank Application form and must be accompanied by the APS Administrators' Sick Leave Bank Physician's Statement from a physician, or other healthcare provider as identified in section D.5., licensed to treat in the area described in the application. The APS Administrators' Sick Leave Bank Physician's Statement MUST include the therapeutic treatment plan and an anticipated date of 'return to work.' INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED FOR BENEFITS.

2. The ASLB Review Committee reserves the right to require a second opinion.

3. Catastrophic personal illness or injury is defined to be an illness or injury which meets ALL of the following conditions:

    a. The condition is sudden, unexpected and of such severity, as certified by the employee's physician, that the employee is under an active treatment plan and unable to perform essential job functions.

    b. Treatment for a catastrophic condition cannot be postponed without substantial risk of harm to the employee. Treatment which does not require immediate attention should be obtained during the employee's normal non-working period (i.e.: winter break, spring break, summer break, etc.). Treatment for a condition which does not require immediate attention but is scheduled for the employee's convenience shall not be eligible for benefits from the ASLB.

    c. The amount of time required for treatment of a catastrophic illness or injury must exceed the employee's accrued sick leave, personal leave and annual leave.

4. Requests for ASLB benefits related to pre-delivery and post-delivery maternity complications are a one-time lifetime benefit, and will be considered if:
    - the condition requires hospitalization
    - OR if the physician has confined the patient to bed AND has ordered home health care services and/or regular, ongoing monitoring.

    At the request of the ASLB Review Committee, applicants must submit any and all documentation including, but not limited to, the therapeutic treatment plan, progress reports, medications, estimated recovery period and date of return to work. This report, based upon the treatment plan at the time of initial application, must be updated every twenty (20) calendar days and the physician's documentation will include any treatment plan changes. Failure to comply may lead to cessation of benefits. Caesarian sections or deliveries are not considered a complication.

5. Benefits for Mental Health claims (including conditions identified as depression, anxiety and chemical dependency) are restricted to an aggregate forty (40) day, one-time, lifetime benefit. To be eligible for this benefit, members must:

   a. be under the care of a licensed board certified psychiatrist or a licensed clinical psychologist. Under certain extenuating circumstances, the ASLB Review Committee will consider applications where treatment is being provided by:
      - Licensed Independent Social Worker
      - Licensed Professional Clinical Counselor
      - Licensed Clinical Nurse Specialist
      - Licensed Primary Care Physician
      - Licensed Nurse Practitioner

   b. participate in an active treatment program; and

   c. application must be accompanied by a statement from the care provider identified above which includes an indication of the therapeutic treatment plan, medications, duration of illness, and estimated date of return to work.

      The healthcare provider's statement, which is based upon the treatment plan at the time of initial application, must be updated every twenty (20) calendar days. Updates must include all the information required in D.5.c. above. Failure to comply may lead to cessation of benefits. Continued benefit depends upon the submission of updated progress reports. ASLB benefits based upon Mental Health or Chemical Dependency claims are limited to a one-time, lifetime benefit (as per D.5 above).

6. Work related injuries will not be covered by the ASLB. Please see APS policy on work-related injuries.

7. Should there be any compensation to the member for loss of wages from any other insurance (excluding disability insurance), or as a result of a lawsuit, the ADMINISTRATORS' SICK LEAVE BANK must be reimbursed for the value of the benefits that were granted resulting from the event causing the loss of wages. The ASLB Review Committee must receive a statement from the applicant's attorney or insurance company at the time a suit is filed or a claim is made. Failure to provide repayment to the Administrators' Sick Leave Bank will result in the suspension of future benefits until full payment is received.

8. ASLB benefits are available only for the employee's personal illness. Benefits are not available for any condition attributed to the illness, injury, or care of a family member.

9. Application for benefits from the ASLB must be made in a timely manner prior to the exhaustion of available leave in order to ensure no interruption of pay. Late applications submitted after the payroll deadline for a given pay period will be processed for payment in the next pay period and could result in an interruption of pay. Excessively late applications will be considered at the discretion of the committee and could be subject to denial of benefits. Extenuating circumstances will be considered.

Questions regarding ASLB may be addressed to the Sick Leave Bank Specialist at Extended.Leaves@aps.edu or 505-830-6246.