ALBUQUERQUE PUBLIC SCHOOLS – ALBUQUERQUE TEACHERS FEDERATION – ALBUQUERQUE FEDERATION OF CLASSIFIED PROFESSIONALS

EMPLOYEE FUNDED
SICK LEAVE BANK GUIDELINES

The Sick Leave Bank (SLB) is available to employees covered by the negotiated agreements for the:

- Albuquerque Teachers Federation (ATF)
- Albuquerque Federation of Classified Professionals (AFCP)

The respective negotiated agreements provide this benefit to participants who are experiencing a catastrophic illness or injury, and who will exhaust all accrued leave balances (personal, sick, annual). Application for compensation benefits from the SLB while on an approved APS extended leave of absence must be made in a timely manner prior to the exhaustion of available leave in order to ensure no interruption of pay. The SLB's purpose is to provide sick leave coverage to those employees intending to return to work upon recovery from their illness or injury and who meet the benefits eligibility requirements as specified in these Guidelines.

- To be eligible for an Albuquerque Public Schools (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. This will be reviewed on a case-by-case basis.
- To receive SLB benefits, an employee must be eligible for both an APS extended medical leave of absence **and** SLB benefits.
- Generally, pregnancy, intermittent, or chronic conditions are not covered by the SLB.
- Employees must contact the SLB Specialist or Extended Leaves Specialists to determine FMLA eligibility, Extended.Leaves@aps.edu.

A. ELIGIBILITY

Each eligible employee must complete the APS Sick Leave Bank Enrollment form authorizing payroll deductions for membership in the Bank. Part-time employees are eligible for enrollment in the SLB. Twice monthly payroll deductions are stated and are subject to committee review annually. Deductions will begin by the first of the month after the SLB enrollment form is processed. To receive SLB benefits, an employee must be eligible for both an APS extended medical leave of absence and SLB benefits.

1. New Hires
   New employees to APS will have sixty (60) days from the date of hire to enroll in the SLB.

2. Employees on Leave of Absence
   Employees on a leave of absence are not eligible to enroll in the SLB until reinstated to active status and during an Open Enrollment period.

   SLB members on a paid leave of absence will remain active in the SLB. Members on an unpaid

leave of absence may continue SLB membership by paying the monthly membership dues (contact the APS Employee Benefits Office for these situations). Members that drop SLB enrollment while on an unpaid leave of absence may re-enroll in the SLB within sixty (60) days of their return to active employment status and must satisfy the 90day waiting period before being eligible to apply for SLB benefits. Members returning from leave of absence should verify their re-enrollment in the SLB with the SLB Specialist, Extended.Leaves@aps.edu or (505) 830-6246.

3. Open Enrollment/Disenrollment
   a. Annually, an open enrollment period will begin August 1st. Presentations on the SLB and enrollment opportunities will be given at new employee orientation events held by the respective unions. The open enrollment period will end on October 31st. Previously enrolled employees need not re-enroll.
   b. A request to withdraw from participation in the bank must be submitted in writing to the SLB Committee within ten (10) workdays of the new contract year or during the open enrollment period. Employees must notify the SLB Specialist in writing when a position change has occurred and the employee is no longer in an ATF/AFCP SLB-eligible position. The employee will then be dis-enrolled from the SLB.

4. New Enrollment Period
   For all new enrollees to the SLB, eligibility to apply for SLB benefits will begin ninety (90) days after the enrollment form is processed.

B. ADMINISTRATION

1. The SLB Review Committee consists of one (1) voting member appointed by each of the participating bargaining units and district personnel for consultation, as necessary. Such consultation may include responding to committee requests for technical assistance in administering benefits through payroll or other assistance as requested by the SLB Review Committee. The SLB Committee does not consist of any medical professionals.

2. The SLB Review Committee reviews all applications submitted for benefits from the SLB. Meetings are held a few days prior to each pay date. While the normal expectation is that all committee members attend all committee meetings at which applications are reviewed, the committee recognizes that from time to time a committee member may be unable to attend. The committee shall be empowered to make decisions on approval or denial if at least one (1) of the two (2) voting members with the SLB Administrator present. Applications are due no later than 3 PM the day prior to each meeting. You may reach out to the SLB Specialist to know when the next meeting will take place.

3. SLB Review Committee decisions are final and are not subject to the grievance procedure. By enrolling in the SLB, the employee waives any right to seek redress for any claim, real or imagined, against the District, the SLB Review Committee, any of its members or any of the bargaining 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 SLB Review Committee to ensure that all guidelines are being followed. If the committee finds that an employee is not complying with guidelines, requested SLB benefits will terminate. In addition, the SLB Review Committee reserves the right to terminate membership/privileges, and the employee may be held

responsible for repaying any inappropriately obtained benefits from the SLB. The SLB reserves the right to seek garnishment to retrieve inappropriately obtained benefits.

5. An operations report will be prepared and submitted to the participating bargaining units on a monthly basis.

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

7. The SLB Review Committee will review the SLB Guidelines annually to update the document as necessary.

8. SLB dues are subject to review and adjustment as approved by the SLB Review Committee and their respective bargaining units.

9. If an employee is approved for SLB benefits, the employee will receive a letter stating the condition the approval was made for. This letter will also include the dates and monetary value of the award.

C. USAGE/OTHER CONDITIONS

1. To receive SLB benefits, an employee must be eligible for both an APS extended medical leave of absence **and** SLB 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. This will be reviewed on a case-by-case basis. For new enrollees to the SLB, eligibility to apply for SLB benefits will begin ninety (90) days after the enrollment form is processed.

2. The maximum benefit provided by the SLB will be determined by the SLB Review Committee on a case-by- case basis and will not exceed forty (40) days per eligible condition for leave, 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 could result in termination of benefit and disenrollment from SLB.

4. The maximum lifetime benefit for all combined sick leave claims by an individual shall not exceed $35,000. This limit shall become effective for all claims filed after July 31, 2025.

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

    a. Consecutive 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 are related to the claim. If verified by the physician, sick leave days utilized in relation to a claim prior to approval may be applied toward meeting the 10-day deductible.

b. For new enrollees applying for SLB benefits immediately after the 90 day enrollment period has passed, the deductible period will be applied starting on the first date of eligibility. This would be the 91st day of enrollment.

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

d. Employees requesting leave will not be able to utilize any more leave than has been accrued up until that point in the contract year.

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

7. While on an approved leave through the SLB, an employee may not volunteer or perform any duties for APS, or utilize APS property for personal use. Employees who are on an approved leave of absence through the SLB 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 SLB are irretrievable/nonrefundable.

9. Membership in the SLB is continuous and may be canceled by a member in writing:

   a. Within the first ten (10) days of a new contract year.

   b. During the annual August 1 – October 31 Open Enrollment period.

   c. If a position change to a non-eligible position has occurred.

10. The employee's supervisor must be informed by the employee of his/her application for a benefit to the SLB at the time the application is submitted.

11. In the event an employee has been granted a SLB Award and requests an early return or is no longer employed with APS for any reason, the unused portion of the SLB Award will be returned to the SLB.

D. GUIDELINES FOR REQUESTING DAYS FROM THE SICK LEAVE BANK.

1. The request must be submitted on the official APS/ATF/AFCP Sick Leave Bank Application form and must be accompanied by the APS/ATF/AFCP Sick Leave Bank Physician's Statement from a physician, or other health care provider as identified in section D.5., licensed to treat in the area described in the application. The APS/ATF/AFCP Sick Leave Bank Physician's Statement must include a clear diagnosis, prognosis, therapeutic treatment plan, a start date, and an anticipated date of the employee's return to work. INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED FOR BENEFITS.

2. The SLB 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 SLB.

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 balances.

4. Benefits related to pre-delivery and post-delivery maternity complications are a one-time lifetime benefit and will be considered, as follows:
    - if the condition requires hospitalization.
    - if the physician has confined the patient to bed.
    - if the physician has ordered home health care services.

    At the request of the SLB Review Committee, applicants must submit all related 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. General high risk pregnancies, caesarian sections, and 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 SLB 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;

    c. The application must be accompanied by a statement from the health 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 health care 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. SLB benefits based upon mental health or chemical dependency claims are limited to a one-time, lifetime benefit (as per section 5 above).

6. Work-related injuries will not be covered by the SLB. For APS related work-related injuries, please see the 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 law suit, the SLB must be reimbursed for the value of the benefits that were granted resulting from the event causing the loss of wages. The SLB 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 SLB will result in the suspension of future benefits until full payment is received.

8. SLB 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 SLB 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 given pay period will be processed for payment in the next pay period and could result in an interruption of pay. Excessively late (90 days or more) applications will be considered at the discretion of the committee and could be subject to denial of benefits. Extenuating circumstances may be considered.

E. Disclaimer

The SLB Committee members are not medical professionals.

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