

Applying for Catastrophic Leave

The Catastrophic Leave Bank Program is a State employee benefit established by Arkansas Code Annotated 21-4-214 et seq. The program is designed to assist employees in the event of a catastrophic illness or injury, either their own illness or that of a family member (defined as spouse, parent or dependent child).

The purpose of the program is to provide paid leave for employees with a catastrophic illness or injury (or family member with catastrophic illness or injury) who have exhausted all other paid leave.

Catastrophic Illness Defined

Catastrophic illness, as defined by the State, means a personal emergency limited to catastrophic and debilitating medical situations, severely complicated disabilities, and severe accidental injuries which cause the employee to be incapacitated from the performance of assigned job duties, which require a prolonged period of recuperation, and which require the employee's absence from duty as documented by a physician or other individual as provided in ARK.CODE Annotated 21-4-201 et seq.

Catastrophic Leave Bank

The University of Arkansas at Little Rock Catastrophic Leave Bank is a pool of accrued leave donated by eligible employees which may be transferred to qualified recipients. Approval of catastrophic leave provides for a transfer of hours from the pool for the use of the employee. However, the employing department is responsible for paying the employee on leave.

Eligibility Requirements

There are certain eligibility requirements an employee must meet in order to be considered for Catastrophic Leave. Employees may apply for the program directly through the Department of Human Resources. The Department of Human Resources will verify eligibility criteria:

1. Current, regular, full-time, benefits eligible state employee for a minimum of two (2) years,
2. Exhaustion of all accrued leave (sick, vacation, holiday and compensatory time),
3. No disciplinary action for leave abuse in previous two (2) years,
4. The employee must have a current "Physician's Certification" of a medical condition which prevents the employee from performing the employee's job duties for a prolonged period of time (30 working days or 6 calendar weeks).

Catastrophic Leave Award

Award is based on the medical condition and not financial need. Catastrophic leave is not awarded retroactively. It is important that the employee file as soon as he or she realizes the potential need for Catastrophic Leave. The application should be completed prior to using all accumulated leave.

The length of the leave is based on the Physician's Certification. If the original award date is reached prior to being released to full duty from the physician, an extension may be

requested and subject to approval. A written statement from the physician must be presented to the committee to request additional award.

The committee may grant up to six (6) months or 1040 hours of paid leave. Receipt of leave may be limited to the start date of the employee's Long Term Disability Insurance, Social Security Disability payments, or a maximum of six (6) months or 1040 hours, whichever is less.

Payroll Process

When an employee is awarded Catastrophic Leave, the employee's department should process EPAF/PAF for the employee. The employee's vacation and sick will continued to be accrued while the employee is on Catastrophic Leave, all leave earned during the period while the employee is on Catastrophic Leave will be returned to the UALR Catastrophic Leave Bank. Exceptions may be made for employees awarded intermittent leave.

Employee Benefits

While the employee is on Catastrophic Leave, the university will continue to cost share with the employee's benefits (medical, dental, basic life and basic long term disability). The employee's benefit coverage and any other payroll deductions will not change, unless changes are made to the benefits plans, such as, premium increases or coverage changes.

Workers' Compensation

The employee may receive Workers' Compensation Benefits and Catastrophic Leave at the same time once all leave time is exhausted, injury is determined to be catastrophic and the employee's Worker's Compensation claim is accepted by the carrier. Catastrophic Leave is used only to bring the employee's paid amount up to 100%. An employee may return to work part-time and remain on Catastrophic Leave to bring the employee's pay to 100% as long as they are still under doctor's care and approved by the committee.

Family and Medical Leave Act (FMLA)

The Family and Medical Leave Act (FMLA) of 1993 requires covered employers to provide up to twelve (12) weeks of unpaid, job-protected leave to eligible employees for certain family and medical reasons. An employee with a medical condition that meets the definition of catastrophic illness under the Catastrophic Leave program may also meet FMLA eligibility requirements.

In addition to any other FMLA leave the employee may have used (or any unused portion of the FMLA entitlement), Catastrophic Leave time taken will reduce your twelve (12) week FMLA entitlement during the specific 12-month period.

Upon notification of a "FMLA eligible" situation, the FMLA requires employers to give employees written notice that their leave time in regard to the situation will be deducted from their twelve (12) week FMLA entitlement. The information provided above serves as notice that your twelve-week FMLA entitlement will be reduced by the amount of any Catastrophic Leave time used by you. The first twelve (12) weeks of Catastrophic Leave will be counted towards the employee's right to leave under the FMLA, if applicable.

Catastrophic Leave Application Instructions

Application Instructions

Applicant should obtain and read the “Applying for Catastrophic Leave” document. The following forms must be completed when applying for Catastrophic Leave.

1. Recipient Application

- Complete Part I of the application and sign the form (obtain department head/supervisor’s signature).
- It is the responsibility of the applicant to have the necessary signatures on the form before turning it in.

2. Physician Certification

- Complete Part I and sign the authorization to release information section of the physician certification.
- It is important that the attending physician(s) fill out the form as completely as possible. The physician may attach additional information to the form as is necessary.
- If your physician(s) have questions, they may contact Department of Human Resources at (501) 569-3180.

3. Liability Agreement

- Read and sign the form.

4. Dependent Child Certification

- **Only required if the catastrophic leave is for a dependent child.

5. Medical Certification Letter

- **Only required if the catastrophic leave is for a family member.
- If the employee is requesting Catastrophic Leave for a family member, an employee must submit a letter from the physician regarding why consistent care is needed from the employee is required in addition to the completed Physician Certification form.

Application and Approval Process

1. Turn in all forms to the Department of Human Resources.
2. The Catastrophic Leave Committee meets and evaluates all completed applications. The Committee makes recommendations to the Chancellor on whether an applicant should be awarded or denied Catastrophic Leave.
3. The Chancellor makes final decision. The Committee Chairperson will notify the applicant, the applicant’s department supervisor, and the Payroll Department of the final decision.

Questions

If you have any questions, please contact the Department of Human Resources at (501) 569-3180.