MODEL OPTIONS/CONTACT LETTER

Date

Name
Address
Address

Dear Mr./Ms.

The Department is in receipt of the [DATE] medical report of [DOCTOR'S NAME] which indicates that you are unable to perform the duties of your current position, [JOB TITLE], with this department. Therefore the following information is being provided for you to let you know of the various options which may be available to you. We invite you to engage with us in an interactive process to begin to develop an appropriate plan for resolving the issues raised in this report.

Please contact me by [DATE] to set up a meeting to discuss these options. Failure to do so may result in the department selecting an option for you.

1. Return to Work

Full duty: You may be able to return to work as a [JOB TITLE] performing full duty with no restrictions, if you provide a full medical release, in writing, from your treating physician. This medical release must be provided prior to your return to work.

Reasonable Accommodation: If you believe that you are disabled and that a reasonable accommodation would enable you to perform the essential functions of your current position/classification, you may request a reasonable accommodation. If you are qualified and would like to pursue an alternate placement to another classification, for which you meet the minimum qualifications, a list of current job vacancies will be provided to you. You may indicate which positions you are interested in and you will be given an opportunity to demonstrate your qualifications for those positions.

Medical Transfer/Demotion: If you are unable to perform the work of your current position, but are able to perform the work of another position in the Department, you may be able to medically transfer or medically demote to such a position. If at a later date you are no longer incapacitated for duty in your original position, under most circumstances, you would have a mandatory right to reinstatement to that classification or an equivalent classification. This option is available through the provisions of Government Code section 19253.5.

2. Temporary Leave

Family Medical Leave Act (FMLA)/California Family Rights Act (CFRA): If you qualify, you may request a leave of absence under either of these statutes. Both allow qualified employees to take up to 12 weeks of unpaid leave each year when they, or a qualified family member, have a serious health condition. You may be able to utilize existing leave credits. These statutes require that the employer maintain an employee's health, dental and vision coverage during such leave.

Pregnancy Disability Leave: If you are unable to perform in your current position due to a disability related to pregnancy, you may be entitled to unpaid leave. Accrued leave credits may be available to supplement this leave.

Medical Leave of Absence: You may request an unpaid medical leave of absence for up to one year. Under this option, the employer is not required to maintain an employee's heath, dental and vision coverage. You may choose to pay for these benefits yourself.

Leave Balances: You may be able to utilize existing leave balances, including a request for catastrophic leave.

Temporary Assignment: A temporary assignment or loan of employees within an agency or between agencies not to exceed two years may be available to facilitate your return to work. You would have a mandatory right to return to your former position should this option be exercised.

Non-Industrial Disability Insurance (NDI): If you have a non-industrial health condition, or a denied Workers' Compensation claim, which prevents you from working you may be entitled to NDI benefits. The NDI benefit is administered by the Employment Development Department (EDD). Your doctor must provide medical substantiation of your health condition in order for EDD to determine your eligibility for NDI benefits. While on NDI, health, dental, and vision benefits are covered.

Note: Employees in State Employees International Union (SEIU) bargaining units are not eligible for NDI, they are eligible for SDI instead.

State Disability Insurance (SDI): SDI pays part of an employee's wages if they have to stop working because of a non-work-related illness or injury. SDI also covers an employee if they take time off due to pregnancy or childbirth, or to bond with a minor child within one year of its birth, adoption, or foster care placement. SDI also covers time off to care for a seriously ill child, spouse, parent, or domestic partner.
You may be eligible to receive SDI benefits while waiting for an approval for your worker's compensation claim. If your claim is approved, any SDI benefits received may be required to be repaid.

SDI is an employee paid benefit and payments are administered by Employment Development Department (EDD). While on SDI, health, dental, and vision benefits are covered for up to 26 weeks.

Temporary Total Disability/Industrial Disability Leave/Labor Code 4800 Time: If you have an accepted workers' compensation claim, you may be entitled to Temporary Total Disability, Industrial Disability Leave, or Labor Code 4800/4800.5 benefits. Health care benefits are continued while receiving these benefits. To determine your eligibility, please contact your Return to Work Coordinator, the State Compensation Insurance Fund adjuster assigned to your claim, or your Workers' Compensation attorney.

3. *Separation from State Service*

Disability Retirement: If you are unable to return to work due to your health condition, you may apply for disability retirement with CalPERS. Disability retirement is considered a temporary separation from state service. Health benefits are available through CalPERS while you are on retirement status. If, after you are approved for disability retirement and, at a later date, it is determined that you are able to return to work as a [JOB TITLE], you will have mandatory rights to reinstatement to [JOB TITLE].

While you await the determination of your disability retirement application from CalPERS, you may use your existing leave credits, request FMLA/CFRA leave, or request a medical leave of absence. If you are eligible you may also apply for service retirement pending approval of your disability retirement.

Service Retirement: If you are eligible, you may apply for service retirement with CalPERS. A service retirement is a permanent separation from state service. Health benefits are available through CalPERS while you are on retirement. You would retain permissive reinstatement rights to state service.

Voluntary Resignation: You may choose to voluntarily resign from state service. You will retain permissive reinstatement rights. You may be able to purchase health, dental and vision benefits.

These options may not include all available legal options. If you have any other options that you would like to discuss, please let me know. If you do not respond to this letter or we are unable to reach a resolution, we may pursue one of the following options:

1. **Medical Transfer/Demotion:** If you are able to work in an alternate classification, we may medically transfer or demote you to a currently vacant position for which you meet the minimum qualifications.
   We will make an effort to place you in the highest paying vacant position for which you are qualified, which is not promotional and which meets your medical restrictions.

2. **Disability Retirement:** If you have not pursued disability retirement but are eligible to apply, we may file on your behalf. While the application is pending, you may utilize your existing leave credits until exhausted. If you exhaust all of your leave credits prior to CalPERS determination, you will be paid by the Department a temporary disability allowance (TDA) equal to the estimated amount of your disability retirement benefit. Should CalPERS grant the disability retirement application, you would then receive the disability retirement allotment directly from CalPERS. If the disability retirement application is denied, you have a right to return to work, with back pay, less any TDA received.

3. **Medical Termination:** If you are not entitled to disability retirement or you waive your right to file for disability retirement, we may medically terminate you pursuant to Government Code section 19253.5.

You must remain in contact with your supervisor in regard to any absence from work. Failure to report may result in the department invoking the Absence without Leave (AWOL) provisions of Government Code Section 19996.2. Absence without leave, whether voluntary or involuntary, for five consecutive working days is an automatic resignation from state service, as of the last date on which the employee worked.

We have attached an interest sheet for you to indicate which options you would like to discuss when we meet. Please fill it out and return it to me prior to our meeting so that I can be prepared to discuss those particular issues with you. You may indicate all options that you are interested in.

If we do not hear from you by [DATE], the department may pursue the options, as outlined above, without your input.

Sincerely,

Name
Title
Address
Phone number

Cc:

OPTION DISCUSSION INTEREST LIST

NAME:

The following is a list of possible options. Please indicate which ones you would like to discuss.

Return to work, with or without a reasonable accommodation

Medical transfer/demotion to another classification

Family Medical Leave/California Family Leave

Pregnancy Disability Leave

Medical Leave of Absence

Use existing leave balances

Temporary reassignment

Non-industrial Disability leave (NDI) or State Disability Insurance (SDI)

Temporary Disability/Industrial Disability Leave (IDL)/4800/4800.5 Time

Disability Retirement

Service Retirement

Voluntary resignation

The following dates are available for a meeting. Please indicate any that would be convenient for you.

(DATE) (DATE) (DATE) (DATE)

Please return in the enclosed stamped envelope as soon as possible.