
Substitute Handbook for Gridley Unified School District

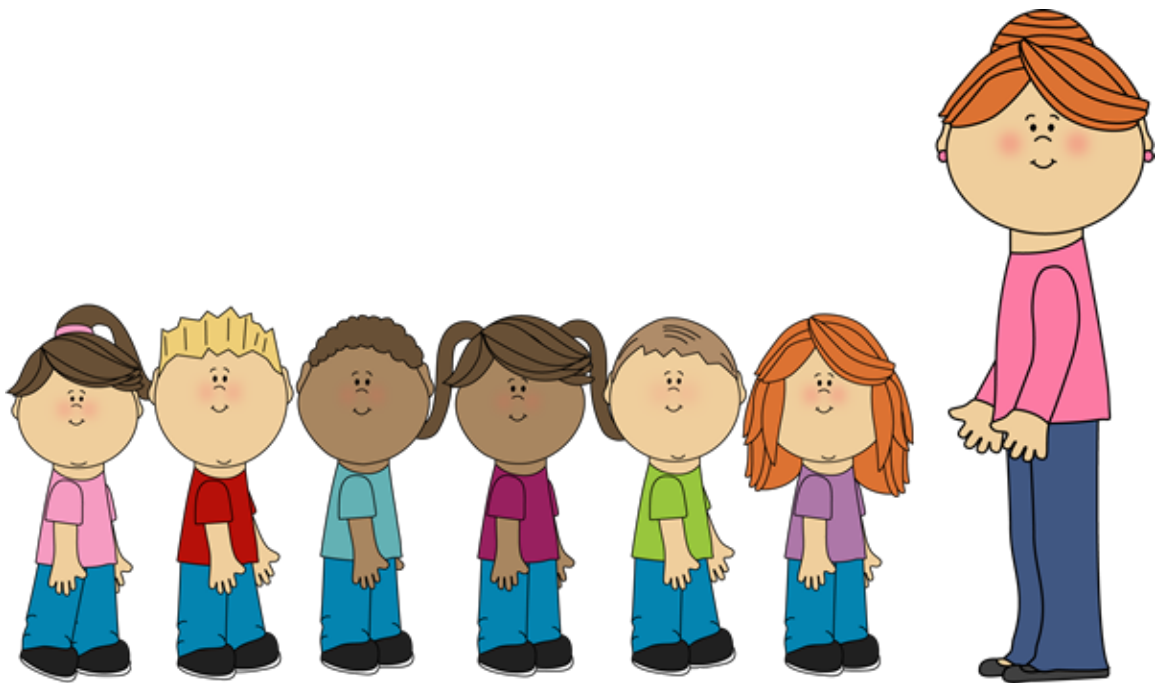


TABLE OF CONTENTS

INTRODUCTION	3
ACCEPTING ASSIGNMENTS AND REPORTING TO THE SITE	3
SALARY SCHEDULE	4
PAY PERIODS	4
SCHOOL SITES	4
LEGAL RESPONSIBILITIES OF SUBSTITUTES	5
TIPS FOR A SUCCESSFUL SUBSTITUTE TEACHING ASSIGNMENT	6
DISTRICT POLICIES AND OTHER INFORMATION	7
Worker's Compensation Notice	10
Sexual Harassment Notice	16
FMLA Leave Information	19
EDD Disability Information	20
Paid Family Leave Information	21
Hepatitis B and HIV Information	23
New Health Insurance Marketplace Coverage Options	27
Board Policies	28

INTRODUCTION

What is expected of substitutes?

- Report to your assignment on time. You will need to check in at the school site's front office by the start time of your assignment to get necessary information about your assignment.
- Substitutes should maintain high standards of professional appearance reflecting those of the education profession and serving as role models for students.
- Shorts and other garments resembling shorts are not generally acceptable attire except in the gym, on the playground or on athletic fields. Clothes with rips, tears and holes are not acceptable. Substitutes are expected to maintain an appropriate appearance that is businesslike, neat and clean, as determined by the requirements of the work area. Dress and appearance should not be offensive to the public or other employees. BP 4119.22
- District policies require that substitute teachers remain at a school site through the preparation period when it falls on the last period of the day. If the preparation period falls during the first period of the day, the substitute is to be at the school site during the prep period. You may also be asked to cover another absent teacher's class during the preparation period.
- Substitutes are on the same professional level as a contracted teacher/employee and are expected to observe the same ethical standards. You are expected to maintain the highest ethical standards and follow district policies and regulations in place to keep the educational system for our students functioning at its peak and maintain the district's integrity. Public education is a cooperative venture involving the services of many people. GUSD functions best when there is a spirit of cooperation among all employees – when the employees have confidence in and respect for the rights and responsibilities of others. If you are concerned about a practice at the school, talk to the site administrator. If a substitute engages in an unethical or inappropriate practice, the substitute may be removed from the substitute roster.

ACCEPTING ASSIGNMENTS AND REPORTING TO THE SITE

Substitutes may accept assignments through any of the following:

1. Assignments accepted through Frontline online website
2. Assignments accepted through direct contact at the site in person or via telephone
3. Assignments accepted through Frontline Automated Call System

Please note that your subbing assignment MUST be logged in Frontline. If you do not see your assignment in Frontline, please contact the site you subbed at.

- For **substitute teachers**, entries not logged in Frontline will not be paid, as its assignment log is used for payroll.
- For **classified substitutes (non-teaching substitutes)**, your assignment must be in Frontline and you will need to clock in and out from your assignment on the kiosk set up at each of the school site offices. Please note that if you do not have an assignment in Frontline, you will not be able to clock in and out on the Time and Attendance kiosk. Clocking in and out will generate a timesheet. If there is an error, you may submit a correction within three (3) days of the assignment by logging into Frontline and going to the Time and Attendance platform under "Timesheets".

If teaching on an emergency substitute teaching credential, the substitute cannot serve for more than 30 days (20 days for special education) for any one teacher during the school year.

At the end of each school year, please keep an eye out for a "Reasonable Assurance" notice and return it to the District Office by the specified date to remain active on the substitute list for the following school year. If this form is not received by the specified date, your substitute account will be inactivated for the following school year.

Hours of Work

Schedules for daily operation and work hours at the various sites will be established by supervisors and approved by the Superintendent. Substitute work hours will be determined by the accepted assignment in Frontline. A full work day is scheduled for seven (7) hours not including the lunch break.

SALARY SCHEDULE

Gridley Unified School District pays all its substitutes an hourly rate as indicated below:

Certificated Substitute Teacher

Short Term (Assignments in the same classroom/teacher less than 21 consecutive days)

1-20 consecutive days in same class is \$28.58 per hour

1-20 consecutive days in same class for Gridley retired teachers \$28.58 per hour

Long Term (Assignments for 21+ consecutive days in the same classroom/teacher)

21+ consecutive days in same class is \$32.14 per hour

Classified Substitutes

[Classified Substitutes are paid on Step 1](#) of the classification range worked in.

Gridley retired classified may be placed up to step 5 in the classification range worked in.

Intern Psychologist

\$75.00 per day up to number of days approved for Internship Program hours

PAY PERIODS

The pay period for substitutes is from the 26th of the month through the 25th of the following month.

Paychecks are issued on the 10th of each month and will be mailed to you if you receive a live check. If you have signed up for direct deposit, your paystub will be emailed to you to the email address you have on file. You will need to enter the last four digits of your social security number to access the paystubs emailed to you.

SICK LEAVE ACCRUAL FOR SUBSTITUTES

In accordance with California's Healthy Workplaces, Healthy Families Act (California Labor Code sections 245–249), eligible substitute employees earn paid sick leave while employed by the District.

Eligibility

Substitute employees, including substitute teachers and other short-term or temporary substitute staff, are eligible to accrue paid sick leave if they work in California for the District for at least thirty (30) days within a one-year period.

Employees may begin using accrued sick leave on or after the 90th day of employment.

Accrual of Leave

Eligible substitute employees accrue paid sick leave at the rate of one (1) hour of paid sick leave for every thirty (30) hours worked.

Accrued sick leave balances are maintained through the District payroll system and are reflected on employee pay statements.

Use of Paid Sick Leave

Paid sick leave may be used for:

- Diagnosis, care, or treatment of an existing health condition;
- Preventive care for the employee or a family member;
- Medical appointments;
- Reasons related to domestic violence, sexual assault, or stalking, as permitted by law.

Family members include those identified under California law, including children, parents, spouses, registered domestic partners, grandparents, grandchildren, siblings, and designated persons where applicable.

Procedures for Use

Substitute employees requesting use of paid sick leave must:

- Accept an assignment prior to requesting sick leave for that assignment day;
- Report the absence through the District's substitute management (canceling assignment under illness) and notify the site;
- Notify the the Human Resources Office; and
- Complete and submit the [Substitute- Paid Sick Leave Request](#) to the Human Resources Office in the payroll period in which the sick leave hours are used.

Paid sick leave must be used in increments consistent with District payroll practices and applicable law up to the amount of hours accepted in the assignment.

Annual Usage and Carryover

The District provides paid sick leave in accordance with California law. Employees may use available accrued leave up to the annual limit established by law or District policy, currently up to 40 hours each school year.

Unused accrued sick leave may carry over from year to year subject to applicable statutory caps and District procedures. Accrued sick leave balances are capped at 80 hours.

Separation from Employment

Unused paid sick leave is not paid out or transferred out upon separation from employment. However, previously accrued and unused sick leave may be reinstated if an employee is rehired within the timeframe required by law, typically one (1) year.

Additional Information

Questions regarding paid sick leave eligibility, accrual balances, or procedures should be directed to the Human Resources or Payroll Department.

SCHOOL SITES

Assignments will be in Frontline and include the site your assignment is at. Reporting to an assignment will always include checking in at the front office. There are five (5) schools in the district and a total of six (6) locations you may report to, as follows:

McKinley Primary School (Grades TK-1)
1045 Sycamore Street
Gridley, CA 95948

Wilson Elementary School (Grades 2-5)
409 Magnolia Street
Gridley, CA 95948

Sycamore Middle School (Grades 6-8)
1125 Sycamore Street
Gridley, CA 95948

Gridley High School (Grades 9-12)
300 E. Spruce Street
Gridley, CA 95948

Esperanza High School (Grades 11-12)
581B Jackson Street
Gridley, CA 95948

Transportation & Maintenance Office
906 Fairview Drive
Gridley, CA 95948

LEGAL RESPONSIBILITIES OF SUBSTITUTES

Theory of Common Law: Courts have held that schools have a special relationship with students and have a legal duty to protect students from foreseeable harm. The basic theory underlying the theory of common law is negligence. For schools to be held liable for injuries to students, all four of the following elements must be present:

1. A duty of reasonable care
2. A breach of duty
3. Actual damage to the plaintiff
4. Breach must be the proximate cause of the damage

Loco Parentis: While under the supervision of school personnel, staff members serve in loco parentis (in place of the parents).

Theory of Reasonableness: Courts will attempt to determine if school personnel acted as a reasonable and prudent adult would normally act under the same given circumstance if a student is injured.

Degree of Foreseeable Harm: Courts will seek to determine if an injury to a student could have been anticipated and prevented. The degree of foreseeable harm often determines the extent in which teachers, administrators and school districts are held liable for injuries to students.

Student Supervision Requirements: In California, except during lunch periods, certificated staff must maintain visual contact and assume the primary responsibility for the supervision of students.

Respondeat Superior: When acting within the scope of employment, school districts are held legally responsible for the acts and omissions of their employees. If an employee acts outside the scope of employment, the individual, and not the school district, will be held liable for acts and omissions resulting in injury to students and others.

Leaving Students Unattended & Locking Classrooms: Teachers should not leave students in classrooms unattended without certified supervision. Teachers are responsible for all students under their charge and are legally responsible for the welfare of these students.

Reporting Dangerous Situations: If any employee at a school observes the existence of a dangerous situation, it is imperative that it be reported to school officials as soon as possible so preventive and/or corrective actions can be taken. Dangerous situations can include unsafe equipment, physical obstacles, unknown objects, potential and actual student confrontations, substance abuse, gang activities, etc.

Missing Students: Missing students should be reported to the school office immediately.

Injuries To Students: If any doubt exists in the mind of a teacher about moving an injured student, don't move the student. The school office should be notified immediately for medical assistance. An observing student may need to be sent to the office for assistance while the teacher attends the injured student.

Release Of Students: Students should not be released directly to anyone other than school personnel without written permission from office staff. If anyone requests that a student be released to their care, and the teacher is uncertain about that person's legal authorization to assume custody of the student, the teacher should send the individual to the school office for written authorization before the student is released.

Confidentiality: Any request for information regarding students or families from outside school sources should be referred to the school principal. Substitute teachers need to be diligent in protecting the privacy rights of students and families.

Due Process: Courts have held that education is a property right. Student property rights may not be abridged without observing students' legal due process rights. The guarantee of a fair and impartial hearing must be afforded all students.

Child Abuse Reporting: All school substitutes are Mandated Reporters; you are a Mandated Reporter and you must report known or suspected child abuse to a child protective agency and local law enforcement by telephone immediately or as soon as practically possible and in writing within 36 hours. GUSD requires employees to report to their supervisor, who in turn ensures that the Board policy and procedures are followed. A copy of the Board's Administrative Regulation is available at the District Office and at each of the sites. Participation in the Mandated Reporter Training is required within six weeks of hire date or within the first six weeks of the start of the school year. Additional information regarding the training will be provided. BP 5141.4. Even suspected child abuse must be reported to the proper legal authorities. Substitute teachers who suspect child abuse should seek the guidance of school administrators.

Students on Medication: Students are prohibited from taking medication without being under the immediate supervision of appropriately designated and trained staff. Students who bring medications to class should be referred to the school office immediately.

Letting Students Out Early: Letting students out early is disruptive to other classrooms, and it often results in students being unsupervised. If unsupervised students are injured, the school district and the assigned teacher/s are legally responsible. The early release of students should not be permitted without prior authorization of school administrators and without appropriate student supervision.

Weapons and Drugs: California has a zero tolerance law regarding weapons and drugs in schools. Any student suspected of being in possession of weapons or drugs or under the influence of drugs, is in violation of the law, and school administrators should be notified immediately.

Student Searches: While teachers serve in loco parentis for students under their charge, students may not be searched without reasonable suspicion. Teachers are not to conduct different gender student body searches. Same-sex student body searches should only be done by an administrator when reasonable suspicion exists, and when at least one staff member is present to serve as a witness. Law strictly prohibits strip searches.

Sexual Harassment: Sexual harassment (use of sexually explicit language, requests for sexual favors, sexually graphic materials/language, or the creation of a sexually hostile work or learning environment) between and among students, between staff and students, or between staff members is legally prohibited and should be reported immediately to the appropriate school administrator.

Personal Use of School Property: The personal use of school property constitutes a gift of public funds and is prohibited by law.

School Visitors: Most schools require school visitors to report to the school office prior to actually visiting classrooms or the playground. If you observe individuals at the school who you believe are unauthorized, report them to the school office immediately. Most schools will provide visitors with nametags or written authorization.

Playground Supervision: If a student is seriously injured on the playground, courts will attempt to determine if there was a proper number of assigned staff members on duty, if playground supervisors were properly located and diligent, if proper safety rules existed, if those rules were consistently and properly enforced, and if any foreseeable and preventable danger existed. If human error did occur, the courts will seek to determine if that failure was the proximate reason the student sustained the injury.

Use of Physical Force: Rarely, and only under emergency situations, is it legally or professionally permissible for teachers to use physical force with students. Physical force may only be used to prevent injury to students, others, or self. The use of physical force must be limited to the amount of force absolutely necessary to prevent injury. Teachers should avoid placing themselves in danger of injury when supervising students.

Corporal Punishment in California: California Education Code prohibits the use of physical punishment.

Student Detention during Recess or the Noon Break: Check the school policy before you withhold a student's recess or nutrition break, and before you require him/her to stay after school.

TIPS FOR A SUCCESSFUL SUBSTITUTE TEACHING ASSIGNMENT

REMEMBER: It is important for substitute teachers to establish their classroom expectations and consequences at the beginning of the day. It is essential for teachers to be perceived by students as confident, as being in charge, and as being fair.

Respecting Students: Remember that each individual student is a person who deserves to be treated with respect regardless of their intellectual abilities, primary language, social training, cultural background, or personal circumstance. Students respect adults who respect them.

Staying In Control: It is extremely important for teachers to control their emotions. Teachers should model appropriate behavior even under highly stressful situations. When teachers lose self-control, it becomes more difficult to make proper decisions and to retain the respect of students. When teachers lose self-control, their behavior often becomes the focus of attention rather than the student's behavior.

Eye Contact: Direct eye contact and non-verbal communication are effective classroom management tools, provided that the non-verbal communication doesn't become threatening or intimidating to students.

Raising Your Voice: Using different voice inflections in the classroom is appropriate only if it has a legitimate educational purpose, doesn't result in yelling (which is ineffective and abusive), and doesn't demean students.

Establishing Standards of Conduct: The key to having a successful educational day is letting the entire class know your expectations. "Establishing standards" should be done as early in the day as possible. Teachers need to be firm, fair, and consistent. Setting reasonable standards and consequences and consistently enforcing these standards is essential in maintaining a safe, orderly learning environment.

Proximity & Classroom Management: There is a direct correlation of distance of the teacher from the student and student behavior. The closer a teacher is to a student, normally, the better the student's behavior. Teachers who walk around the classroom and monitor student conduct usually maintain much better classroom control.

Unoccupied Student Time: Unoccupied and non-directed student time often results in classroom management difficulties. Teachers should provide learning activities for students to begin working on immediately upon entering the classroom and upon concluding their regular classroom assignments.

Extinction: Minor unacceptable student behaviors are often best dealt with by using a technique known as extinction (ignoring minor negative behavior so it is not reinforced by providing desired attention). This technique usually results in minor unacceptable student behavior disappearing. If the undesired behavior persists, the teacher will need to use more direct disciplinary intervention strategies.

Typical Classroom Rules: Typical elementary and middle school classroom rules include the following: (a) Keep your feet, hands and objects to yourself; (b) You may talk when you have raised your hand and been given permission to do so by the teacher; (c) Students are to remain in their seats unless given permission to be out of their seats; (d) No "put-downs;" and (e) No student will stop another student from learning. Severe violations resulting in instant referrals to the principal's office include fighting, possession of drugs or weapons, physical threats, constant disruption and defiance, etc. Typically, high school student rules will vary from elementary and middle school rules only slightly. High school students need classroom rules to be stated in such a way that they consider the increased level of maturity of the students.

DISTRICT POLICIES AND OTHER INFORMATION

Complaint Handling Procedure

Under normal conditions, if you have a job-related problem, question or complaint, you should discuss it with your supervisor.

If the discussion with your supervisor does not answer your question or resolve the matter to your satisfaction, you may then present your complaint, orally or in writing, to the next higher level of management. If the matter is still not resolved satisfactorily, you may present your complaint in writing to the Superintendent. Within five (5) working days of receiving the complaint, the Superintendent or designee shall conduct any necessary investigation and meet with the complainant in an effort to resolve the complaint.

When the issue personally involves the supervisor or manager with whom you would ordinarily discuss a problem, you may bypass that individual and proceed to the next person in authority without fear of reprisal. Difficulties in using this complaint procedure should be brought to the attention of the Personnel Manager.

Employee Safety

GUSD strives to provide safe working conditions for our employees. We observe the safety laws of the governments within whose jurisdictions we operate. No one will knowingly be required to work in any unsafe manner. Safety is every employee's responsibility, and all employees are expected to do everything reasonable and necessary to keep GUSD a safe place to work. Any unsafe conditions should be reported to your supervisor immediately.

Universal Precautions

Universal precautions shall be observed throughout the District to protect employees from contact with potentially infectious blood or other body fluids. Universal precautions are appropriate for preventing the spread of all infectious diseases and shall be used regardless of whether blood borne pathogens are known to be present.

Universal precaution is an approach to infection control. According to the concept of universal precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV and other blood borne pathogens.

PLEASE REFER TO BOARD POLICY "UNIVERSAL PRECAUTIONS" BP 4119.43, 4219.43, 4319.43 FOR DETAILED INFORMATION.

All exposure incidents must be reported as soon as possible to your supervisor and the Superintendent or Personnel Manager. Following a report of an exposure incident, the District shall provide the exposed employee with a confidential medical evaluation and follow-up, as required by law. GUSD shall maintain the confidentiality of the affected employee and the exposure source during all phases of the post-exposure evaluation.

General Guidelines for Universal Precautions

1. Wear disposable waterproof gloves whenever you expect to come into direct hand contact with blood, other body fluids, or contaminated items or surfaces. This applies to incidents including, but not limited to, caring for nosebleeds or cuts, leaning up spills, or handling clothes soiled by blood or body fluids. DO NOT REUSE GLOVES. After each use, remove the gloves without touching the outside of them and dispose of them in a lined waste container.
2. Wash your hands and any other contacted skin surfaces thoroughly for 15 to 30 seconds with soap and warm running water, rinse under running water, and thoroughly dry with disposable paper towels:
 - a. Immediately after any contact with blood, body fluids, drainage from wounds, or with soiled garments, objects or surfaces.
 - b. Immediately after removing gloves, gowns or smocks.
 - c. Before eating, drinking, or feeding.
 - d. Before handling food, cleaning utensils or kitchen equipment.
 - e. Before and after using the toilet or diapering.

When running water is not available, use antiseptic hand cleanser and lean towels and use soap and running water as soon as possible.

3. Clean surfaces and equipment contaminated with blood with soap and water and disinfect them promptly with a fresh solution of bleach (ten parts water to one part bleach) or other disinfectant. While cleaning, wear disposable gloves and use disposable towels whenever possible. Rinse mops or other non-disposable items in the disinfectant.
4. Properly dispose of contaminated materials and label them as bio-hazardous.

- a. Place blood, body fluids, gloves, bloody dressings and other absorbent materials into appropriately labeled plastic bags or lined waste containers.
 - b. Place needles, syringes and other sharp disposable objects in leak-proof, puncture-proof containers.
 - c. Bag soiled towels and other laundry. Presoak with disinfectant and launder with soap and water.
 - d. Dispose of urine, vomit or feces in the sanitary sewer system. Rinse, flush and sanitize sink and countertops after any such disposal.
5. Do not care for others' injuries if you have any bleeding or oozing wounds or skin conditions.
6. Use a mouthpiece, resuscitation bag or other ventilation device when readily available in place of mouth-to-mouth resuscitation.
7. Immediately report any exposure incident or first-aid incident to your supervisor.

Conflict of Interest

Business dealings that represent, or appear to represent, a conflict between the interests of GUSD and an employee are unacceptable. GUSD recognizes the right of employees to engage in activities outside of their employment which are of a private nature and unrelated to our business. However, outside work that conflicts with the business of the District or done in conjunction with District work is a conflict of interest.

Harassment

The Board of Trustees prohibits sexual harassment, as defined in BP/AR 4119.11, 4219.11, 4319.11, in the working environment of District employees or applicants by any person in any form. Employees who permit or engage in such harassment may be subject to disciplinary action up to and including dismissal.

Alcohol and Drugs

Gridley Unified School District believes that the maintenance of drug and alcohol free workplaces is essential to school and district operations. The Board of Trustees has deemed the District as a Drug and Alcohol Free Workplace (BP 4020).

Tobacco-Free Schools

Gridley Unified School District believes that the maintenance of tobacco- free workplaces is essential to school and district operations. The Board of Trustees has deemed the District as a Tobacco Free Workplace (BP 2161).

Confidentiality

The District Superintendent, administration and staff shall maintain the confidentiality of all confidential records until such time as laws, state regulations, and/or bylaws of this District permit disclosure. Information and records pertaining to closed sessions, negotiations and student records are not subject to public disclosure under Government Code 6252-6260.

Any employee who willfully releases confidential/privileged information about students, staff, or any topic properly confined to a closed session shall be subject to disciplinary action up to and including dismissal.

Telephone Use

GUSD telephones are to be used for business purposes in serving the interest of our customers and in the course of normal operations. Answer all calls promptly and courteously. On occasion, personal calls may be necessary, but we ask your cooperation in limiting them to emergencies or essential personal business and in keeping them brief. Personal long-distance calls from District phones are to be charged to the employee's charge card or home phone numbers. Any costs for long distance calls are to be reimbursed by the employee.

Mobile Devices

GUSD mobile devices may be necessary for certain employees to conduct District-related business. In the event a District-owned device is used for personal use, to be able to exclude all use by an employee from taxable income, employees will reimburse the District for any personal calls made, and a pro rate of the monthly charge.

Internet/Computer Technology Use

The computer network is provided for staff to conduct research and communicate with others. Employees are authorized to use District on-line services in accordance with user obligations and responsibilities specified in BP 4040(a) (b) and AR 4040.

Worker's Compensation Notice

STATE OF CALIFORNIA - DEPARTMENT OF INDUSTRIAL RELATIONS Division of Workers' Compensation



Notice to Employees—Injuries Caused By Work

You may be entitled to workers' compensation benefits if you are injured or become ill because of your job. Workers' compensation covers most work-related physical or mental injuries and illnesses. An injury or illness can be caused by one event (such as hurting your back in a fall) or by repeated exposures (such as hurting your wrist from doing the same motion over and over).

Benefits. Workers' compensation benefits include:

- **Medical Care:** Doctor visits, hospital services, physical therapy, lab tests, x-rays, medicines, medical equipment and travel costs that are reasonably necessary to treat your injury. You should never see a bill. There are limits on chiropractic, physical therapy and occupational therapy visits.
- **Temporary Disability (TD) Benefits:** Payments if you lose wages while recovering. For most injuries, TD benefits may not be paid for more than 104 weeks within five years from the date of injury.
- **Permanent Disability (PD) Benefits:** Payments if you do not recover completely and your injury causes a permanent loss of physical or mental function that a doctor can measure.
- **Supplemental Job Displacement Benefit:** A nontransferable voucher, if you are injured on or after 1/1/2004, your injury causes permanent disability, and your employer does not offer you regular, modified, or alternative work.
- **Death Benefits:** Paid to your dependents if you die from a work-related injury or illness.

Naming Your Own Physician Before Injury or Illness (Predesignation). You may be able to choose the doctor who will treat you for a job injury or illness. If eligible, you must tell your employer, in writing, the name and address of your personal physician or medical group *before* you are injured. You must obtain their agreement to treat you for your work injury. For instructions, see the written information about workers' compensation that your employer is required to give to new employees.

If You Get Hurt:

1. **Get Medical Care.** If you need emergency care, call 911 for help immediately from the hospital, ambulance, fire department or police department. If you need first aid, contact your employer.
2. **Report Your Injury.** Report the injury immediately to your supervisor or to an employer representative. Don't delay. There are time limits. If you wait too long, you may lose your right to benefits. Your employer is required to provide you with a claim form within one working day after learning about your injury. Within one working day after you file a claim form, your employer or claims administrator must authorize the provision of all treatment, up to ten thousand dollars, consistent with the applicable treatment guidelines, for your alleged injury until the claim is accepted or rejected.
3. **See Your Primary Treating Physician (PTP).** This is the doctor with overall responsibility for treating your injury or illness.
 - If you predesignated your personal physician or a medical group, you may see your personal physician or the medical group after you are injured.
 - If your employer is using a medical provider network (MPN) or a health care organization (HCO), in most cases you will be treated within the MPN or HCO unless you predesignated a personal physician or medical group. An MPN is a group of physicians and health care providers who provide treatment to workers injured on the job. You should receive information from your employer if you are covered by an HCO or a MPN. Contact your employer for more information.
 - If your employer is not using an MPN or HCO, in most cases the claims administrator can choose the doctor who first treats you when you are injured, unless you predesignated a personal physician or medical group.
4. You may consult a licensed attorney to advise you of your rights under workers' compensation laws. In most instances, attorney's fees will be paid from your recovery.
5. **Medical Provider Networks.** Your employer may be using an MPN, which is a group of health care providers designated to provide treatment to workers injured on the job. If you have predesignated a personal physician or medical group prior to your work injury, then you may go there to receive treatment from your predesignated doctor. If you are treating with a non-MPN doctor for an existing injury, you may be required to change to a doctor within the MPN. For more information, see the MPN contact information below:

MPN website: www.nbsiampn.org

MPN Effective Date: 10/20/2016

MPN Identification number: 2505

If you need help locating an MPN physician, call your MPN access assistant at: 877-854-3353

If you have questions about the MPN or want to file a complaint against the MPN, call the MPN Contact Person at: 877-854-3353

Discrimination. It is illegal for your employer to punish or fire you for having a work injury or illness, for filing a claim, or testifying in another person's workers' compensation case. If proven, you may receive lost wages, job reinstatement, increased benefits, and costs and expenses up to limits set by the state.

Questions? Learn more about workers' compensation by reading the information that your employer is required to give you at time of hire. If you have questions, see your employer or the claims administrator (who handles workers' compensation claims for your employer):

Claims Administrator North Bay Schools Insurance Authority Phone 707-428-0824
Workers' compensation insurer Self-Insured (Enter "self-insured" if appropriate)

You can also get free information from a State Division of Workers' Compensation Information (DWC) & Assistance Officer. The nearest Information & Assistance Officer can be found at location: 250 Hemsted Drive, 2nd Fl, St B, Redding, CA 96002-9040 or by calling toll-free **(800) 736-7401**. Learn more information about workers' compensation online: www.dwc.ca.gov and access a useful booklet "Workers' Compensation in California: A Guidebook for Injured Workers."

False claims and false denials. Any person who makes or causes to be made any knowingly false or fraudulent material statement or material representation for the purpose of obtaining or denying workers' compensation benefits or payments is guilty of a felony and may be fined and imprisoned.

Your employer may not be liable for the payment of workers' compensation benefits for any injury that arises from your voluntary participation in any off-duty, recreational, social, or athletic activity that is not part of your work-related duties.

Important Information about Medical Care if You Have a Work-Related Injury or Illness

Complete Written Employee Notification Re: Medical Provider Network
(Title 8, California Code of Regulations, section 9767.12)

California law requires your employer to provide and pay for medical treatment if you are injured at work. Your employer has chosen to provide this medical care by using a Workers' Compensation physician network called a Medical Provider Network (MPN). This MPN is administered by North Bay Schools Insurance Authority. This notification tells you what you need to know about the MPN program and describes your rights in choosing medical care for work-related injuries and illnesses.

- **What happens if I get injured at work?**

In case of an emergency, you should call 911 or go to the closest emergency room.

If you are injured at work, notify your employer as soon as possible. Your employer will provide you with a claim form. When you notify your employer that you have had a work-related injury, your employer will make an initial appointment with a doctor in the MPN.

- **What is an MPN?**

A Medical Provider Network (MPN) is a group of health care providers (physicians and other medical providers) used by your employer to treat workers injured on the job. MPNs must allow employees to have a choice of provider(s). Each MPN must include a mix of doctors specializing in work-related injuries and doctors with expertise in general areas of medicine.

- **What MPN is used by my employer?**

Your employer is using the NBSIA MPN with the identification number 2505. You must refer to the MPN name and the MPN identification number whenever you have questions or requests about the MPN.

- **Who can I contact if I have questions about my MPN?**

The MPN Contact listed in this notification will be able to answer your questions about the use of the MPN and will address any complaints regarding the MPN.

MPN Contact Toll Free # (877) 854-3353

General information regarding the MPN can also be found at the following website: www.nbsiampn.org.

- **What if I need help finding and making an appointment with a doctor?**

The MPN Medical Access Assistant will help you find available MPN physicians of your choice and can assist you with scheduling and confirming physician appointments. The Medical Access Assistant is available to assist you Monday through Saturday from 7am-8pm (Pacific), excluding Sundays and holidays, and schedule medical appointments during doctor's normal business hours. Assistance is available in English and in Spanish.

Medical Access Assistant (MAA)

Toll Free Number: (877) 854-3353

Email: mpninfo@netbyd.com

Fax: (209) 879-9387

- **How do I find out which doctors are in my MPN?**

You can get a regional list of all MPN providers in your area by calling the MPN Contact or by going to our website at: www.nbsiampn.org. At minimum, the regional list must include a list of all MPN providers within 15 miles of your workplace and/or residence or a list of all MPN providers within the county where you live and/or work. You may choose which list you wish to receive. You also have the right to obtain a list of all the MPN providers upon request.

You can access the roster of all treating physicians and the roster of all participating providers in the MPN by going to the website at: www.nbsiampn.org.

- **How do I choose a provider?**

Your employer will arrange the initial medical evaluation with a MPN physician. After the first medical visit, you may continue to be treated by that doctor, or you may choose another doctor from the MPN. You may continue to choose doctors within the MPN for all of your medical care for this injury.

If appropriate, you may choose a specialist or ask your treating doctor for a referral to a specialist. Some specialists will only accept appointments with a referral from the treating doctor. Such specialists might be listed as "by referral only" in your MPN directory.

If you need help in finding a doctor or scheduling a medical appointment, you may call the Medical Access Assistant.

- **Can I change providers?**

Yes. You can change providers within the MPN for any reason, but the providers you choose should be appropriate to treat your injury. Contact the MPN Contact or your claims adjuster if you want to change your treating physician.

- **What standards does the MPN have to meet?**

The MPN has providers for the following counties in California: Napa, Yolo, and Solano, and 30 miles surrounding those zip codes.

The MPN must give you access to a regional list of providers that includes at least three physicians in each specialty commonly used to treat work injuries/illnesses in your industry. The MPN must provide access to three primary treating physicians and a hospital or an emergency healthcare facility within 30 minutes or 15 miles and specialists within 60 minutes or 30 miles of where you work or live.

If you live in a rural area or an area where there is a health care shortage (i.e. health facilities are at least 30 miles apart), the alternative access standard will allow you to obtain services from a non-contracted provider outside the MPN within a reasonable geographic area because all services shall be available and accessible at reasonable times to all covered employees within 30 miles of their residence or workplace.

After you have notified your employer of your injury, the MPN must provide initial treatment within 3 business days. If treatment with a specialist has been authorized, the initial appointment with the specialist must be provided to you within 20 business days of your request. If the appointment with the specialist cannot be scheduled within ten days of your request, you may be allowed to obtain treatment with an appropriate specialist outside of the MPN.

If you have trouble getting an appointment with a provider in the MPN, contact the Medical Access Assistant.

- **What if there are no MPN providers where I am located?**

If you are a current employee living in a rural area or temporarily working or living outside the MPN service area, or you are a former employee permanently living outside the MPN service area, the MPN or your treating doctor will give you a list of at least three physicians who can treat you. The MPN may also allow you to choose your own doctor outside of the MPN network. Contact your MPN Contact for assistance in finding a physician or for additional information.

- **What if I need a specialist that is not available in the MPN?**

If you need to see a type of specialist that is not available in the MPN, you have the right to see a specialist outside of the MPN.

- **What if I disagree with my doctor about medical treatment?**

If you disagree with your doctor or wish to change your doctor for any reason, you may choose another doctor within the MPN.

If you disagree with either the diagnosis or treatment prescribed by your doctor, you may ask for a second opinion from another doctor within the MPN. If you want a second opinion, you must contact the MPN Contact or your claims adjuster and tell them you want a second opinion. The MPN should give you at least a regional or full MPN provider list from which you can choose a second opinion doctor. To get a second opinion, you must choose a doctor from the MPN list and make an appointment within 60 days. You must tell the MPN Contact of your appointment date, and the MPN will send the doctor a copy of your medical records. You may also request a copy of your medical records that will be sent to the doctor.

If you do not make an appointment within 60 days of receiving the regional provider list, you will not be allowed to have a second or third opinion with regard to this disputed diagnosis or treatment of the treating physician.

If the second-opinion doctor feels that your injury is outside of the type of injury he or she normally treats, the doctor's office will notify your employer or its claims administrator and you. You will get another list of MPN doctors or specialists so you can make another selection.

If you disagree with the second opinion, you may ask for a third opinion. If you request a third opinion, you will go through the same process you went through for the second opinion.

Remember that if you do not make an appointment within 60 days of obtaining another MPN provider list, then you will not be allowed to have a third opinion with regard to this disputed diagnosis or treatment of this treating physician.

If you disagree with the third-opinion doctor, you may ask for an MPN Independent Medical Review (MPN IMR). The MPN Contact will give you information on requesting an MPN Independent Medical Review and will complete the "MPN Contact section" of an MPN IMR application form for you at the time you select a third-opinion physician.

If either the second or third-opinion doctor or MPN Independent Medical Reviewer agrees with your need for a treatment or test, you may be allowed to receive that medical service from a provider within the MPN, or if the MPN does not contain a physician who can provide the recommended treatment, you may choose a physician outside the MPN within a reasonable geographic area.

- **What if I am already being treated for a work-related injury before the MPN begins?**

Your employer has a "*Transfer of Care*" policy which will determine if you can continue being temporarily treated for an existing work-related injury by a physician outside of the MPN before your care is transferred into the MPN.

If your current doctor is not or does not become a member of the MPN, then you may be required to see a MPN physician. However, if you have properly predesignated a primary treating physician, you cannot be transferred into the MPN. (If you have questions about predesignation, ask your supervisor.)

If your employer decides to transfer you into the MPN, you and your primary treating physician must receive a letter notifying you of the transfer.

If you meet certain conditions, you may qualify to continue treating with a non-MPN physician for up to a year before you are transferred into the MPN. The qualifying conditions to postpone the transfer of your care into the MPN are set forth in the box below.

Can I Continue Being Treated By My Doctor?

You may qualify for continuing treatment with your non-MPN provider (through transfer of care or continuity of care) for up to a year if your injury or illness meets any of the following conditions:

- **(Acute)** The treatment for your injury or illness will be completed in less than 90 days;
- **(Serious or Chronic)** Your injury or illness is one that is serious and continues for at least 90 days without full cure or worsens and requires ongoing treatment. You may be allowed to be treated by your current treating doctor for up to one year, until a safe transfer of care can be made;
- **(Terminal)** You have an incurable illness or irreversible condition that is likely to cause death within one year or less;
- **(Pending Surgery)** You already have a surgery or other procedure that has been authorized by your employer or its claims administrator that will occur within 180 days of the MPN effective date, or the termination of contract date between the MPN and your doctor.

You can disagree with your employer's decision to transfer your care into the MPN. If you don't want to be transferred into the MPN, ask your primary treating physician for a medical report on whether you have one of the four conditions stated above to qualify for a postponement of your transfer into the MPN.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her report on your condition. If your primary treating physician does not give you the report within 20 days of your request, the employer can transfer your care into the MPN and you will be required to use an MPN physician.

You will need to give a copy of the report to your employer if you wish to postpone the transfer of your care. If you or your employer disagrees with your doctor's report on your condition, you or your employer can dispute it. See the complete Transfer of Care policy for more details on the dispute resolution process.

For a copy of the Transfer of Care policy, in English or Spanish, ask your MPN Contact.

- **What if I am being treated by a MPN doctor who decides to leave the MPN?**

Your employer or its claims administrator has a written "*Continuity of Care*" policy that will determine whether you can temporarily continue treatment for an existing work injury with your doctor if your doctor is no longer participating in the MPN.

If your employer or its claims administrator decides that you do not qualify to continue your care with the non-MPN provider, you and your primary treating physician must receive a letter notifying you of this decision.

If you meet certain conditions, you may qualify to continue treating with this doctor for up to a year before you must choose a MPN physician. These conditions are set forth in the ***"Can I Continue Being Treated By My Doctor?"*** box above.

You can disagree with your employer or its claims administrator's decision to deny you Continuity of Care with the terminated MPN provider. If you want to continue treating with the terminated doctor, ask your primary treating physician for a medical report on whether you have one of the four conditions stated in the box above to see if you qualify to continue treating with your current doctor temporarily.

Your primary treating physician has 20 days from the date of your request to give you a copy of his/her medical report on your condition. If your primary treating physician does not give you the report within 20 days of your request, your employer or its claims administrator's decision to deny you Continuity of Care with your doctor who is no longer participating in the MPN will apply, and you will be required to choose a MPN physician.

You will need to give a copy of the report to your employer if you wish to postpone the selection of another MPN doctor for your continued treatment. If you or your employer disagrees with your doctor's report on your condition, you or your employer can dispute it. See the complete Continuity of Care policy for more details on the dispute resolution process.

For a copy of the Continuity of Care policy, in English or Spanish, ask your MPN Contact.

- **What if I have questions or need help?**

- **MPN Contact:** You may always contact the MPN Contact if you have questions about the use of the MPN and to address any complaints regarding the MPN.
- **Medical Access Assistants:** You may contact the Medical Access Assistant if you need help finding MPN physicians and scheduling and confirming appointments.
- **Division of Workers' Compensation (DWC):** If you have concerns, complaints or questions regarding the MPN, the notification process, or your medical treatment after a work-related injury or illness, you may call the DWC Information and Assistance office at 1-800-736-7401. You may also go to the DWC website at www.dir.ca.gov/dwc and under the header "Workers compensation programs and units" click on "Medical provider networks" for more information about MPNs.
- **MPN Independent Medical Review:** If you have questions about the MPN Independent Medical Review process, contact the Division of Workers' Compensation's Medical Unit at:

DWC Medical Unit
P.O. Box 71010
Oakland, CA 94612
(510) 286-3700 or (800) 794-6900

In the event of a work injury:

1. Be sure first aid is given. Call the Company Nurse Hotline at (877) 778-2576 for non-emergency injuries. Code: GRID
2. If emergency medical treatment is needed, call 911.
3. See that the injured employee is taken to a doctor or hospital, if necessary.
4. Report all injuries immediately to your supervisor or Human Resources (Julie Vang at (530) 846-4721 ext. 8110).
5. Contact Human Resources or Claim Administrator if you have any questions about workers' compensation. You may also contact an Information and Assistance Officer at the State Division of Workers' Compensation.
6. Hear recorded information and a list of local offices by calling toll-free (800) 736-7401 or visit www.dir.ca.gov.

Anyone who knowingly files or assists in the filing of a false workers' compensation claim may be fined up to \$150,000 and sent to prison for up to five years. (Insurance Code Section 1871.4)

Sexual Harassment Notice

The Facts About Sexual Harassment

The Fair Employment and Housing Act (FEHA) defines sexual harassment as harassment based on sex or of a sexual nature; gender harassment; and harassment based on pregnancy, childbirth, or related medical conditions.

The definition of sexual harassment includes many forms of offensive behavior, including harassment of a person of the same gender as the harasser. The following is a partial list of types of sexual harassment:

- Unwanted sexual advances
- Offering employment benefits in exchange for sexual favors
- Actual or threatened retaliation
- Leering; making sexual gestures; or displaying sexually suggestive objects, pictures, cartoons, or posters
- Making or using derogatory comments, epithets, slurs, or jokes
- Sexual comments including graphic comments about an individual's body; sexually degrading words used to describe an individual; or suggestive or obscene letters, notes, or invitations
- Physical touching or assault, as well as impeding or blocking movements
- Sexual desire is not necessary

Employers' Obligations

All employers must take the following actions against harassment:

- Take all reasonable steps to prevent discrimination and harassment from occurring. If harassment does occur, take effective action to stop any further harassment and to correct any effects of the harassment.
- Develop and implement a sexual harassment prevention policy with a procedure for employees to make complaints and for the employer to investigate complaints.

Policies should include provisions to:

- Fully inform the complainant of his/her rights and any obligations to secure those rights.
- Fully and effectively investigate. The investigation must be thorough, objective, and complete. Anyone with information regarding the matter should be interviewed. A determination must be made and the results communicated to the complainant, to the alleged harasser and, as appropriate, to all others directly concerned.
- Take prompt and effective corrective action if the harassment allegations are proven. The employer must take appropriate action to stop the harassment and ensure it will not continue. The employer must also communicate to the complainant that action has been taken to stop the harassment from recurring. Finally, appropriate steps must be taken to remedy the complainant's damages, if any.
- Post the Department of Fair Employment and Housing (DFEH) employment poster (DFEH - 162) in the workplace (available through the DFEH publications line [916] 478-7201 or Web site).
- Distribute an information sheet on sexual harassment to all employees. An employer may either distribute this pamphlet (DFEH 185) or develop an equivalent document that meets the requirements of Government Code section 12950(b). This pamphlet may be duplicated in any quantity. However, this pamphlet is not to be used in place of a sexual harassment prevention policy, which all employers are required to have.
- All employees should be made aware of the seriousness of violations of the sexual harassment policy and must be cautioned against using peer pressure to discourage harassment victims from complaining.
- Employers who do business in California and employ 50 or more part-time or full-time employees must provide at least two hours of sexual harassment training every two years to each supervisory employee and to all new supervisory employees within six months of their assumption of a supervisory position.
- A program to eliminate sexual harassment from the workplace is not only required by law, but is the most practical way for an employer to avoid or limit liability if harassment should occur despite preventive efforts.

Employer Liability

All employers, regardless of the number of employees, are covered by the harassment section of the FEHA.

Employers are generally liable for harassment by their supervisors or agents. Harassers, including both supervisory and non-supervisory personnel, may be held personally liable for harassing an employee or coworker or for aiding and abetting harassment. Additionally, the law requires employers to take "all reasonable steps to prevent harassment from occurring." If an employer has failed to take such preventive measures, that employer can be held liable for the harassment. A victim may be entitled to damages, even though no employment opportunity has been denied and there is no actual loss of pay or benefits. In addition, if an employer knows or should have known that a non-employee (e.g. client or customer) has sexually harassed an employee, applicant, or person providing services for the employer and fails to take immediate and appropriate corrective action, the employer may be held liable for the actions of the non-employee.

An employer might avoid liability if

- the harasser is not in a position of authority, such as a lead, supervisor, manager or agent;
- the employer had no knowledge of the harassment;
- there was a program to prevent harassment; and
- once aware of any harassment, the employer took immediate and appropriate corrective action to stop the harassment.

Filing a Complaint

Employees or job applicants who believe that they have been sexually harassed may file a complaint of discrimination with DFEH within one year of the harassment. DFEH serves as a neutral fact-finder and attempts to help the parties voluntarily resolve disputes.

If DFEH finds sufficient evidence to establish that discrimination occurred and settlement efforts fail, the Department may file a civil complaint in state or federal court on behalf of the complaining party. The DFEH may seek punitive damages is entitled to attorney's fees and costs if it prevails in litigation.

Remedies include:

- Fines or damages for emotional distress from each employer or person found to have violated the law
- Hiring or reinstatement
- Back pay or promotion
- Changes in the policies or practices of the involved employer

Employees can also pursue the matter through a private lawsuit in civil court after a complaint has been filed with DFEH and a Right-to-Sue Notice has been issued.

For more information, see publication DFEH-159 "Guide for Complainants and Respondents."

For more information, contact DFEH toll free at (800) 884-1684 TTY number at (800) 700-2320 or visit the DFEH website at www.dfeh.ca.gov

In accordance with the California Government Code and ADA requirements, this publication can be made available in Braille, large print, computer disk, or tape cassette as a disability-related reasonable accommodation for an individual with a disability. To discuss how to receive a copy of this publication in an alternative format, please contact DFEH at the numbers above.

State of California

Department of Fair Employment & Housing

DFEH-185 (11/14)

**EMPLOYERS MUST PROVIDE THIS INFORMATION TO NEW WORKERS
WHEN HIRED AND TO OTHER WORKERS WHO ASK FOR IT**

**RIGHTS OF VICTIMS OF DOMESTIC VIOLENCE,
SEXUAL ASSAULT AND STALKING**

Your Right to Take Time Off:

- You have the right to take time off from work to get help to protect you and your children's health, safety or welfare. You can take time off to get a restraining order or other court order.
- If your company has 25 or more workers, you can take time off from work to get medical attention or services from a domestic violence shelter, program or rape crisis center, psychological counseling, or receive safety planning related to domestic violence, sexual assault, or stalking.
- You may use available vacation, personal leave, accrued paid sick leave or compensatory time off for your leave unless you are covered by a union agreement that says something different. Even if you don't have paid leave, you still have the right to time off.
- In general, you don't have to give your employer proof to use leave for these reasons.
- If you can, you should tell your employer before you take time off. Even if you cannot tell your employer before, your employer cannot discipline you if you give proof explaining the reason for your absence within a reasonable time. Proof can be a police report, court order or doctor's or counselor's note or similar document.

Your Right to Reasonable Accommodation:

- You have the right to ask your employer for help or changes in your workplace to make sure you are safe at work. Your employer must work with you to see what changes can be made. Changes in the workplace may include putting in locks, changing your shift or phone number, transferring or reassigning you, or help with keeping a record of what happened to you. Your employer can ask you for a signed statement certifying that your request is for a proper purpose, and may also request proof showing your need for an accommodation. Your employer cannot tell your coworkers or anyone else about your request.

Your Right to Be Free from Retaliation and Discrimination:

Your employer cannot treat you differently or fire you because:

- You are a victim of domestic violence, sexual assault, or stalking.
- You asked for leave time to get help.
- You asked your employer for help or changes in the workplace to make sure you are safe at work.

You can file a complaint with the Labor Commissioner's Office against your employer if he/she retaliates or discriminates against you.

For more information, contact the California Labor Commissioner's Office. We can help you by phone at 213-897-6595, or you can find a local office on our website: www.dir.ca.gov/dlse/DistrictOffices.htm. If you do not speak English, we will provide an interpreter in your language at no cost to you. This Notice explains rights contained in California Labor Code sections 230 and 230.1. Employers may use this Notice or one substantially similar in content and clarity.

EMPLOYEE RIGHTS UNDER THE FAMILY AND MEDICAL LEAVE ACT

THE UNITED STATES DEPARTMENT OF LABOR WAGE AND HOUR DIVISION

LEAVE ENTITLEMENTS



Eligible employees who work for a covered employer can take up to 12 weeks of unpaid, job-protected leave in a 12-month period for the following reasons:

- The birth of a child or placement of a child for adoption or foster care;
- To bond with a child (leave must be taken within 1 year of the child's birth or placement);
- To care for the employee's spouse, child, or parent who has a qualifying serious health condition;
- For the employee's own qualifying serious health condition that makes the employee unable to perform the employee's job;
- For qualifying exigencies related to the foreign deployment of a military member who is the employee's spouse, child, or parent.

An eligible employee who is a covered servicemember's spouse, child, parent, or next of kin may also take up to 26 weeks of FMLA leave in a single 12-month period to care for the servicemember with a serious injury or illness.

An employee does not need to use leave in one block. When it is medically necessary or otherwise permitted, employees may take leave intermittently or on a reduced schedule.

Employees may choose, or an employer may require, use of accrued paid leave while taking FMLA leave. If an employee substitutes accrued paid leave for FMLA leave, the employee must comply with the employer's normal paid leave policies.

While employees are on FMLA leave, employers must continue health insurance coverage as if the employees were not on leave.

Upon return from FMLA leave, most employees must be restored to the same job or one nearly identical to it with equivalent pay, benefits, and other employment terms and conditions.

An employer may not interfere with an individual's FMLA rights or retaliate against someone for using or trying to use FMLA leave, opposing any practice made unlawful by the FMLA, or being involved in any proceeding under or related to the FMLA.

An employee who works for a covered employer must meet three criteria in order to be eligible for FMLA leave. The employee must:

- Have worked for the employer for at least 12 months;
- Have at least 1,250 hours of service in the 12 months before taking leave;* and
- Work at a location where the employer has at least 50 employees within 75 miles of the employee's worksite.

*Special "hours of service" requirements apply to airline flight crew employees.

ELIGIBILITY REQUIREMENTS

REQUESTING LEAVE

Generally, employees must give 30-days' advance notice of the need for FMLA leave. If it is not possible to give 30-days' notice, an employee must notify the employer as soon as possible and, generally, follow the employer's usual procedures.

Employees do not have to share a medical diagnosis, but must provide enough information to the employer so it can determine if the leave qualifies for FMLA protection. Sufficient information could include informing an employer that the employee is or will be unable to perform his or her job functions, that a family member cannot perform daily activities, or that hospitalization or continuing medical treatment is necessary. Employees must inform the employer if the need for leave is for a reason for which FMLA leave was previously taken or certified.

Employers can require a certification or periodic recertification supporting the need for leave. If the employer determines that the certification is incomplete, it must provide a written notice indicating what additional information is required.

EMPLOYER RESPONSIBILITIES

Once an employer becomes aware that an employee's need for leave is for a reason that may qualify under the FMLA, the employer must notify the employee if he or she is eligible for FMLA leave and, if eligible, must also provide a notice of rights and responsibilities under the FMLA. If the employee is not eligible, the employer must provide a reason for ineligibility.

Employers must notify its employees if leave will be designated as FMLA leave, and if so, how much leave will be designated as FMLA leave.

ENFORCEMENT

Employees may file a complaint with the U.S. Department of Labor, Wage and Hour Division, or may bring a private lawsuit against an employer.

The FMLA does not affect any federal or state law prohibiting discrimination or supersede any state or local law or collective bargaining agreement that provides greater family or medical leave rights.

For additional information or to file a complaint:

1-866-4-USWAGE

(1-866-487-9243) TTY: 1-877-889-5627

www.dol.gov/whd

U.S. Department of Labor | Wage and Hour Division



What is Disability?

Disability is an illness or injury, either physical or mental, which prevents you from doing your regular work. Disability includes elective surgery, pregnancy, childbirth, or related medical conditions.

What is Disability Insurance?

Disability Insurance (DI) is a part of the State Disability Insurance (SDI) program. DI helps replace your income when you can't work as a result of a non-work-related disability. The program is funded through your SDI tax withholding. You are most likely eligible if you've paid into the SDI program (noted as "CASDI" on paystubs).

Elective Coverage is a plan where employers, the self-employed, and general partners may choose to be covered under SDI. Benefits and eligibility are determined differently between these plans. Find the annual cost of participating at your local [Tax Office](http://edd.ca.gov/office_locator) (edd.ca.gov/office_locator) or by visiting [Disability Insurance Elective Coverage](http://edd.ca.gov/en/Payroll_Taxes/Disability_Insurance_Elective_Coverage) (edd.ca.gov/en/Payroll_Taxes/Disability_Insurance_Elective_Coverage).

Citizenship and immigration status do not affect eligibility for SDI benefits.

What Are My Benefits During Pregnancy?

Your disability period begins the first day you are unable to do your regular work. DI benefits are based on the period of time your licensed health professional certifies you are unable to do your regular work. You can file a DI claim for your pregnancy-related disability, and recovery from delivery.

Without medical complications, you can receive benefits up to four weeks before your expected delivery date and up to six weeks after your delivery. For cesarean section, you can receive benefits up to eight weeks after delivery.

After your DI pregnancy claim ends, you may be eligible to receive up to eight weeks of Paid Family Leave (PFL) to bond with your new baby. A PFL bonding claim form is automatically sent with the final DI benefit payment.

What If I Require Care During My Disability?

If you require care during your disability, your child, parent, parent-in-law, grandparent, grandchild, sibling, spouse, or registered domestic partner may be eligible to receive up to eight weeks of PFL benefits to take time off work to care for you. For more information visit [California PFL](http://edd.ca.gov/en/disability/paid-family-leave) (edd.ca.gov/en/disability/paid-family-leave).

How Do I Apply for Disability Insurance Benefits?

1. Use [SDI Online](http://SDIOnline.edd.ca.gov/SDIOnline) (edd.ca.gov/SDIOnline) to file for benefits.

OR

You can request a paper claim form by:

- Visiting [Forms and Publications](http://forms.edd.ca.gov/forms) (forms.edd.ca.gov/forms).
- Calling 1-800-480-3287.

California state government employees covered by SDI should call 1-866-352-7675.

2. After you complete Part A – Claimant's Statement, have your licensed health professional complete Part B – Physician/Practitioner's Certificate online or by using a paper claim form. If you are filing online, SDI Online will provide you a receipt number once Part A is submitted. Your licensed health professional will need your receipt number to complete Part B.

A claim cannot begin more than seven days before you were examined by or under the care of a licensed health professional.

3. File online or submit your paper claim form within 49 days from the date your disability begins. If your claim is late, you may lose benefits. Visit [Appeals](http://Appeals.edd.ca.gov/en/Disability/Appeals) (edd.ca.gov/en/Disability/Appeals) for more information.

What Happens Next?

- A properly completed claim takes two weeks to be processed.
- We will mail you a *Notice of Computation* (DE 429D) confirming we received your claim and providing your estimated benefit amount.
- You will know we approved your claim once you receive an *Electronic Benefit Payment (EBP) Notification* (DE 2500E).
- If more information is needed or if the claim has been denied, we will contact you.
- The first seven days of your DI claim are a non-payable waiting period. If a claim is filed for the same or related condition within 60 days of the first claim, it will be added on as a continuation of the initial claim. There is no additional waiting period.
- Benefits are paid once all information is received and you are approved. Benefit periods are two weeks at a time. If you are eligible for additional benefits, you will be sent the needed forms to complete and return. Allow 10 days for processing. If your benefits end midweek, that week will be paid at the daily rate. This rate is one-seventh of your weekly benefit amount.
- You will receive your benefits by the payment method you choose when filing a claim.

How Are My Benefits Calculated?

They are based on your paychecks during a specific 12-month period (called a base period) 5 to 18 months before the start of your claim. To qualify, you must have earned at least \$300 in your base period.

Visit the [Disability Insurance and Paid Family Leave Calculator](#) ([edd.ca.gov/PFL_Calculator](#)) to get an estimate.

What Affects My Ongoing Benefits?

You cannot be paid more than your normal weekly salary while receiving benefits. DI benefits are not affected by vacation pay you may receive.

Is There a Maximum Amount to My Benefits?

The maximum amount is 52 times the weekly rate of your benefits, but not more than your total base period wages earned when you were employed.

Exception: For employers and self-employed individuals who elect SDI coverage, the maximum benefit amount is 39 times the weekly rate.

Keep in mind that benefits are payable only for a limited period to a resident in an alcoholic recovery home or drug-free residential facility that is both licensed and certified by the state in which the facility is located. However, disabilities related to acute or chronic alcoholism or drug abuse, being medically treated, do not have this limitation.

What Are My Rights If My Benefits Are Denied?

- **You can** know the reason and basis for any decision that affects your benefits.
- **You can** appeal any decision about your eligibility for benefits. Appeals must be sent to the DI office in writing.
- **You can** request an appeal hearing before an Administrative Law Judge (ALJ). You may further appeal the ALJ's decision to the California Unemployment Insurance Appeals Board and the courts.
- **Your privacy** – all claim information will be kept confidential except for the purposes allowed by law.

Contact DI

- English 1-800-480-3287.
- Spanish 1-866-658-8846.
- By US mail addressed to PO Box 13140, Sacramento, CA 95813-3140. If you do not have a current claim, you may write to any DI office. Note: Do not mail claim forms to this PO Box.
- By TTY (for TTY users only) at 1-800-563-2441.
- In person by visiting any of the [DI Offices](#) ([edd.ca.gov/office_locator](#)).

If your disability is permanent or is expected to continue for a year or more, contact the [US Social Security Administration](#) ([ssa.gov](#)) or by phone at 1-800-772-1213 (TTY 1-800-325-0778).

Paid Family Leave Information

About Paid Family Leave

Paid Family Leave program was created for the moments that matter. Benefits are available to care for a seriously ill family member, to bond with a new child, or participate in a qualifying military event.

Facts About Paid Family Leave

- Provides up to eight weeks of partial-wage-replacement benefits. Leave doesn't have to be taken all at once.
- Provides approximately 70 to 90 percent of your weekly salary.
- Funded through your State Disability Insurance tax withholding, noted as "CASDI" on paystubs, or a qualifying voluntary plan paid into in the past 5 to 18 months.
- To bond with a new child, leave can be taken anytime within the first 12 months of a child entering your family.
- Citizenship and immigration status do not affect eligibility.

What if My Claim Is Denied?

If your claim is denied, you have the right to:

- Know the reason for denial.
- Appeal decisions about your eligibility for benefits. Visit Appeals ([edd.ca.gov/en/Disability/Appeals](#)) for more information.

All claim information is confidential except for purposes allowed by law.

Do I Qualify for Paid Family Leave?

To qualify for Paid Family Leave benefits, you must:

- Take time off from work to care for a seriously ill family member, to bond with a new child or to participate in a qualifying military event.
- Be covered by State Disability Insurance or a voluntary plan in lieu of State Disability Insurance.
- Have earned at least \$300 in the past 5 to 18 months.
- Submit your claim no later than 41 days after you begin your family leave. Do not file before your first day of leave.

How Are Benefit Amounts Calculated?

Benefits are 70 to 90 percent of your highest quarterly earnings 5 to 18 months before your claim begins. Estimate your benefits at Disability Insurance and Paid Family Leave Calculator (edd.ca.gov/PFL_Calculator).

Does Paid Family Leave Provide Job Protection?

Paid Family Leave does not provide job protection. Job protection may be provided if you qualify under other laws:

- Federal Family and Medical Leave Act (dol.gov/agencies/whd/fmla).
- California Family Rights Act. Civil Rights Department (calcivilrights.ca.gov).

Notify your employer of your plan to take leave and the reason for taking leave according to your company's policy

How Do I Apply for Benefits?

You can apply for Paid Family Leave benefits at myEDD (myedd.edd.ca.gov).

To file by mail, you must complete and submit a claim for Paid Family Leave (PFL) Benefits (DE2501F) form. Learn more at File a Paid Family Leave Claim by Mail (edd.ca.gov/en/disability/How_to_File_a_PFL_Claim_by_Mail).

Caregiving Claims

Provide medical certification for your seriously ill family member who requires your care. This certification needs to be from their licensed health professional. You must also provide information about the family member you are caring for and their signature.

Bonding Claims

Provide documents that show your relationship to your child. This can be a copy of your child's birth certificate, adoptive placement agreement, or foster care placement record. If you are currently receiving pregnancy-related Disability Insurance benefits, it is not necessary to request a Paid Family Leave claim form. The form to file for bonding will be sent through your myEDD (myedd.edd.ca.gov) account or by mail when your pregnancy-related disability claim ends.

Military Assist Claims

Military assist claims require two types of supporting documents. This can be proof of covered active duty or call to covered active duty and documentation of the qualifying event.

Voluntary Plans

If you are covered by a voluntary plan, contact your employer for information about your coverage and instructions on how to apply for benefits.

For more information, visit Paid Family Leave (edd.ca.gov/PaidFamilyLeave)

PFL Phone Number

Our toll-free number is 1-877-238-4373. Representatives are available Monday through Friday from 8 a.m. to 5 p.m., except on holidays. After a brief message, you must select a language.

- Press 1 for English
- Press 2 for Spanish
- Press 3 for All Other Languages.

Interpreter services are available free of charge.

TTY Phone Number

Our toll-free number is 1-880-445-1312.

For more information, visit State Disability Insurance (edd.ca.gov/en/Disability/Contact_SDI)

HEPATITIS B

General Information

What is hepatitis?

"Hepatitis" means inflammation of the liver. The liver is a vital organ that processes nutrients, filters the blood, and fights infections. When the liver is inflamed or damaged, its function can be affected. Heavy alcohol use, toxins, some medications, and certain medical conditions can cause hepatitis. However, hepatitis is most often caused by a virus. In the United States, the most common types of viral hepatitis are Hepatitis A, Hepatitis B, and Hepatitis C.



The only way to know if you have Hepatitis B is to get tested.

What is Hepatitis B?

Hepatitis B can be a serious liver disease that results from infection with the Hepatitis B virus. **Acute Hepatitis B** refers to a short-term infection that occurs within the first 6 months after someone is infected with the virus. The infection can range in severity from a mild illness with few or no symptoms to a serious condition requiring hospitalization. Some people, especially adults, are able to clear, or get rid of, the virus without treatment. People who clear the virus become immune and cannot get infected with the Hepatitis B virus again.

Chronic Hepatitis B refers to a lifelong infection with the Hepatitis B virus. The likelihood that a person develops a chronic infection depends on the age at which someone becomes infected. Up to 90% of infants infected with the Hepatitis B virus will develop a chronic infection. In contrast, about 5% of adults will develop chronic Hepatitis B. Over time, chronic Hepatitis B can cause serious health problems, including liver damage, cirrhosis, liver cancer, and even death.

How is Hepatitis B spread?

The Hepatitis B virus is spread when blood, semen, or other body fluids from an infected person enters the body of someone who is not infected. The virus can be spread through:

- **Sex with an infected person.** Among adults, Hepatitis B is often spread through sexual contact.
- **Injection drug use.** Sharing needles, syringes, and any other equipment to inject drugs with someone infected with Hepatitis B can spread the virus.
- **Outbreaks.** While uncommon, poor infection control has resulted in outbreaks of Hepatitis B in healthcare settings.
- **Birth.** Hepatitis B can be passed from an infected mother to her baby at birth. Worldwide, most people with Hepatitis B were infected with the virus as an infant.

Hepatitis B is **not** spread through breastfeeding, sharing eating utensils, hugging, kissing, holding hands, coughing, or sneezing. Unlike some forms of hepatitis, Hepatitis B is also not spread by contaminated food or water.

What are the symptoms of Hepatitis B?

Many people with Hepatitis B do not have symptoms and do not know they are infected. If symptoms occur, they can include: fever, feeling tired, not wanting to eat, upset stomach, throwing up, dark urine, grey-colored stool, joint pain, and yellow skin and eyes.

When do symptoms occur?

If symptoms occur with an acute infection, they usually appear within 3 months of exposure and can last up to 6 months. If symptoms occur with chronic Hepatitis B, they can take years to develop and can be a sign of advanced liver disease.

Continued on next page



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

How would you know if you have Hepatitis B?

The only way to know if you have Hepatitis B is to get tested. Blood tests can determine if a person has been infected and cleared the virus, is currently infected, or has never been infected.

Who should get tested for Hepatitis B and why?

CDC develops recommendations for testing based upon a variety of different factors. Here is a list of people who should get tested. The results will help determine the next best steps for vaccination or medical care.

All pregnant women are routinely tested for Hepatitis B. If a woman has Hepatitis B, timely vaccination can help prevent the spread of the virus to her baby.

Household and sexual contacts of people with Hepatitis B are at risk for getting Hepatitis B. Those who have never had Hepatitis B can benefit from vaccination.

People born in certain parts of the world that have increased rates of Hepatitis B. Testing helps identify those who are infected so that they can receive timely medical care.

People with certain medical conditions should be tested, and get vaccinated if needed. This includes people with HIV infection, people who receive chemotherapy and people on hemodialysis.

People who inject drugs are at increased risk for Hepatitis B but testing can tell if someone is infected or could benefit from vaccination to prevent getting infected with the virus.

Men who have sex with men have higher rates of Hepatitis B. Testing can identify unknown infections or let a person know that they can benefit from vaccination.

How is Hepatitis B treated?

For those with acute Hepatitis B, doctors usually recommend rest, adequate nutrition, fluids, and close medical monitoring. Some people may need to be hospitalized. People living with chronic Hepatitis B should be evaluated for liver problems and monitored on a regular basis. Treatments are available that can slow down or prevent the effects of liver disease.

Can Hepatitis B be prevented?

Yes. The best way to prevent Hepatitis B is by getting vaccinated. The Hepatitis B vaccine is typically given as a series of 3 shots over a period of 6 months. The entire series is needed for long-term protection.

Who should get vaccinated against Hepatitis B?

All infants are routinely vaccinated for Hepatitis B at birth, which has led to dramatic declines of new Hepatitis B cases in the US and many parts of the world. The vaccine is also recommended for people living with someone infected with Hepatitis B, travelers to certain countries, and healthcare and public safety workers exposed to blood. People with high-risk sexual behaviors, men who have sex with men, people who inject drugs, and people who have certain medical conditions, including diabetes, should talk to their doctor about getting vaccinated.

For more information

Talk to your doctor, call your health department, or visit www.cdc.gov/hepatitis.

Fast Facts

- People with HIV infection are affected disproportionately by viral hepatitis.
- Nearly 75% of people with HIV who report a history of injection drug use also are infected with hepatitis C virus (HCV).
- HIV/HCV coinfection more than triples the risk for liver disease, liver failure, and liver-related death.

Overview

Viral Hepatitis means inflammation of the liver caused by a virus. In the United States, the most common causes of viral hepatitis are hepatitis A virus (HAV), hepatitis B virus (HBV), and hepatitis C virus (HCV). Each is distinct from the other and spread in slightly different ways. HBV and HCV infections are common among people who are at risk for, or living with, HIV. You can get some forms of viral hepatitis the same way you get HIV—through sexual contact without a condom and sharing needles or works to inject drugs.

HAV, a short-term but occasionally severe illness, is usually spread through contaminated food, drinks, or touching objects (including injection drug equipment); the feces of an infected person; or sexual contact with an infected person. HAV usually causes a short-term illness. Most people recover completely and do not have any lasting liver damage.

HBV can be spread through blood and other body fluids, including semen. Some people who become infected with HBV, especially during adulthood, can clear the virus. Others, especially those infected as infants or young children, go on to develop long-term infection.

HCV is most often spread through blood, but can sometimes be spread through sexual contact. Most people who become infected with HCV go on to develop a chronic infection. Infection with HCV is often “silent.” Many people can have the infection for decades without having symptoms or feeling sick. Compared with other age groups, people born from 1945 to 1965 are 5 times as likely to be infected with HCV.

Coinfection

People with HIV infection in the United States are often affected by chronic viral hepatitis; about one-third are coinfecting with either HBV or HCV. More people living with HIV are infected with HCV than with HBV. Viral hepatitis progresses faster and causes more liver-related health problems among people with HIV than among those who do not have HIV. Although treatment with antiretroviral therapy has improved the health and extended the life expectancy of people with HIV, liver disease—much of which is related to HBV and HCV causes non-AIDS-related deaths in this population.

People with HIV who are coinfecting with either HBV or HCV are at increased risk for serious, life-threatening complications. As a result, anyone living with HIV should be tested for HBV and HCV. Coinfection with hepatitis may also complicate the management of HIV infection. To prevent coinfection for those who are not already infected with HBV, the Advisory Committee on Immunization Practices recommends HAV and HBV vaccination of high-risk patients. High-risk patients can include gay, bisexual, and other men who have sex with men^a and persons who inject drugs with HIV infection or AIDS. Read more about the recommendation. (http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5516a1.htm?s_cid=rr5516a1_e)

The Numbers

- Of people with HIV in the United States, about 25% are coinfecting with HCV, and about 10% are coinfecting with HBV.
- Nearly 75% of people with HIV who inject drugs also are infected with HCV.
- HIV/HCV coinfection more than triples the risk for liver disease, liver failure, and liver-related death.
- About 20% of all new HBV infections and 10% of all new HAV infections in the United States are among gay and bisexual men.
- CDC estimates that people born during 1945–1965 account for nearly 75% of all chronic HCV infections in the United States.
- In the United States, from 2012 to 2013, rates of acute HCV increased 33% among blacks/African Americans, 28% among whites, and 5% among Hispanics/Latinos.^b

^a The term male-to-male sexual contact is used in CDC surveillance systems. It indicates a behavior that transmits HIV infection, not how individuals self-identify in terms of their sexuality.

^b Hispanics/Latinos can be of any race.

Viral Hepatitis Transmission

People can be infected with the three most common types of hepatitis in these ways:

HAV: Ingestion of the virus from close person-to-person contact with an infected person; sexual contact with an infected person; or from contaminated food, drinks, or touching objects, including drug injection equipment, that has been contaminated from an infected person.

HBV: Contact with infected blood, semen, or other body fluids; sexual contact with an infected person; sharing contaminated needles, syringes, or other drug injection equipment; and needlesticks or other sharp-instrument injuries from an infected person. In addition, an infected woman can pass the virus to her newborn, but HBV vaccination of the baby at birth can prevent her newborn from becoming infected.

HCV: Contact with blood of an infected person, primarily through sharing contaminated needles, syringes, or other drug injection equipment; less commonly, HCV can be transmitted through sexual contact with an infected person and from needlesticks or other sharp-instrument injuries. Although, sexual transmission of HBV occurs much more frequently than HCV, sexual transmission of HCV occurs more often among gay and bisexual men who are infected with HIV than among those not infected with HIV. Condom use decreases but does not eliminate the risk from sexual contact.

Viral Hepatitis Prevention

HAV: The best way to prevent HAV infection is to get vaccinated. The Centers for Disease Control and Prevention (CDC) recommends HAV vaccination for people who are at risk for HIV infection, including gay and bisexual men; users of recreational drugs, whether injected or not; and sex partners of people with HAV infection.

HBV: The best way to prevent HBV infection is to get vaccinated. CDC recommends HBV vaccination for people who have or are at risk for HIV infection and who have never been infected with HBV. This includes gay and bisexual men, people who inject drugs, sex partners of people with HBV infection, people with multiple sex partners, people with a sexually transmitted infection, and health care and public safety workers exposed to blood on the job.

HCV: No vaccine exists for HCV. The best way to prevent HCV infection is to never inject drugs or to stop injecting drugs if you currently do so by getting into and staying in a drug treatment program. If you continue injecting drugs, always use new, sterile needles or syringes, and never reuse or share needles or syringes, water, or other drug preparation equipment.

Testing and Treatment

Blood tests are used to detect viral hepatitis. The virus can be detected even if a person has no symptoms. In the case of HBV, the test result can help determine if a person has been infected and, if not, whether he or she would benefit from vaccination. If an HCV test is positive, a follow-up test must be done to determine if the person is still infected, or has resolved the infection.

Treatment for viral hepatitis varies. HAV infection usually runs its course over time, and most all people who become infected with HAV recover completely and do not have any lasting liver damage. Both chronic HBV and HCV infection can be treated with antiviral medications. For HBV, treatment can delay or limit the effects of liver damage. Newly approved treatments for HCV infection are shorter, have fewer side effects, and now can cure the disease.

Coinfection with viral hepatitis may also complicate the treatment and management of HIV infection. Because viral hepatitis infection is often serious in people with HIV infection and may lead to liver damage more quickly, CDC recommends that all people with HIV infection be tested for HBV and HCV. CDC also recommends that everyone born from 1945 to 1965 should be tested at least once for HCV. While anyone can get HCV, up to 75% of adults infected with HCV were born from 1945 to 1965.

HIV/HBV and HIV/HCV coinfections can be effectively treated in many people, but treatment is complex, and people with coinfection should look for health care providers with expertise in the management of both HIV infection and viral hepatitis.

CDC has produced a 5-minute online Hepatitis Risk Assessment tool (<http://www.cdc.gov/hepatitis/riskassessment>) that allows people to answer questions privately, in their home or in a health care setting, and get tailored recommendations based on CDC's guidelines to discuss with their doctor. This tool can also determine which tests and vaccines are right for you.

Additional Resources

CDC-INFO
1-800-CDC-INFO (232-4636)
www.cdc.gov/info

CDC HIV Website
www.cdc.gov/hiv

**CDC Act Against
AIDS Campaign**
www.cdc.gov/actagainstaids

New Health Insurance Marketplace Coverage Options

Part A: General Information

When key parts of the health care law take effect in 2014, there will be a new way to buy private individual health insurance: the Health Insurance Marketplace. To assist you as you evaluate options for you and your family, this notice provides some basic information about the new Marketplace and employment-based health coverage we offer to you. Please note that this notice is informational only.

What is the Health Insurance Marketplace?

The Marketplace is designed to help you find private individual health insurance that meets your needs and fits your budget. The Marketplace offers "one-stop shopping" to find and compare private health insurance options. You may also be eligible for a new kind of tax credit that lowers your monthly premium right away. Open enrollment for health insurance coverage through the Marketplace begins in October 2013 for coverage starting as early as January 1, 2014.

Can I Save Money on my Health Insurance Premiums in the Marketplace?

You may qualify to save money and lower your monthly premium, but only if your employer does not offer coverage, or offers coverage that doesn't meet certain standards. The savings on your premium that you're eligible for depends on your household income.

Does the Employment-Based Health Coverage We Offer to You Affect Your Eligibility for Premium Savings through the Marketplace?

Yes. If we have offered you health coverage that meets certain standards, you will not be eligible for a tax credit through the Marketplace and you may wish to enroll in our health plan, if you are eligible. (Just because you received this Marketplace notice does not mean you are eligible.) However, you may be eligible for a tax credit that lowers your monthly premium, or a reduction in certain cost-sharing if we do not offer coverage to you at all or do not offer coverage that meets certain standards. If the cost of self-only coverage under our health plan is more than 9.5% of your household income for the year, or if our health plan does not meet the "minimum value"¹ standard set by the Affordable Care Act, you may be eligible for a tax credit.

Note: If you purchase a health plan through the Marketplace instead of accepting our health plan coverage, then you may lose our contribution (if any) to your coverage under our health plan. Also, our contribution—as well as your employee contribution—is often excluded from income for Federal and State income tax purposes. Your payments for coverage through the Marketplace are made on an aftertax basis.

How Can I Get More Information About the Health Insurance Marketplace?

The Marketplace can help you evaluate your coverage options, including your eligibility for coverage through the Marketplace and its cost. Please visit HealthCare.gov for more information, including an online application for health insurance coverage and contact information for a Health Insurance Marketplace in your area.

You can also contact an Individual CHOICE licensed health insurance counselor at (800) 444-1188 on or after October 1, 2013, and get your questions answered.

Part B: Information About Employer-Provided Health Plan Coverage

If you decide to complete an application for coverage in the Marketplace, you will be asked for information about our health plan coverage. The information below can help you complete your application for coverage in the Marketplace.

1. General Employer Information.

Employer name: Gridley Unified School District

Employer Identification Number (EIN): 94-6002223

Employer street address: 429 Magnolia Street

Employer phone number: 530-846-4721

Employer city: Gridley

Employer state: California

Employer ZIP code: 95948

Who can we contact about employee health coverage at this job?: Julie Vang

Phone number (if different from above):

Email address: jvang@gusd.org

2. Eligibility. You may be asked whether or not you are currently eligible for our health plan coverage or whether you will become eligible for coverage within the next three months. In addition, if you are or will become eligible, you may be required to list the names of your dependents that are eligible for coverage under our health plan. If you would like information about the eligibility requirements for our health plan, please read the eligibility provisions described in the Summary Plan Description for our health plan. You can obtain a copy of the Summary Plan Description at www.bsspipa.org or by contacting Julie Vang at 530-846-4721 or jvang@gusd.org.

3. Minimum Value. If you are eligible for coverage under our health plan, you may be required to check a box indicating whether or not our health plan meets the minimum value standard. Our health plan coverage meets the minimum value standard.

4. Premium Cost. If you are eligible for coverage under our health plan, you may be asked to provide the amount of premiums you must pay under the lowest-cost health plan that meets the minimum value standard.

If you would like information about the premiums under our lowest-cost health plan, please contact Julie Vang at 530-846-4721 or jvang@gusd.org.

5. Future Changes. You may also be asked whether or not we will be making certain changes to our health plan coverage for the new plan year. As usual, you will be provided with information about any changes to our health plan coverage before the next open enrollment period. If you are not sure how to answer this question on your Marketplace application, please contact the Marketplace.

[Board Policies](#)

Click on the links below to access and review GUSD's board policies.

[Non Discrimination in District Programs](#)

[Non Discrimination in Employment](#)

[Local Control and Accountability Plan](#)

[Fees and Charges](#)

[Drug and Alcohol-Free Workplace](#)

[Lactation Accommodation](#)

[Sex-based Discrimination and Sexual Harassment](#)

[Universal Precautions](#)

[Non-school Employment](#)

[Employee Assistance Programs](#)

[Evaluation/Supervision for Certificated](#) and [Evaluation/Supervision for Classified](#)

[Child Abuse Prevention and Reporting](#)

[Uniform Complaint Procedures](#)

[Tobacco-free Schools](#)

[Environmental Safety](#)

[Integrated Pest Management](#)

[School Bus Drivers](#)

[Health and Welfare Benefits](#)

[Work-Related Injuries](#)

[Personal Illness & Injury Leave](#)

[Family Care and Medical Leave](#)

[Drug and Alcohol Testing for School Bus Drivers](#)

[Health Care and Emergencies](#)

[Administering Medication and Monitoring Health Conditions](#)

[Career Technical Education](#)