Donated Leave Forms & Deduction Information

For additional information on the Donated Leave Program (including policy, definition, program requirements, and recordkeeping), refer to the Managers and Supervisors manual, Chapter 6, Sections 6.85 and 6.87. Information can also be found in Administrative Rule 63.19 (Donated Leave for catastrophic illnesses of employees and family members).

Program Eligibility

Employee:
- In order to receive donated leave for a catastrophic illness, an employee must have a catastrophic illness as defined:

  “Catastrophic illness” means a physical or mental illness or injury, as certified by a licensed physician, that will result in the inability of the employee to work for more than 30 work days on a consecutive or intermittent basis.

- The physician’s statement on the “Donated Leave For Catastrophic Illness Application” (CFN 552-0611) form is the basis for determining if an employee meets the requirements of the catastrophic illness definition. The employer will determine if the employee meets the remaining eligibility requirements.

- Employers may, at their department’s initiative and expense, seek second opinions or updates from physicians regarding the status of an employee’s illness or injury. If the employee is receiving FMLA leave, a second opinion must be obtained from a physician not employed by the State.

- In addition, the employee must:
  1. have exhausted all paid leave; and
  2. not supplement workers’ compensation to the extent that it exceeds more than 100 percent of the employee’s pay for his or her regularly scheduled work hours on a pay period-by-pay period basis; and
  3. not receive long-term disability (LTD); and
  4. be approved for and using or have exhausted Family and Medical Leave Act (FMLA) leave hours if eligible; and
  5. be on approved leave without pay for medical reasons during any hours for which he or she will receive donated leave.

Family Member:
- In order to receive donated leave for a catastrophic illness of an immediate family member, the immediate family member must have a catastrophic illness as defined:

  “Catastrophic Illness” means a physical or mental illness or injury of an immediate family member (the employee’s spouse, parent, son, or daughter, as defined in the Family and Medical Leave Act of 1993), as certified by a licensed physician, that will result in the inability of the employee to report to work for more than 30 work days due to the need to attend to the immediate family member on a consecutive or intermittent basis.

- The physician’s statement on the “Donated Leave for Catastrophic Illness of an Immediate Family Member Application” (CFN 552-0639) form is the basis for determining if the requirements of the catastrophic illness definition have been met. The appointing authority will determine if the employee meets the remaining eligibility requirements.

- Appointing authorities may, at their department’s initiative and expense, seek second opinions or updates from physicians regarding the status of the employee’s immediate family member’s illness or injury. If the employee is receiving FMLA leave, the second opinion must be obtained from a physician who is not employed by the State.

- In addition, the employee must:
  1. have exhausted all paid leave for which eligible; and
  2. be approved for and using or have exhausted Family and Medical Leave Act (FMLA) leave hours if eligible; and
  3. be on approved leave without pay for the medical reasons of an immediate family member during any hours for which he or she will receive donated leave.

Forms

Donated Leave for Catastrophic Illness Application (CFN 552-0611)
Donated Leave for Catastrophic Illness - Immediate Family Member Application (CFN 552-0639)

For an employee to receive donated leave, they must first complete the Donated Leave for Catastrophic Illness Application and meet all of the criteria in “Part C” in order to be approved.

- “Part A” must be completed by the employee; however, you may need to provide information to help them complete this section.
“Part B” must be completed by the employee’s physician.

Upon receipt of the completed application, the criteria in “Part C” must be verified by the employer or the employer’s designee.

If the employee (and the immediate family member, if on leave for a family member) does not meet one or more of the criteria, retain the application in the employee’s personnel file and advise the employee in writing of the determination (the employee may meet the criteria in the future).

If the employee meets all of the criteria, retain the original application in the employee’s personnel file.

**Donated Leave for Catastrophic Illness Request (CFN 552-0620)**
**Donated Leave for Catastrophic Illness - Immediate Family Member Request (CFN 552-0641)**

Once an employee has been approved for donated leave, the Donated Leave for Catastrophic Illness Request form must be completed and distributed in order to make employees aware that the recipient is in need of donations.

- If an employee has been approved for donated leave, complete the request form and post it throughout the employing department for as long as the recipient qualifies to receive donated leave. Posting the employee's request in other departments is not required; however, donated leave hours can be received from executive branch employees outside of the employing department.
- When the employee is no longer in need of donated leave, the request must be canceled.

**Donated Leave for Catastrophic Illness Contribution (CFN 552-0612)**
**Donated Leave for Catastrophic Illness - Immediate Family Member Contribution (CFN 552-0640)**

- “Part A” must be completed by the employee donating leave. The employee must agree to donate leave in whole hour increments.
- “Part B” must be completed by the donating employee’s personnel assistant.
- The donating employee’s PA will retain the original and the donating employee must receive a copy. A copy of the completed form must also be sent to the recipient’s personnel assistant.
- Once the recipient’s personnel assistant receives a copy of the form, they must complete “Part C.” Donated leave does not have to be credited in whole hour increments. The recipient’s personnel assistant will then return the completed contribution form to the donor’s personnel assistant prior to the pay period in which the donation is to be credited.

**Leave Codes**

**Donated Leave for Employees:**

**Code 54 - Medical Leave Without Pay**


- Mandatory deductions are taken (state, federal and FICA taxes, and retirement).
- Voluntary deductions (credit union, bonds, etc.) are taken unless the employee takes action to stop them.
- Automatic deposit remains in effect.
- Life insurance: The State’s share of basic life premiums will be paid automatically. If the employee has additional life insurance and the premium was not automatically paid, he or she must write a check payable to the “Treasurer, State of Iowa” for the correct amount.
- Health and dental insurance: The employee must pay both the state and employee shares, unless the leave has been designated as FMLA qualifying leave. If the leave is covered under FMLA, the employee must pay only his or her share of health and dental insurance. Once the FMLA leave is exhausted the employee must pay both the state and employee's shares of the premium. If the employee is required to pay the total premium by personal check, two checks must be written, one for health and one for dental. Both checks must be made payable to the “Treasurer, State of Iowa.” Once you receive the checks send them to the Department of Administrative Services – State Accounting Enterprise.
- Premium Conversion Program (Pre-Tax) remains in effect.
- Flexible Spending Accounts: Payroll deductions for the health and dependent care flexible spending accounts stop. Employees who return to work within 30 days of the date the leave began are automatically reinstated in the flexible spending account program. Employees who return to work more than 30 days after the leave began may make a new election to participate in the flexible spending account program.
- Deferred Compensation: Payroll deductions for the Retirement Investors’ Club (deferred compensation) stop. Employees who wish to begin contributions upon return to work must complete a RIC Account Form.
Continued – Donated Leave Forms & Deduction Information

**Code 57 - Medical Intermittent Leave**
For employees with Regular hours and donated leave payments. (Regular hours mean hours worked, sick leave, vacation, etc. not donated leave payment only).

- Mandatory deductions are taken (state, federal, and FICA taxes and retirement).
- Voluntary deductions (credit union, bonds, etc.) continue.
- Automatic deposit remains in effect.
- Life insurance: The State’s share of basic life and long-term disability premiums will be paid automatically. The employee’s share of life insurance will be deducted if there are enough regular hours. If not, the employee must write a check payable to the “Treasurer, State of Iowa” for the correct amount.
- Health and dental insurance: The employee and state shares will be paid if the employee has enough regular hours. The employee must pay both the state and employee shares once they are no longer eligible for FMLA qualifying leave OR no longer working enough hours to qualify for a state share. If the employee is required to pay the total premium by personal check, two checks must be written, one for health and one for dental. Both checks must be made payable to the “Treasurer, State of Iowa.” Once you receive the checks send them to the Department of Administrative Services – State Accounting Enterprise.
- Premium Conversion Program (Pre-Tax) remains in effect.
- Flexible Spending Accounts: Payroll deductions for the health and dependent care flexible spending accounts will continue as long as the employee receives sufficient pay from which to take the deduction. Employees who do not have sufficient pay to make at least one deduction in a month will not be able to file claims for services within that month.
- Deferred Compensation: Payroll deductions for the Retirement Investors’ Club (deferred compensation) will continue as long as the employee receives sufficient pay from which to take the deduction.

**Donated Leave for Immediate Family Members:**

**Code 53 - FMLA for Family Member**
Optional Remark Code 232 - Catastrophic Illness Leave Without Pay Granted for an Immediate Family Member.

- Mandatory deductions are taken (state, federal, and FICA taxes and Retirement).
- Automatic deposit remains in effect.
- Life Insurance: The State’s share of basic life and long-term disability premiums will be paid automatically. The employee’s share of life insurance will be deducted if there are enough regular hours. If not, the employee must write a check payable to the “Treasurer, State of Iowa” for the correct amount.
- Voluntary deductions (credit union, bonds, etc.) are taken unless the employee takes action to stop them.
- Health and dental insurance: The employee and state shares will be paid if the employee has enough regular hours. The employee must pay both the state and employee shares once they are no longer eligible for FMLA qualifying leave (at which point the employee should be moved to code 50 - Leave Without Pay) OR no longer working enough hours to qualify for a state share. If the employee is required to pay the total premium by personal check, two checks must be written, one for health and one for dental. Both checks must be made payable to the “Treasurer, State of Iowa.” Once you receive the checks send them to the Department of Administrative Services – State Accounting Enterprise.
- Premium Conversion Program (Pretax) remains in effect.
- Deferred Compensation: Payroll deductions for the Retirement Investors’ Club (deferred compensation) will continue as long as the employee receives sufficient pay from which to take the deduction. Employees who wish to resume contributions upon return to work must submit a completed New Account and Change Form to their personnel assistant.
- Flexible Spending Accounts: Payroll deductions for the health and dependent care flexible spending accounts will continue as long as the employee receives sufficient pay from which to take the deduction. Employees who do not have sufficient pay to make at least one deduction in a month will not be able to file claims for services within that month. Employees who return to work within 30 days of the date the leave began are automatically reinstated in the flexible spending account program. Employees who return to work more than 30 days after the leave began may make a new election to participate in the flexible spending account program.

**Code 50 - Leave Without Pay**
Move the employee to code 50 once they have exhausted their FMLA.