### Medical Separation Toolkit

Originally Issued September 2013 and Reissued June 2015 in Conjunction with Revised APM - 080, Medical Separation

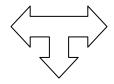
#### **APM - 080 Medical Separation Review Process Outline for All Academic Titles**

**PRIOR to Review**: Chair (Ch), Dean (D), or Disability Management (DM) (or equivalent) consults with academic appointee prior to initiation of Med Sep review.

**Review File is Prepared:** Ch or D consults with DM, prepares written documentation of essential job functions appointee is unable to perform, job desc. & interactive accommodation process that took place in accordance with APM - 210 and APM - 711.\*

\* The University may also initiate a medical separation review based on notice of approval of disability income from a retirement system to which the University contributes, such as UCRP or PERS, or approval of University long-term disability insurance benefits.

If Chair initiates review, file is sent to Dean for Approval



If Dean initiates, Chair is consulted before file is sent.

File is sent to Vice-Provost's (VP) Office for Review and forwarding to appointee and Chancellor.

A copy of file is sent to appointee along with written notification that s/he has 30 calendar days to respond directly to VP before file is sent to Chancellor.

After 30 calendar days from notice, VP's Office sends file to Chancellor.

Chancellor reviews file and makes decision whether to proceed. Cannot be redelegated for faculty cases.



STOP! Chancellor does not approve.



Chancellor approves Med Sep; File is sent to DM for advisement / recommendation and Chancellor makes final decision. Cannot be redelegated for faculty cases.



STOP! Chancellor does not approve.



Proceed to notification Procedures.

#### APM - 080, Medical Separation - Guidelines for the Notification Process

An academic appointee shall be given advance written notice by the Chancellor of the intention to separate. The notice shall state the reason for the medical separation and include copies of the statements of the Chair and/or Dean and any other pertinent material considered. Confirm with the Benefits Office that the appointee has not completed a disability retirement prior to issuing notice of intent and again before final notice of action. If retirement is complete provide alternate notice.

	Consultation with Chair, Committee on Privilege and Tenure	Notice of Intent to Separate	Decision to Proceed	President and Regents	Notice of Separation	Right to Grieve
Faculty with Tenure or Security of Employment	a medical separation for a faculty member with tenure or security of employment, the Chancellor shall consult with the Chair of the Committee on Privilege and Tenure, in accordance with Regents Standing Order 101.1(b). The Chair shall respond in writing to the Chancellor within fifteen (15) business days. The Chancellor shall then determine	to a hearing before the properly constituted advisory committee of the Academic Senate under Regents Standing Order 103.9. <sup>2</sup> The notice shall include the	Committee on Privilege and Tenure, and following a response by the faculty member and/or following a hearing (and recommendation), if any, the Chancellor will make a final decision as to whether to forward the medical separation recommendation to the President, c/o of the	Office of General Counsel shall notify the faculty member of the right to appear before The Regents. The file shall be forwarded to The Regents for approval. The authority of the Chancellor to recommend medical separation to the President may not be redelegated.	If the action to separate is approved by The Regents, the President will notify the Chancellor, who then will notify the faculty member.	A faculty member with tenure or security of employment retains the right to grieve under Academic Senate Bylaw 335.4

#### **APM - 080, Medical Separation - Guidelines for the Notification Process**

	Consultation with Chair, Committee on Privilege and Tenure	Notice of Intent to Separate	Decision to Proceed	President and Regents	Notice of Separation	Right to Grieve
Faculty without	N/A	Notice of intent to	The faculty member	N/A	If the Chancellor	A faculty member
Tenure or Security of		separate shall state that	must respond within		proceeds, a written	without tenure or
Employment		_	thirty (30) consecutive		notice of medical	security of employment
			days to request a			retains the right to grieve
		_	hearing; otherwise, the		typically within sixty	under Academic Senate
			Chancellor will make		(60) consecutive days of	Bylaw 335.
		,	the final determination		the notice of intent. The	
			whether to proceed with		written notice shall	
		_	a medical separation.		include the effective date	
		hearing before the	The Chancellor may not		and the right to grieve	
			redelegate the authority		under Academic Senate	
		,	to decide whether to		Bylaw 335, <sup>4</sup> if the	
			proceed with a medical		appointee did not elect a	
		-	separation.		hearing under Regents	
		Order 103.9 <sup>2</sup> and Senate			Standing Order 103.9. <sup>2</sup>	
		Bylaw 337. <sup>3</sup> The notice				
		shall include the name of				
		the person to whom the				
		faculty member shall				
		respond.				

#### APM - 080, Medical Separation - Guidelines for the Notification Process

	Consultation with Chair, Committee on Privilege and Tenure	Notice of Intent to Separate	Decision to Proceed	President and Regents	Notice of Separation	Right to Grieve
All Other Academic	N/A	Notice of intent to	The Chancellor or	N/A	The Chancellor or the	An academic appointee
Appointees		separate shall state that	Chancellor's delegate		Chancellor's delegate	has the right to grieve
		the appointee has the	may determine that a		shall issue a written	under APM - 140. <sup>5</sup>
		right to respond either	medical separation is		notice of medical	Time limits for filing a
		verbally or in writing	appropriate following		separation typically	grievance apply.
		- · · · · ·	the review of a response,		within sixty (60)	
		consecutive days. The	if any, from the		consecutive days of the	
		notice shall include the	appointee.		date of the notice of	
		name of the person to			intent. The written	
		whom the appointee			notice shall include the	
		should respond.			effective date and the	
					right to grieve under	
					APM - 140. <sup>5</sup>	

<sup>&</sup>lt;sup>1</sup> Regents Standing Order 101.1(b)

<sup>&</sup>lt;sup>2</sup> Regents Standing Order 103.9

<sup>&</sup>lt;sup>3</sup> Senate Bylaw 337

<sup>&</sup>lt;sup>4</sup> Senate Bylaw 335

<sup>&</sup>lt;sup>5</sup> APM - 140

#### **INITIAL NOTIFICATION: Medical Separation**

All Academic Appointees

#### CONFIDENTIAL

[Date]

[Appointee's Name] [Address]

VIA: Email to [email address] and U.S. First Class Mail and Return Receipt Requested

Dear [Name]:

This letter is to notify you of the University's intent to begin the process of medical separation in accordance with Academic Personnel Policy Section 080 (APM -080), Medical Separation, a copy of which is enclosed for your review.

You will be provided with a copy of the medical separation review file and allowed the opportunity to review and comment prior to its submission to the Chancellor.

Please let me know if you have any questions about the policy or about your rights in the process.

Sincerely,

[Dept Chair]

Chair

Department of [Department]

Enclosures: APM - 080, Medical Separation

cc: Dean

Campus Academic Personnel/ VPAA

Campus Disability Manager

Campus Counsel

# MEDICAL SEPARATION REVIEW FILE TRANSMITTAL MEMO TO DEAN

DATE:

TO: [Dean]

FROM: [Department Chair]

RE: MEDICAL SEPARATION REVIEW OF [APPOINTEE'S NAME]

In accordance with Academic Personnel Policy Section 080 (APM - 080), Medical Separation, enclosed please find the medical separation review file and transmittal letter in support of this action. If you approve, please sign the transmittal letter indicating your concurrence with the Department's recommendation. Comments are optional but not required. Please note that if you do add comments, they will become part of the official file, a copy of which will be mailed to the appointee.

If you have any questions or would like to discuss the details of this file, please contact me.

Thank you.

#### MEDICAL SEPARATION REVIEW FILE TRANSMITTAL

All Academic Appointees

|--|

[Appointee's Name] [Address]

Dear Dr. [Name]:

This letter is to notify you that a file has been assembled for your possible medical separation from University employment as [Appointee's title] in the [School/College/Department] of [Dept Name] and to give you an opportunity to review the file prior to its submission to the Chancellor.

The reasons for this action are set forth in the enclosed report. If you have additional information that you feel should be included in the review file or that should be corrected, please respond to [Contact Name] within [period of time, normally, thirty (30) consecutive days] of the date of this letter. Please send your response to the attention of: [Contact Name], [Contact Address/Email]. Alternatively or in addition, please call [Contact Name], [Phone Number].

The relevant policy related to this action is available online at: http://www.ucop.edu/academic-personnel-programs/files/apm/apm-080.pdf

Sincerely,

[Department Chair]

I concur with the Department's recommendation for medical separation and approve the request to submit the file for review by the Chancellor,

[Dean]

Enclosures: Copy of Medical Separation Review File

cc: Department Personnel File

Campus Academic Personnel Office or VPAA

Campus Disability Management Office

bcc: Campus Counsel

# MEDICAL SEPARATION REVIEW FILE TRANSMITTAL MEMO

DATE:	
TO: [C	HANCELLOR]
FROM	: VPAA
RE: MI	EDICAL SEPARATION REVIEW
SCHOO In acco	: RTMENT/DIVISON: DL/COLLEGE: ordance with APM - 080, Medical Separation, enclosed please find the medical separation review
file in s	support of this action.
Prelin	minary Review – Chancellor:
	Approved for review, return to VPAA for routing to Disability Management
	Disapprove, return file to VPAA
Chance	ellor's signature and date
Disab	ility Management Review and Recommendation:
	Recommend medical separation, return to Chancellor
	Do not recommend medical separation, return to Chancellor
Disabil	ity Manager's signature and date
Final	Decision – Chancellor:
	Approve – medical separation, return to VPAA to draft notification letter
	Disapprove – no medical separation, return to VPAA
Chance	ellor's signature and date

# SAMPLE LETTER NOTICE OF INTENT: Medical Separation

All Academic Appointees

#### **CONFIDENTIAL**

[Date]

[Appointee's Name] [Address]

RE: Notice of Intent, Medical Separation

VIA: Email to [email address] and U.S. First Class Mail and Return Receipt Requested

Dear [Name]:

I regret to inform you that it is the intent of the University of California, [campus] to medically separate you from your appointment as [academic title] in the [Department] per the terms outlined in Academic Personnel Policy Section 080 (APM - 080), Medical Separation.

The reason for this action [State reason for medical separation, include copies of the statements of the chair and/or Dean and any other pertinent material considered]

You have the right to respond either orally or in writing within thirty (30) consecutive days regarding this proposed separation. Please send your response to the attention of: [Contact Name and Address/Email]. Alternatively or in addition, please call [Contact Name], [phone].

[All Faculty Only] Additionally, you have the right to a hearing before the properly constituted advisory committee of the Academic Senate under Regent's Standing Order 103.9 and Academic Senate Bylaw 337. To request a hearing please send your request to the attention of: [Contact Name and Address/Email]. If you would like to submit your request by phone, please call [phone].

[For Faculty with Tenure or SOE] Prior to making a determination of medical separation for faculty with tenure or security of employment, and in accordance with Regents Standing Order 101.1(b), I will consult with the Chair of the Committee on Privilege and Tenure. After this consultation, I will make a determination whether to proceed with a medical separation. If I recommend so, your file will be submitted to the President of the University of California, who, upon recommendation, will forward to the Regents for action.

#### OR

[For Faculty without Tenure or SOE] There is a timeframe to request a hearing (within thirty [30] consecutive days of this notice of intent to separate) and a second timeframe to respond to this notice of intent (also within [30] consecutive days). Should you choose not to respond

within thirty (30) consecutive days and we proceed with medical separation, you will be sent a final written notice with an effective date of separation.

#### OR

[For All Other Academic Appointees] Should you choose not to respond within thirty (30) consecutive days and we proceed with medical separation, you will be sent a final written notice, typically within sixty (60) consecutive days of the date of this notice of intent.

Sincerely,

[Chancellor]

**Enclosures** 

cc: Personnel File
Department Chair
Dean
Vice Provost, Academic Affairs
Campus Counsel

#### **NOTICE OF ACTION: Medical Separation**

Faculty without Tenure or SOE and Academic Appointees

#### **CONFIDENTAL**

[date]

[Appointee's Name] [Address]

RE: Notice of Medical Separation

VIA: Email to [email address] and U.S. First Class Mail & Return Receipt Requested

On [date], you were notified in writing of the University's intent to medically separate you from your appointment as [academic title] in the [Department]. Attached is a copy of that letter. The notice indicated that you had a right to respond either orally or in writing within thirty (30) calendar days. This letter is to notify you that you will be medically separated from your appointment effective [date = +60 days from notice of intent letter date].

#### [Following employee response]

On [date], [name] received your [oral or written] response to my letter dated [date] notifying you of the University's intent to medically separate you. I have taken your response into account; however your response has not altered my decision. Additionally, your response did not include a request for a hearing. Therefore, your medical separation will become effective on the date stated above.

#### OR

#### [If employee does not provide response]

No response was received from you within thirty (30) calendar days since you received the notice of intent. Therefore, your medical separation will become effective on the date stated above.

You have the right to grieve this action in accordance with Academic Senate Bylaw 335, which can be accessed at this url: <a href="http://senate.universityofcalifornia.edu/manual/blpart3.html#bl335">http://senate.universityofcalifornia.edu/manual/blpart3.html#bl335</a>. If you have questions about University policy or your rights to grieve this action, they may be directed to [Campus Contact Name and Phone Number].

#### **Academic Appointees:**

#### [Following employee response]

On [date], [name] received your [oral or written] response to my letter dated [date] notifying you of the University's intent to medically separate you. I have taken your response into account; however, your response has not altered my decision.

#### OR

#### [If employee does not provide response]

No response was received from you within thirty (30) calendar days since you received the notice of intent. Therefore, your medical separation will become effective on the date stated above.

You have the right to grieve this action in accordance with Academic Personnel Policy Section 140 (APM - 140), Non-Senate Academic Appointees/Grievances, which can be accessed at this url: <a href="http://www.ucop.edu/academic-personnel-programs/files/apm/apm-140.pdf">http://www.ucop.edu/academic-personnel-programs/files/apm/apm-140.pdf</a>. If you have questions about University policy or your rights to grieve this action, they may be directed to [Campus Contact Name and Phone Number].

#### For All Appointees:

#### **Important Benefits Considerations:**

The Termination of Employment Benefits Check List, available online: <a href="http://ucnet.universityofcalifornia.edu/forms/pdf/termination-of-employment.pdf">http://ucnet.universityofcalifornia.edu/forms/pdf/termination-of-employment.pdf</a>, provides information about various health and welfare plans, when enrollment ends and your options. It also provides information on retirement savings plan options. Please review this document carefully and contact the benefits office should you have any questions at [local benefits contact info].

When certain health plan enrollments end, you may continue coverage through COBRA (<a href="http://ucnet.universityofcalifornia.edu/forms/pdf/cobra-rates-tip-sheet.pdf">http://ucnet.universityofcalifornia.edu/forms/pdf/cobra-rates-tip-sheet.pdf</a>). CONEXIS, UC's COBRA administrator, will send you a COBRA package within 30 days after the date of your separation. If you do not receive the package within that time, please follow up with CONEXIS Customer Service at 1-877-722-2667. Please note that you have 60 days beginning with the date of your qualifying event to enroll in COBRA.

If you are a UCRP 1976 Tier member, vested in UCRP (have 5 years of UCRP service credit), and are age 50 or older, you are eligible to retire. If you are a UCRP 2013 Tier member, with 5 years of UCRP service credit, and are age 55 or older, you are eligible to retire. Please review the following link for information about the retirement process:

http://ucnet.universityofcalifornia.edu/forms/pdf/retirement-handbook.pdf.

If after reviewing the materials, you would like to consider retirement, please contact the benefits office at [campus benefits contact info to speak to a retirement counselor or the Retirement Administration Service Center (RASC) at 1 (800) 888-8267 if your campus does not have a retirement counselor on site].

You may be eligible to receive Unemployment Insurance benefits. To determine your eligibility you must file a claim at a local office of the State of California Employment Development Department. Employees may file Unemployment Insurance Claims by calling EDD at 1-800-300-5616 or via the Internet at www.edd.ca.gov.

#### [Chancellor]

cc: Department Personnel File
Dean
Vice Provost, Academic Affairs
Campus Counsel

#### **NOTICE OF ACTION: Medical Separation**

Faculty with Tenure or SOE

#### **CONFIDENTAL**

[date]

[Appointee's Name] [Address]

RE: Notice of Medical Separation

VIA: Email to [email address] and U.S. First Class Mail and Return Receipt Requested

On [date], you were notified in writing of the University's intent to medically separate you from your appointment as [academic title] in the [Department]. Attached is a copy of that letter. I am writing to transmit the final decision and inform you that on [date], The Regents voted to medically separate you effective [date].

#### **Important Benefits Considerations:**

The Termination of Employment Benefits Check List, available online: <a href="http://ucnet.universityofcalifornia.edu/forms/pdf/termination-of-employment.pdf">http://ucnet.universityofcalifornia.edu/forms/pdf/termination-of-employment.pdf</a>, provides information about various health and welfare plans, when enrollment ends and your options. It also provides information on retirement savings plan options. Please review this document carefully and contact the benefits office should you have any questions at [local benefits contact info].

When certain health plan enrollments end, you may continue coverage through COBRA (<a href="http://ucnet.universityofcalifornia.edu/forms/pdf/cobra-rates-tip-sheet.pdf">http://ucnet.universityofcalifornia.edu/forms/pdf/cobra-rates-tip-sheet.pdf</a>). CONEXIS, UC's COBRA administrator, will send you a COBRA package within 30 days after the date of your separation. If you do not receive the package within that time, please follow up with CONEXIS Customer Service at 1-877-722-2667. Please note that you have 60 days beginning with the date of your qualifying event to enroll in COBRA.

If you are a UCRP 1976 Tier member, vested in UCRP (have 5 years of UCRP service credit), and are age 50 or older, you are eligible to retire. If you are a UCRP 2013 Tier member, with 5 years of UCRP service credit, and are age 55 or older, you are eligible to retire. Please review the following link for information about the retirement process:

http://ucnet.universityofcalifornia.edu/forms/pdf/retirement-handbook.pdf.

If after reviewing the materials, you would like to consider retirement, please contact the benefits office at [campus benefits contact info to speak to a retirement counselor or the Retirement Administration Service Center (RASC) at 1 (800) 888-8267 if your campus does not have a retirement counselor on site].

You may be eligible to receive Unemployment Insurance benefits. To determine your eligibility you must file a claim at a local office of the State of California Employment Development Department. Employees may file Unemployment Insurance Claims by calling EDD at 1-800-300-5616 or via the Internet at www.edd.ca.gov.

#### [Chancellor]

Enclosure:

Copy of Letter of Intent Copy of Notice of Action from President to Chancellor

Department Personnel File cc:

Dean

Vice Provost, Academic Affairs

Campus Counsel

### CHECKLIST - CONTENT FOR MEDICAL SEPARATION FILE CASES (FACULTY WITH TENURE OR SECURITY OF EMPLOYMENT) TO BE SENT TO UCOP VICE PROVOST OF ACADEMIC PERSONNEL AND PROGRAMS

- 1. Copy of notice of intent to begin the medical separation review from Department Chair or Dean to the faculty member (cc NOI to: VPAA and Disability Manager)
- 2. Copy of request for medical separation review from Department Chair or Dean to Disability Manager, including:
  - a. Medical leave timeline
  - b. Description of essential job functions
  - c. Hardship for department, i.e. consequences of absence
  - d. Documentation of communications with the faculty member
- 3. Copy of letter from Disability Manager to Department Chair confirming substance and facts determined from the review, including:
  - a. Summary of the facts of the case, including the date the appointee last worked
  - b. Summary of the medical leave timeline and departmental documentation, confirming that all available LOA has been exhausted
  - c. Summary of the interactive process, i.e. summary of the efforts and outcome of reasonable accommodations offered, and efforts to find alternative employment
  - d. Confirmation that the faculty member is unable to perform the essential functions of the position, or any other position, with or without reasonable accommodation
  - e. Summary and documentation of the faculty member's responses
  - f. Formal Disability Management assessment
  - g. Recommendation and next steps
- 4. Copy of letter from Department Chair or Dean to faculty member transmitting medical separation review file and next steps (appointee has right to respond and to have file amended, if appropriate)
- 5. Copy of letter from Dean to Chancellor recommending medical separation with request for final review (cc: VPAA and Disability Manager)
- 6. Copy of letter from Chancellor to Disability Manager requesting final review
- 7. Copy of letter from Disability Manager to Chancellor summarizing facts of case, confirming:
  - a. That the faculty member is unable to perform any of the essential functions of the position or any position with or without reasonable accommodation
  - b. That no University-initiated options other than medical separation exist to resolve the current situation
  - c. That medical separation is appropriate
- 8. Copy of letter, if any, from Chancellor to Chair, Committee on Privilege and Tenure, requesting concurrence with recommendation to medically separate
- 9. Copy of letter from Chair, Committee on Privilege and Tenure, to Chancellor concurring with recommendation
- 10. Copy of letter from Chancellor to faculty member notice of intent to medically separate and next steps
- 11. Letter from Chancellor to UCOP Vice Provost of Academic Personnel and Programs recommending medical separation, including:
  - a. All documentation from the previous steps on this checklist
  - b. Reason(s) for the medical separation
  - c. Confirmation that the faculty member has either responded or not responded to the Chancellor's notice of intent to separate with documentation

After UCOP and OGC complete review of the file, the request is submitted by UCOP to the Regents for final action. The President sends a letter to the Chancellor informing him/her of the Regents' decision and the Chancellor notifies the faculty member.

## CHECKLIST - CONTENT FOR MEDICAL SEPARATION FILE CASES (FACULTY WITH TENURE OR SECURITY OF EMPLOYMENT) TO BE SENT TO UCOP VICE PROVOST OF ACADEMIC PERSONNEL AND PROGRAMS

1.	Copy of notice of intent to begin the medical separation review from Department Chair or Dean
	to the faculty member (cc NOI to: VPAA and Disability Manager)
2.	Copy of request for medical separation review from Department Chair or Dean to Disability
	Manager, including:
	a. Medical leave timeline
	b. Description of essential job functions
	c. Hardship for department, i.e. consequences of absence
	d. Documentation of communications with the faculty member
3.	Copy of letter from Disability Manager to Department Chair confirming substance and facts
	determined from the review, including:
	a. Summary of the facts of the case, including the date the appointee last worked
	b. Summary of the medical leave timeline and departmental documentation, confirming
	that all available LOA has been exhausted
	c. Summary of the interactive process, i.e. summary of the efforts and outcome of
	reasonable accommodations offered, and efforts to find alternative employment
	d. Confirmation that the faculty member is unable to perform the essential functions of
	the position, or any other position, with or without reasonable accommodation
	e. Summary and documentation of the faculty member's responses
	f. Formal Disability Management assessment
	g. Recommendation and next steps
<u></u> 4.	Copy of letter from Department Chair or Dean to faculty member transmitting medical
	separation review file and next steps (appointee has right to respond and to have file amended,
	if appropriate)
5.	Copy of letter from Dean to Chancellor recommending medical separation with request for final
	review (cc: VPAA and Disability Manager)
<u>6</u> .	Copy of letter from Chancellor to Disability Manager requesting final review
<u></u>	Copy of letter from Disability Manager to Chancellor summarizing facts of case, confirming:
ш	a. That the faculty member is unable to perform any of the essential functions of the
	position or any position with or without reasonable accommodation
	b. That no University-initiated options other than medical separation exist to resolve the
	current situation
	c. That medical separation is appropriate
<u> </u> 8.	Copy of letter, if any, from Chancellor to Chair, Committee on Privilege and Tenure, requesting
	concurrence with recommendation to medically separate
9.	Copy of letter from Chair, Committee on Privilege and Tenure, to Chancellor concurring with recommendation
$\Box_{10}$	Copy of letter from Chancellor to faculty member – notice of intent to medically separate and
LL10.	next steps
	Letter from Chancellor to UCOP Vice Provost of Academic Personnel and Programs
Ш.	recommending medical separation, including:
	a. All documentation from the previous steps on this checklist
	b. Reason(s) for the medical separation
	c. Confirmation that the faculty member has either responded or not responded to the
	Chancellor's notice of intent to separate with documentation

After UCOP and OGC complete review of the file, the request is submitted by UCOP to the Regents for final action. The President sends a letter to the Chancellor informing him/her of the Regents' decision and the Chancellor notifies the faculty member.