COVID-19 Time Reporting Checklist and Instructions

Last Updated: April 20, 2020

1. Did you work the entirety of the pay period at your on-campus or remote work site?
   a. Yes – fill out your timesheet in the regular fashion. Classified employees will submit all time worked. Non-classified and Faculty employees do not need to fill out a timesheet (unless there is a leave of absence to report).
   b. No – continue to question 2.

2. For any time that you did not work, were you taking approved vacation/annual leave or regular Idaho State University sick leave NOT related to COVID-19?
   a. Yes – fill out your timesheet using normal leave codes and stop here in this checklist.
   b. No – continue to question 3.

3. For any time that you did not work, were you taking approved Family Medical Leave NOT related to COVID-19?
   a. Yes – fill out your timesheet using standard Sick Leave code along with a notation that the FMLA absence is unrelated to COVID-19 and stop here in this checklist.
   b. No – continue to question 4.

4. The following items address absence from work for reasons related to COVID-19 occurring on or after April 1, 2020.
a. You were subject to a federal, state, or local quarantine or isolation order related to COVID-19 AND you were unable to perform essential on-campus duties, work remotely or otherwise from your place of quarantine or isolation. (see explanations below) – if this is the case, skip to 5a “Paid Sick Leave” below.

This means any of a broad range of governmental orders, including orders that advise some or all citizens to shelter in place, stay at home, quarantine or otherwise restrict mobility and don't allow you to perform any type of on-campus essential work, remote or alternate work-related tasks.

OR

b. You were advised by a health care provider to self-quarantine due to concerns related to COVID-19 AND you were unable to work remotely or otherwise from the site of self-quarantine. (see explanations below) – if so, skip to 5a “Paid Sick Leave” below.

The healthcare provider’s advice must be based on the provider’s belief that:

1. You have COVID-19;

2. You may have COVID-19; or

3. You are particularly vulnerable to COVID-19.

OR

c. You were experiencing COVID-19 symptoms and you were taking steps to seek medical diagnosis AND you were unable to work, remotely or otherwise, during this time. (see explanations below) - if so, skip to 5a “Paid Sick Leave” below.

   Symptoms are:

1. Fever;
2. Dry cough;

3. Shortness of breath; or

4. Any other COVID-19 symptoms identified by the U.S. Centers for Disease Control and Prevention.

**OR**

d. You were needed to care for an individual who was subject to a Federal, State or local quarantine or isolation order related to COVID-19 AND you were unable to work remotely or otherwise during this time. (see explanations below) - if so, skip to 5b “Paid Sick Leave” below.

   i. “Individual” means an employee’s immediate family member, a person who regularly resides in the employee’s home, or a similar person with whom the employee has a relationship that creates an expectation that the employee would care for the person if he or she were quarantined or self-quarantined. For this purpose, “individual” does not include persons with whom the employee has no personal relationship.

   ii. The individual being cared for must be subject to a Federal, State or local quarantine or isolation order as described or have been advised by a health care provider to self-quarantine based on the belief that he/she has COVID-19, may have COVID-19 or is particularly vulnerable to COVID-19 as described.

**OR**

e. You were needed to care for your son or daughter whose school or place of care was closed, or whose child care provider was unavailable, due to COVID-19 related reasons AND you were unable to work remotely during this time (see explanations below) - if so, skip to 5b “Paid Sick Leave” below.
An employee has a need to take leave if he or she is unable to work due to a need to care for his or her son or daughter whose school or place of care has been closed, or whose child care provider is unavailable, for reasons related to COVID-19

OR

f. You were experiencing a substantially similar condition, as specified by the Secretary of Health and Human Services. To date, this has not been defined. This section is reserved for the possibility of additional State or Federal Guidance.

5. Federal Emergency Paid Sick Leave (Available as of April 1, 2020)

Because of the new Federal and State rules that apply during the COVID-19 pandemic, the following options are available for your use to account for your time off. Please note, employees may not exceed 100% of their regular pay in combining accrued leave options with the new temporary federal leave programs. Please read the following options and choose what is appropriate for your circumstances, and based on the conditions outlined above. If you are using one of the new leave options below, please insert a comment before you submit your timesheet indicating the reason for the leave requested. If you are using one of the new codes listed below, HR and Payroll may follow up at some point in the future to request additional supporting documentation. If you have additional questions, please contact HR at 208-282-2517 or hr@isu.edu.

a. For 4a, 4b, and 4c, you can use the “Federal Emergency Sick Leave” code. This code pays 100% of your hourly rate, for a maximum of 10 days, and is prorated for part-time employees. If you choose not to use this code, please proceed to 5c.
b. For 4d, 4e or 4f, you can report hours under “Fed Emergency ⅔ Sick Leave” code. When using this code, enter all hours for your regular work schedule and add a comment as to whether you want to supplement your hours with sick leave accruals to receive the full amount of your regular pay, or indicate if you want to use “Leave Without Pay”). (Part-time employees hours will be based on average hours worked over 10 working days. If you choose not to use this code, proceed to 5c.

i. Additional FMLA option for scenario 4e: You may choose to use “COVID FMLA ⅔ Pay” code. This provides ⅔ of your regular pay for up to 10 weeks. FMLA Emergency Leave is part of the existing FMLA Leave program. This new temporary “COVID care of a child” provision is simply a new eligibility criteria under the program. Please note: FMLA leave used in the past 12 months for non-COVID related situations count against your 10-weeks of total leave. This earning code can only be used after a 10 day waiting period during which the employee can use “Fed Emergency ⅔ Sick Leave”, or any of the leave options described in 5c. When using this code, enter all hours from your regular work schedule and add a comment as to whether you want to supplement your hours with sick leave accruals to receive the full amount of your regular pay, or indicate if you want to use “Leave Without Pay”. Part-time employees hours will be based on average hours worked over 10 working days.

c. This section provides additional leave options. Please select your preferred option below:

i. Benefited employees can elect to use regular “Sick Leave” or annual “Vacation Leave”/“Compensatory Time Taken” leave to the extent of your accrued balances.
ii. If you have exhausted all of your accrued leave, you may request Shared Leave or discuss other options by contacting ISU HR (208)-282-2517, hr@isu.edu). The ability to use Shared Leave is based on employee eligibility and availability of hours donated from other ISU colleagues. If hours are available for sharing, an employee can receive up to 160 hours of shared leave within a fiscal year.

iii. Benefited employees who have exhausted their regular sick leave balance, or employees who do not earn accrued leave can enter hours under the State of Idaho’s “Advanced Sick Leave” code. This code provides 100% of hourly pay rate for a maximum of 80 hours. Benefitted employees will go into a negative Sick Leave balance which will be paid back through future sick leave accruals.

iv. If you are still unable to cover all of your regular hours in the pay period, please contact HR (208-282-2517, hr@isu.edu) to discuss additional leave options.

6. Other absences from work: Any absence from work that does not qualify for leave under regular university policies (i.e. approved annual leave or regular sick leave) and does not qualify for COVID-19 leave under the circumstances set out in sections 5 or 6 above must be taken as leave without pay.

7. Applicable Earn Codes

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<tr>
<th>Earn Code</th>
<th>Entry Earning Code</th>
<th>Short Description</th>
<th>Percent of pay</th>
<th>Limit</th>
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<td>VAC</td>
<td>Vacation Leave</td>
<td>Your regular Vacation balance</td>
<td>100%</td>
<td>Your Current Balance</td>
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<td>Code</td>
<td>Description</td>
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<tr>
<td>SIC</td>
<td>Sick Leave</td>
<td>Your Regular Sick Leave 100% Your Current Balance</td>
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<tr>
<td></td>
<td>Compensatory Time Taken</td>
<td>Your regular Comp Time balance 100% Your Current Balance</td>
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<td>Leave without Pay w Benefits</td>
<td>Leave with no pay 0% No Limit</td>
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<tr>
<td>ASL</td>
<td>Advanced Sick Leave</td>
<td>Sick Leave that will take your balance to a negative 100% 80 hours</td>
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<tr>
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<td>State COVID Admin Leave</td>
<td>Paid Leave for hours after all other leaves are gone 100% 80 hours</td>
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<td>Federal Emergency Sick Leave</td>
<td>Paid Leave for hours matching qualifying reasons 1, 2, and 3 100% 10 days</td>
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<td>FMLA 2/3 Paid leave for qualifying reason 4 66.70% 10 weeks</td>
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