T.J. ANTHONY CATASTROPHIC ILLNESS PROGRAM
Fact Sheet

Purpose of the Program

The Catastrophic Illness Program (CIP) aims to assist City and County of San Francisco (City) employees who are catastrophically ill or who are caring for a catastrophically ill family member, and who have exhausted all their own paid leave. Catastrophic illness is defined as a life-threatening illness or injury as determined by the Department of Public Health.

The program provides paid leave for qualifying applicants by allowing other City employees to donate a portion of their:

- Accumulated sick leave or vacation credits to individual employees or a pool of employees who are determined to be eligible for catastrophic illness pay (CIP); and/or
- Vacation credits to an employee who is caring for a catastrophically ill family member (CIP-FM).

Employees who qualify for CIP may receive donations made to them specifically, or, they may receive leave donations made to a pool from which any catastrophically ill employee may draw.

Information for Applicants

CIP Eligibility
You may receive donations of sick leave or vacation credits from other City employees if you have been designated catastrophically ill and meet the following conditions:

- You are eligible to accumulate and use sick leave and vacation credits
- You are catastrophically ill
- You have exhausted all of your available paid leave
- You do not participate in a short or long-term disability program for which the City fully pays, either directly or indirectly. If you do participate in such a program, you must apply for disability benefits through that program as soon as you become eligible.

CIP-FM1 Eligibility
You may be eligible to receive donations of vacation credits from other City employees if you must care for a catastrophically ill family member and meet the following conditions:

- You are eligible to accumulate and use sick leave and vacation credits
- You have exhausted all of your available paid leave
- You have a catastrophically ill family member
- You must take time off from work to care for the catastrophically ill family member.

1Family member means a spouse, registered domestic partner, or another dependent as defined in the Internal Revenue Code (26 U.S.C. sec. 152 as amended from time to time).

How to Apply

If you believe you meet the eligibility criteria, fill out an application for CIP or application for CIP-FM and submit it with supporting medical records to the CCSF Department of Human Resources (DHR) on the address listed on the application. DHR will compile the information and submit it to the Department of Public Health Medical Officer for a decision on whether you meet the qualifications. You may be asked to be examined by a physician or to provide additional medical/financial documentation as part of the application process and/or to maintain CIP eligibility.

Medical Confidentiality

All information regarding your application will be kept strictly confidential. Any medical records submitted to help support your application will remain confidential at all times.
Application Approval

If the Medical Officer approves your eligibility for CIP, you will be assigned a Recipient Identification Number (RIN) to keep your identity confidential. You may provide this number to employees who want to donate sick leave or vacation to your CIP account. DHR maintains and posts the RIN listing on the CIP portion of their website in order to let transferring employees designate a recipient.

Regardless of whether employees donate sick leave or vacation hours to your account, all donations are credited to your account as sick leave. You may receive transferred leave credits totaling up to, but not more than, 100% of your normally scheduled hours for the pay period. Because you will continue to accrue sick leave and vacation while you are out on CIP, your payroll department must continue to use all of your accrued vacation and sick pay before CIP hours can be used (see Administrative Code 16.9-29A[i]).

Application Denial

If the Medical Officer denies your eligibility for CIP, you have the right to appeal the decision. The Department of Human Resources will notify you in writing of the Medical Officer’s determination with explanations of the reasons for the decision and procedures for filing an appeal.

You may also submit a new application after observing a 30-day waiting period from the date of denial if you have new information to provide. You do not need to exhaust the appeal process to refile based on new information.

Information for Donors

To donate sick leave or vacation credits to another City employee or to the pool you:
- Must not be catastrophically ill
- Must be eligible to accumulate and use either sick leave or vacation credits
- Must retain a minimum of 64 hours of sick leave for your personal use.

To donate sick leave or vacation to a catastrophically ill employee you must complete a donor form. To donate vacation only to an employee with a catastrophically ill family member you must complete the FM donor form. On the form you must specify the amount of sick leave or vacation hours you wish to donate. If you are donating to an individual you must indicate the RIN of the employee on CIP. Some transfer conditions apply:
- Transfers must be in units of eight hours
- Once transferred, all donations are irrevocable
- A maximum of 160 hours per pay period, 80 hours per individual CIP employee, and 480 hours per fiscal year may be transferred
- Leave credits may be transferred to the CIP individual recipient or pool once per pay period
- Donations are subject to the San Francisco Administrative Code, Section 16.9-29A
- Marital status declaration of spousal consent must be completed.

Sick leave and vacation credits, granted to each employee through their service to the City, cannot be sold, bartered or traded to any other employee under any circumstances. The only provision for affording another employee a portion of your sick leave or vacation credits is under the stipulations of this ordinance. There are no exceptions.

Contact Information

For more information: Contact your Departmental Personnel Officer.

To obtain forms: Visit the Department of Human Resources website at www.sfdhr.org, and click on “Employee Leaves” under the employee tab.

To submit forms: Catastrophic Illness Program Department of Human Resources One S. Van Ness Street, 4th Floor San Francisco, CA 94103 (415) 701-5870