LF041002-06

RESOLUTION AMENDING THE SHORT TERM DISABILITY PLAN

WHEREAS the City of Rapid City established a Short Term Disability Plan the 20^{th} day of October, 1986; and

WHEREAS the Plan has been revised through Union negotiations and revisions to the Non-union Personnel Policy;

NOW, THEREFORE, BE IT RESOLVED by the City of Rapid City that the City of Rapid City hereby revised the Plan as hereto attached, effective January 1, 2002.

Dated this	day of	, 2002.		
		THE COUNCIL		
		Mayor		
ATTEST:				
Finance Officer				
(SEAL)				

CITY OF RAPID CITY SHORT-TERM DISABILITY PLAN

The following explanation is a description of the Short-Term Disability Plan benefit provided to eligible employees of the City of Rapid City. The Plan is administered under the language established by the employee's Union Contract or Non-Union Personnel Policy and in conjunction with this resolution.

Eligibility: All employees of the City of Rapid City who are participating members of the South Dakota Retirement System. Regular, part-time employees who are eligible for benefits under the agreement shall receive Short-Term Disability benefits pro-rated on the employee's normal schedule as compared to 2080 hours, consistent with the schedule applicable to the employee's length of service. Benefits commence if the employee has exhausted all but 40 hours or less of the employee's available general Sick Leave A balance. Please note that AFSCME and Non-Union employees must be off work for 3 consecutive working days prior to receiving the Short Term Disability Benefit and that time will be charged to Sick A, Vacation or Leave Without Pay.

Disability: An employee who is, as defined in the employee's Union Contract or Non-union Personnel Policy, unable to perform the essential functions of his/her work assignment due to bodily injury or sickness in the opinion of his/her medical examiner.

Employee's Responsibility: It shall be the responsibility of each employee to inform the employee's supervisor of the status of the employee's injury/illness prior to each payroll period. A Verification of Disability Form must be completed and returned to the Payroll Specialist prior to the applicable payroll period. Said notice must be in writing, signed by the attending physician and in addition, must include the time from specified date to specified date in which the employee will be absent. If the employee fails to notify the Payroll Specialist of the status during the payroll period, pay adjustments will be made when the proper paperwork is received.

Dispute Resolution: In case of a dispute between the employee and the City regarding any conditions of disability, a review of the case will be conducted in the following manner:

- 1. The City may request that a copy of the findings of the medical examiner chosen by the employee be furnished to a medical examiner chosen by the City for verification. If the findings are verified by the City medical examiner, no further review shall be conducted.
- 2. In the event the findings of the medical examiner employed by the employee do not agree with the findings of the medical examiner employed by the City, the City will at the written request of the employee ask that the two medical examiners agree upon and appoint a third qualified and impartial medical examiner for the purpose of making a physical examination of the employee.
- 3. Such three doctors, one representing the City, one representing the employee, and one impartial doctor approved by the employee's doctor and the City's doctor, shall constitute a board of three, a majority vote of which shall decide the issue.
- 4. The expense of the employment of the third medical examiner shall be borne one-half by the employee and one-half by the City.

Length of Absence: All absences shall be considered as a single period of disability unless acceptable evidence is furnished that the cause of the latest disability cannot be connected with the causes of any of the prior disabilities.

If an employee is off more than once because of the same illness, the periods of disability will count toward the maximum period of benefits. However, if an employee has returned and worked for a full year, the period of disability will be treated as a new illness or disability.

CITY OF RAPID CITY SHORT-TERM DISABILITY PLAN

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SCHEDULE OF CONTINUING BENEFITS UNDER SHORT-TERM DISABILITY PLAN

100% Salary Continuation -	Maximum Hours Paid					
Years of Service completed based on the employee's most recent hire date.	40 hr/wk	56 hr/wk				
90 days – 3 years	80	120				
3 years – 4 years	240	360				
5 years – 6 years	440	660				
7 years – 8 years	640	960				
9 years – 10 years	840	1260				
More than 10 years	1040	-0-				

Years of Service completed based on the employee's most recent hire date	40 hr/wk	56 hr/wk				
90 days – 3 years	160	240				
3 years – 4 years	800	1200				
5 years – 6 years	600	900				
7 years – 8 years	400	600				
9 years – 10 years	200	300				
More than 10 years	-0-	-0-				

Established October 20, 1986 and revised _____ March, 2002.