Agenda

- HR Division Updates
- HR Staff Updates
- OEO – Changes to UNMJobs Report
- Job End Date Project
- New Term Extension EPAFs
- Benefits Update
- “Walk Out of Work Wednesday”
- SRS – Workers Comp Process
HR Division
Updates

LaTrenia McDaniel
Strategic Support Manager
HR Staff Updates

LaTrenia McDaniel
Strategic Support Manager
Welcome

- Herman Rodriguez
  - Benefits Data Manager
- Kristin Simmons
  - Staff Recruitment Specialist
Congratulations

• Debi Garcia
  • Sr. HR Transaction Center Rep
  • Leading the Main Campus SSC
EEO Reports
UNMJobs

Heather Cowan
Compliance Manager
Regulatory Updates

- Executive Order 11246
- VEVRAA
- Section 503 of the Rehabilitation Act of the ADA
Applicant Demographics

- Have long collected gender and race/ethnicity data on job applicants
- Now collecting disability and veteran status data
EEO Reports

- Only *aggregate* demographic data on applicants
  - Use to assess outreach and recruitment efforts
  - Did you get a diverse pool?
- Demographic data will be only be visible for *Finalists*
EEO Reports

● Exceptions for the following user roles:
  - EMPLOYMENT AREAS
  - OEO
  - SEARCH COORDINATORS
    ● To share with hiring official and search committee only
    ● For “second look”
Questions?

Office of Equal Opportunity
505-277-5251
oeounm@unm.edu
http://www.unm.edu/~oeounm
Job End Date
Project

Jack Srouji
HR Consulting Group Manager
Term Appointments

- Effective March 12, 2015, there will be no job end dates loaded in Banner. For Exempt employees, the hard end dates will be on Default Earnings which will ensure the employee does not get overpaid. Non Exempt employees will not have end dates on the default earnings because of positive time entry.

- All job end dates in Banner will be removed behind the scenes and no action is required from departments. Contract Begin and Contract End Dates will be populated in Banner. Additionally, the Default Earnings will be populated behind the scene for all Exempt employees.

- Regardless if the job is extended past 6/30/2015, it will load in Salary Planner. Therefore, departments could work on the job and the position at the same time.

- Departments no longer have to call in to remove future dated records in order to process EPAFs.

- Term Extension EPAFks will be updated to capture enhancements.

- Email notifications and reports will remain the same.
### Employee Job Inquiry Form

**Position:** 00  
**Suffix:**  
**Begin Date:** 01-JUL-2013  
**End Date:**  
**Job Type:** Primary  

### Effective Date

<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Job Status</th>
<th>Description</th>
<th>Employee Class</th>
<th>Pay Class</th>
<th>COA</th>
<th>Organization</th>
<th>Job Change Reason</th>
<th>Employer</th>
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<tr>
<td>01-JAN-2015</td>
<td>Active</td>
<td>HS/Associate Scientist 1</td>
<td>SE</td>
<td>5R</td>
<td>U</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Notes

- **No Hard End Date**
No Hard End Date

Probationary Data

Probationary Period:
Probationary Begin Date: 01-JUL-2013
Probationary End Date: 12-AUG-2013

Contract Information

Start Date: 01-JUL-2013
End Date: 30-JUN-2015

Salary Encumbrance

Total Encumbrance Hours: 27,333.28

Fringe Encumbrance

Current Fiscal Year: 0.00
Future Years: 0.00
Total Encumbrance: 0.00
<table>
<thead>
<tr>
<th>Effective Date</th>
<th>Earnings Code</th>
<th>Hours or Units</th>
<th>Deemed</th>
<th>Special Rate</th>
<th>Shift</th>
<th>Ended as of Date</th>
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<tbody>
<tr>
<td>01-JUL-2014</td>
<td>Regular Base Pay</td>
<td>173.33</td>
<td></td>
<td></td>
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<td>01-JUL-2015</td>
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</table>

*End date on Default Earnings is one day after the term end date*
Term Extension
EPAFs

Jack Srouji
HR Consulting Group Manager
Contact/Questions

Jack Srouji
HR Consulting Manager
Phone: 277-5805
Email: jsrouji@unm.edu
Benefits Updates
March 2015
Updates from UNM Benefits

- Open Enrollment
- UNM Dependent Verification Audit
- LWOP Benefits (Refresher)
Open Enrollment

- Tentative dates for Open Enrollment: Wednesday, April 29 – Wednesday, May 13, 2015

- As Open Enrollment information becomes available, it will be announced via: HR Newsletter, a home mailing, HR/Benefits email, and future HRPI meetings.

- Employee are reminded to start looking at their current enrollment for this once-a-year opportunity to make changes to their benefits.
UNM is partnering with Aon Hewitt Dependent Verification Services to verify eligibility for dependents enrolled in the UNM Medical Plan.

As a public employer, this is a fiscally responsible administration activity. Studies indicate that 5% - 15% of dependents on employer plans no longer meet the eligibility requirements.

AON Hewitt communications will be mailed to employees’ homes starting in April. Employees may call the 1-800 number to ask questions about the process and seek assistance in Spanish or other languages.

All benefits-eligible employees will be asked to take an active role in the verification process by providing documents to AON to validate the eligibility of their covered dependents.

Best information resource is to call the AON 1-800 number or visit the AON website provided in the AON Hewitt home mailing.
LWOP Benefits (Refresher)

- Benefits-eligible employees on Leave WithOut Pay (LWOP) enrolled in UNM benefits will see their benefits continue, and they will be billed via the UNM Bursar’s office for their portion of the monthly premiums owed. UNM continues to pay the Employer portion.

- Employees on LWOP may prospectively cancel UNM benefits while on LWOP, cancelling coverage online via LoboWeb online. Please encourage employees with benefit questions to call HR Benefits at 277-MyHR(6947).

- University Administrative Policy 3600, Eligibility for Employee, Retiree, and Dependent Benefit Plans, section 6 covers employee benefit options while on LWOP. Includes cancelling and 31 day re-enrollment benefit period upon return from LWOP.
Questions?

Contact:

UNM Human Resources Benefits Office
Phone: 505-277-MyHR(6947)
Email: HRBenefits@unm.edu
Benefit Website: http://hr.unm.edu/
“Walk Out of Work Wednesday”

Vanessa Roybal
Health Education Support Coordinator
Walk Out of Work Wednesday
April 1, 2015

- Employee Health Promotion and Healthy U Wellness Committee sponsored walking groups
- Walking coordinators/Volunteers Needed
- Various locations and times around campus
- Stickers for participants that take part in a volunteer-led walk
- EHP will promote on social media
Questions?

Contact:
Employee Health Promotion
Phone: 505-272-4460
Email: ehp@unm.edu
ACCIDENT REPORTING TRAINING

Miguel Delgado
Claim Specialist
Safety and Risk Services
Purpose of the Training

To educate management, supervisors, and employees of the proper policies and procedures to follow in regards to work-related accidents.
WHY IS IT IMPORTANT TO PROPERLY REPORT WORK-RELATED ACCIDENTS?
1- It’s the Law

New Mexico Workers’ Compensation Administration – We can be fined for not correctly reporting Work-Related Accidents.
2 - To Protect the Injured Worker

Properly reporting Work-Related Accidents protects the Injured Worker and preserves their rights under the New Mexico Workers’ Compensation Act.
3 - To Ensure a Smooth Workers’ Compensation Process
REPORTING PROCEDURES

1. All work-related accidents and/or illnesses must be reported to the employee’s immediate supervisor. (UNM Administrative Policy 3630 4.1)

Example: I am walking back to my office from the bathroom when I slip on a banana peel and fall down. I’m a little bit embarrassed, but I think I’m okay.

WHAT SHOULD I DO?

Should I tell anyone?
Should I just wait to see how I feel tomorrow or how I feel in a few days?

- I should report the incident to my immediate supervisor.
- Make it a point to remind Employees of this requirement.
SO WHERE DO WE GO NEXT?

There are **TWO** possible actions to take once the employee has notified their supervisor of a work-related accident or illness.

**WHY IS THAT?**
Because you have **TWO** types of incidents

**INCIDENT TYPE #1** – No formal medical treatment is needed or planned.
**INCIDENT TYPE #2** – Formal medical treatment is needed or planned.
2. All work-related accidents NOT requiring formal Medical Treatment are to be documented by having the employee complete a Notice of Accident Form as soon as possible, but no later than fifteen (15) days after the injury occurs.

(UNM Administrative Policy 3630 4.1.1)

• What is the formal method of reporting incidents not requiring formal Medical Treatment?

• **NOA Form – Notice of Accident**

• By law, NOA forms have to be posted in a prominent location in each place of employment.
NOTICE OF ACCIDENT OR OCCUPATIONAL DISEASE DISABLED
NOTIFICACION DE ACCIDENTE O ENFERMEDAD DE OFICIO

In accordance with New Mexico law, Section 52-1-29, Section 52-3-19 and Section 52-1-49, NMSA 1978; NMAC 11.4.4.11

Contrario a la Ley de la compensación de los Trabajadores, Sección 52-1-29, Sección 52-3-19 y Sección 52-1-49, NMSA 1978; NMAC 11.4.4.11

I, ____________________________ (name of employer/hombre del empleado)

was involved in an on-the-job accident or was disabled
me lastimé en un accidente en el trabajo o fui incapacitado

by an occupational disease at approximately _________, on _________, 20____
por enfermedad de oficio aproximadamente (mesa la hora) al (fecha) del 20____

Employer’s social security number: ____________
Número de seguro social del empleado: ____________

Where did the accident occur?
¿Dónde ocurrió el accidente?

What happened?
¿Qué ocurrió?

To be completed by Employer:

Worker will choose health care provider. Yes ___ No ___
Trabajador elegirá proveedor de atención médica.

If Yes, Employer has right to change health care provider after 60 days.
En caso afirmativo, el proveedor de atención médica puede ser cambiado después de 60 días.

If No, Worker has the right to change health care provider after 60 days.
En caso que no esté, el trabajador tiene derecho a cambiar de proveedor de atención médica después de 60 días.

INICIALES DEL TRABAJADOR

Worker —
For emergency medical care, go to any emergency medical facility.

Workers and Employers with questions about workers’ compensation may contact an Ombudsman at any New Mexico Workers’ Compensation Administration office for information and assistance. The offices are open Monday through Friday, 8 a.m. to 5 p.m., except holidays.

Trabajador
Para emergencias médicas vaya a cualquier clínica / hospital.

Trabajadores y empleadores con preguntas acerca de la compensación de los trabajadores pueden comunicarse con un asesor ("ombudsman") a cualquier oficina de la Administración de la Compensación de los Trabajadores para información y asistencia. Las oficinas están abiertas desde las ocho de la mañana hasta las cinco de la tarde de lunes a viernes, con la excepción de días festivos.

Statewide Helpline — Línea de Asistencia

1-866-WORKCOMP / 1-866-967-5667
toll free — llamada sin costo de larga distancia

New Mexico Workers’ Compensation Administration
PO Box 27198, Albuquerque, NM 87125

Employer/employee: Each keep one copy.
Empleador/empleado: Retener una copia.

Form NOA.1.W (4/12)
- Both the Injured Worker and the Supervisor/University Representative must sign and date the form.
- The employee should receive a copy of the form once signed by the Supervisor.
- The form should be sent to Safety & Risk Services.
- The main purpose of the NOA is to preserve the rights of an injured worker under the NM Workers’ Compensation Act.
- Completed NOA forms are sent to State of NM Risk Management Division so the incident/potential injury is documented.
Example #1 – Mike is lifting a heavy box of paper and feels a slight strain in his back. He thinks he is okay and decides to not mention it to anyone. About a month later, he notices that his back just hasn’t felt right. He remembers how he tweaked it about a month before when moving a box of paper. He goes to his doctor and finds out that he has a herniated disc that is pressing on a nerve. He then reports this to his supervisor.

Example #2 – Mike is lifting a heavy box of paper and feels a slight strain in his back. He thinks he is okay but decides to report the incident to his supervisor. His supervisor has him complete a Notice of Accident Form and submits the form to SRS. About a month later, he notices that his back just hasn’t felt right. He remembers how he tweaked it about a month before when moving a box of paper. He goes to the doctor and finds out that he has a herniated disc that is pressing on a nerve. He then reports this to his supervisor.
3. All work-related accidents requiring formal Medical Treatment need to be reported to the Department of Safety & Risk Services within 24 hours from the time the employee’s supervisor was informed of the incident. (UNM Administrative Policy 3630 4.1)

- What is the formal method of reporting those incidents?
- E1.1- First Report of Accident Form
<table>
<thead>
<tr>
<th><strong>Name of Employee</strong></th>
<th><strong>Department Name</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Name Last</td>
<td>2. Middle</td>
</tr>
<tr>
<td>3. Name First</td>
<td>4. Social Security #</td>
</tr>
<tr>
<td>5. Employee Work Phone #</td>
<td>6. Employee Home Phone #</td>
</tr>
<tr>
<td>7. Date of Birth</td>
<td>8. Age</td>
</tr>
<tr>
<td></td>
<td>Married, Single/Divorced, Separated, Unknown</td>
</tr>
<tr>
<td>11. City or Town</td>
<td>12. State</td>
</tr>
<tr>
<td>15. Time of injury</td>
<td>16. Was injured in full for this day?</td>
</tr>
<tr>
<td></td>
<td>YES, NO</td>
</tr>
<tr>
<td>17. Date employee returned to work</td>
<td>18. Date of death</td>
</tr>
</tbody>
</table>

**Describe in detail how the injury/illness occurred and what the employee was doing when the injury/illness occurred.**

**Identify objects/substances which directly injured the employee (e.g., machine, vapor, poison, radiation, chemical, etc.).**

**Describe the nature of the injury or disease in detail and indicate the part of the body affected (e.g., impalement, broken bone, infection, etc.).**

**Name, address and phone number of witness(es).**

**Name & address of physician treating injury/illness.**

**Name & address of hospital or facility where treated.**

**Mailstop Code: IMC07 4100**
KEY ITEMS TO REMEMBER ABOUT E1.1 FIRST REPORT OF ACCIDENT FORMS

- Form must be signed by both the Employee and Supervisor.
- Please have the Employee use their actual SSN#.
- Please indicate where Medical Treatment was sought or will be sought.
- If the Supervisor believes the claim may be a false claim, please still complete the E1.1 Form and then notify SRS directly of your concerns. We are required by law to file Workers’ Compensation claims even if we have doubts about the legitimacy of the claim. SRS will pass any concerns/evidence along to the insurance company.
1. All Work-Related Accidents and/or Illnesses must be reported to the employee’s immediate supervisor.
2. For accidents not requiring formal Medical Treatment, please have the employee complete a Notice of Accident Form.
3. For accidents requiring formal Medical Treatment, please have the employee complete a E1.1 First Report of Accident Form.
THE BIGGEST MISTAKES

1. Failure to complete required forms in a timely manner.
2. Incomplete forms/missing information.
3. Failure to notify SRS and Payroll if an employee has missed five (5) or more scheduled days of work due to a work-related injury. (UNM 3630 4.3) **If more than 7 calendar days are missed, then it becomes a LOST TIME claim.**
4. Failure to reach out to SRS and ask questions if unsure about the Workers’ Compensation Process.
KEEP CALM AND ANY QUESTIONS?
Contact/Questions

Miguel Delgado
Claim Specialist
Safety and Risk Services
Phone: 277-0312
Email: mdelgado1@unm.edu