



County of San Bernardino SHORT-TERM DISABILITY (STD)

The County provides Short-Term Disability (STD) benefits to employees in the event of a non-work related illness or injury that requires the employee to be off work more than seven consecutive calendar days. STD benefits provide partial income replacement while the employee is off work. These benefits may be integrated with the employee's available leave hours.

REFERENCES

Current County Memoranda of Understanding (MOU); Exempt Compensation Plan; Employee Benefits Guide; Certificate of Insurance.

FORMS REQUIRED

[Leave Integration Request](#)
[Leave Request for Extended Sick or Special Leave](#)
[Job Action Request \(JAR\)](#) (upon employee returning from leave)

MANDATORY FIELDS

All
All
All

GENERAL INFORMATION

Refer to the [STD and FMLA Filing a Request Instructions](#) for instructions. Short-Term Disability payments will be paid directly to the employee from Standard Insurance Company (The Standard), subject to provider's approval.

PAYROLL SPECIALIST RESPONSIBILITIES

- ◆ Provide the [STD and FMLA Filing a Request Instructions](#) packet which contains The Standard FAQ sheet, Leave Request for Extended Sick or Special Leave, and Leave Integration forms to employee upon request
- ◆ Request employee to call The Standard at (844) 239-3560 as soon as 30 days prior to the date of the absence but no later than the 4th day of absence (employee's family member, Supervisor or Payroll Specialist may call on behalf of the employee)
- ◆ Audit the [Leave Request for Extended Sick or Special Leave](#) and the [Leave Integration Request](#) for completeness
- ◆ Retain copies for department file
- ◆ Forward originals to EBSD-Leaves Team (0440)
- ◆ Complete a [Job Action Request \(JAR\)](#) indicating employee is returning from STD, retain copy for department file and submit to EBSD-Leaves Team (0440) when employee returns from leave

DEADLINES

Refer to [Master Calendar](#) for EMACS Processing

RELATED FORMS

[Extended Leave - checklist](#)
[Return from Leave \(after employee returns to work from a paid leave of absence\) - checklist](#)
[Return from Leave \(With Right - Without Right - Medical Leave of Absence\) - checklist](#)
[Leave Request for Extended Sick or Special Leave](#)
[Job Action Request \(JAR\)](#)
[STD and FMLA Filing a Request Instructions](#) packet