

Employee Instructions and Information for completing the Salary Continuation / OIL Appeal Form

If a request for Salary Continuation (SC) or Occupational Injury Leave (OIL) benefits are denied, the employee may appeal the denial by completing the Salary Continuation / OIL Appeal Form, as the employee **does not** have rights under the grievance procedure.

SC / OIL benefits will end with the denial of the claim and the employee will not be eligible for benefits during the appeal process.

The employee must have this appeal form postmarked within **20 calendar days** from the date of the denial letter and submitted to the Office of Collective Bargaining, attaching additional information to support the appeal.

Part I – Employee Information

Complete all sections in their entirety

- Your name, State of Ohio User ID and home/ mailing address
- The agency and institution/location where you work
- BWC claim number – The claim # assigned by the Ohio Bureau of Workers' Compensation
- Reason for appeal – Be as detailed as possible giving your reason to appeal the decision
- **Additional information must be attached or the appeal will not be addressed**
- Appeal form and supporting documents must be postmarked within 20 days of postmarked denial for appeal to be addressed.
- Due to the sensitive nature of the information provided as supportive documentation, this form and its attachments cannot be faxed or emailed.

DAS Benefits will conduct an initial review of the appeal. If the SC /OIL was denied on procedural issues or the employee failed to provide any new information to support the appeal, DAS Benefits shall issue a letter to the employee denying the appeal and send a copy of the letter, the SC /OIL application and supporting documents to the Union Central Office. DAS Benefits may also grant the claim upon further review.

If the Union determines that further review is necessary, they will submit the request to OCB for a panel to be convened to review the claim within 10 days of receiving documents from DAS Benefits.

The panel will consist of 3 members, a representative of an agency which is not the employing agency and who regularly works with SC /OIL, a Union representative not employed by the employing agency, and a representative or designee of SERB. OCB and Union representatives may attend but will not be voting members of the panel. The panel will complete a file review of the claim and any information provided by the employee and make a determination to uphold or overturn the denial. The panel will issue the decision immediately or within 3 days if further investigation is necessary. The panel's decision will be in writing and will be final. The employee or the employer will be involved in the panel.

If the employee accepts Workers' Compensation temporary total compensation (TT) during the appeal process, he/she may continue to submit extension paperwork. If the employee's appeal is upheld, SC/OIL benefits will be awarded and the agency will work with the employee to repay any Workers' Compensation TT benefits that were awarded.



Salary Continuation / OIL Appeal Form

Part I – Employee Information (completed by employee)

An employee has 20 calendar days from the date the initial denial letter is postmarked to file an appeal

Employee Name:

State of Ohio User ID:

Home Address:

Agency / Location:

BWC Claim #:

Date Denial Received:

Additional information attached? ___ Yes ___ No

Reason for Filing Appeal:

Additional information must be attached or the appeal will not be addressed.

Attention: I acknowledge that employees, whether bargaining unit or exempt, are responsible for adhering to the contract or policy that governs them and that lack of knowledge of the requirements to receive benefits is not sufficient reason to reverse the denial of a benefit.

Employee Signature:

Date:

***** Appeal form and supporting documents must be sent to the Office of Collective Bargaining ***
1602 West Broad Street. Columbus, OH 43223**

Part II – Union Information (completed by the employee’s Union)**DAS must render a decision within 10 days and send to the Union’s Central Office.****The Union must appeal to OCB within 10 days of receiving documents from DAS Benefits**

Appeal to OCB for panel review: (circle) Yes No

Date Received:

Comments / Rationale:

Signature:

Date: