



**WORK
LIFE PROGRAM**

EMERGENCY PAGER PROGRAM

The Emergency Pager Program aids employees in meeting work responsibilities during critical family situations. Employees may apply for the short-term use of available pagers during the period of their expected child birth or to care for family members during critical medical conditions. The Program is offered without charge to eligible Merit System employees.* Employees may apply for the use of pagers for a period of up to thirty (30) calendar days. This period may be extended when medically necessary.

ELIGIBLE EMPLOYEES:

Merit System employees are eligible for the Emergency Pager Program free of charge when pagers are needed for eligible events.

* Contract employees may take advantage of a separate pager referral service that provides short-term leasing options at a discount. Contract employees are responsible for the cost of pagers through the referral service. Contract employees should contact the Department of Human Resources for more information.

ELIGIBLE EVENTS:

Child Birth: The use of pagers shall be approved for the thirty (30) calendar day period immediately prior to the expected date of delivery. This period may be extended when pregnancy or childbirth related medical complications exist.

Critical Medical Conditions: In cases involving a serious or critical medical condition of an employee's eligible dependent, the use of pagers may be approved during the period of illness in increments of up to thirty (30) calendar days. Use of pagers for periods longer than 30 days may be granted when medically necessary.

ELIGIBLE FAMILY MEMBERS:

An employee may qualify for the use of pagers in connection with the care of his/her spouse, child or parent.

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RESPONSIBILITIES AND AUTHORIZED USE OF PAGERS:

Employees are responsible for initiating request for use of pagers and furnishing, at their own expense, medical certification documenting the situation for which the pager is being requested.

Pagers are authorized for use by eligible employees only. Pagers may not be carried by any person other than the authorized employee. Unauthorized use will result in suspension of pager privileges. The employee is responsible for the replacement cost of the pager if it is lost or damaged during his/her use.

PROCEDURES:

The Emergency Pager Program will be administered through the Department of Human Resources and Management.

1. Employee initiates request using the attached "Application for Emergency Pagers." Medical certification documenting the eligible event and eligible family member must accompany the application. The employee should send completed application and medical certification to the attention of: Emergency Pager Program, Office of the Executive Director.
2. The Executive Director, or his/her designee, shall review all requests for emergency pagers. Employees will be notified in writing whether their request has been approved or denied. In all cases, the Executive Director's decision shall be final and is not grievable.

**APPLICATION FOR
EMERGENCY PAGER PROGRAM**

Conditions for Application

1. Pagers are intended for use by Merit System employees who are not in leave status. Pagers may be granted for expected child birth and critical medical conditions of an employee's spouse or parent. (See administrative procedures).

Contract employees, eligible for pagers under the referral service, should not complete this application. Information on the available referral service and current discount pager rates are available through the Department of Human Resources.

2. Employees are responsible for initiating requests for use of pagers and furnishing, at their own expense, medical certification documenting the reason for which the pager is being requested. Pagers shall be authorized for use by eligible employees only. Pagers may not be carried by any person other than the authorized employee. Unauthorized use will result in suspension of pager privileges. Employees are responsible for the replacement cost of pagers which are lost or damaged during use.
3. Pagers may be granted for eligible events when medically necessary. Pagers are granted for up to thirty (30) calendar days. This period may be extended with medical documentation.

EMPLOYEE:

Name: _____

Work Location/Department: _____

Work Phone: _____

I request the use of an emergency pager for a period of _____ days for the following eligible event.
(Check One)

_____ expected birth of my child; or

_____ critical medical condition of my: _____ spouse _____ parent _____ child

I have attached written verification from a licensed physician documenting the medical condition related to the above event.

Signature: _____ **Date:** _____

(forward to the attention of: Emergency Pager Program, Office of the Executive Director, KOB)

EXECUTIVE DIRECTOR:

Approve Employee's Request

Deny Employee's Request

Comment(s) _____

Signature _____ **Date:** _____