

INFORMATION FOR EMPLOYEES BEING LAID OFF SUPERVISORY UNIT (SU)

In anticipation of questions you may have as you face layoff, the following information is provided. If you have other questions or concerns, please refer to the appropriate contact listed on the last page.

GENERAL INFORMATION

Upon layoff, your name will be placed on the layoff list for your current department, job class, location, position status (*i.e., full-time, part-time, seasonal*), and bargaining unit. You may expand your layoff recall rights to other departments, locations, position status types, and up to two other job classifications within your job class series at a level lower than the job class from which laid off. To do so, you must complete and submit a **“Conditions of Employment Upon Return From Layoff” form**. When filling out this form, be sure the conditions you indicate are truly acceptable to you. Refusing a recall offer consistent with the conditions you have selected will result in the loss of your layoff rights. You may change these conditions at any time during your period of layoff by submitting a new form. Please allow five (5) working days following receipt for processing by the Division of Personnel & Labor Relations.

Your layoff period extends for three years from the date of layoff.

You have layoff rights during the entire layoff period, **unless**:

1. You resign from state service;
2. You are appointed to a job class at the same or higher salary range than the job class from which you were laid off regardless of whether the job class is fulltime, seasonal, or part-time;
3. You fail to accept a recall offer consistent with your designated conditions of availability for recall;
4. You have been in layoff status for three (3) years;
5. You fail to respond to a written recall notice within the required time limits specified below. Time limits shall be applied from the date the inquiry is sent provided that the last day for the receipt of the response shall be on a work day;
 - a. Fourteen (14) calendar days when the employee resides outside Alaska; or
 - b. Ten (10) calendar days when the employee resides within Alaska;
7. You fail to advise the Division of Personnel & Labor Relations in writing of your current mailing address. For this purpose, the return of a recall letter by the postal authorities, if properly addressed to the last address on record, shall be deemed sufficient grounds for removal.

If you are not recalled to employment with the state before the expiration of the three-year (3) layoff period, you will be considered to have terminated without prejudice.

PERS/SBS/DEFERRED COMPENSATION

Any contributions you have in the Public Employees Retirement System (PERS), Supplemental Benefits System Annuity Plan (SBS-AP), and the Deferred Compensation Plan will remain on account unless you take action to withdraw funds or collect a benefit. Prior to making the decision to withdraw funds or collect a benefit, you are strongly encouraged to consult with a Retirement & Benefits Counselor to ensure you understand the impact of your decision. You

may schedule an appointment with a Retirement & Benefits Counselor by calling (907) 465-4460.

LEAVE

At layoff you will receive a lump sum payment for your accrued personal leave balance.

HEALTH INSURANCE

Normally, group health insurance coverage will end on the last day of the month in which you are in pay status; however, SU members are entitled to receive an additional thirty (30) calendar days of coverage, commencing with the first day of layoff status. Your monthly contribution, if any, may need to be paid in order to continue coverage.

Contact Retirement and Benefits for Health Insurance continuation information.

Supplemental Benefits Optional Benefits (SBS): Coverage for options you've selected remains in effect through the last day of the month in which you are last in pay status.

When you return to work for the state in any position, your SBS Optional Benefits status should be confirmed with the SBS program by calling (907) 465-4460.

LIFE INSURANCE

The Basic Life Insurance portion of the Group Health/Life Plan is not included as part of the health insurance continuation plan. To continue Basic Life Insurance coverage, you must contact the Division of Retirement & Benefits to convert from a group to a single policy.

Optional Life Insurance participation may be continued if you are a current participant. To obtain the current rate and conversion information, contact the Division of Retirement & Benefits.

You may combine the premiums for both the Basic and Optional Life Insurance in a single payment.

UNEMPLOYMENT INSURANCE (UI) BENEFITS

While laid off, you may be eligible for Unemployment Insurance (UI) benefits. For information about UI benefits, consult the Department of Labor and Workforce Development, Unemployment Insurance Program resources at

http://www.labor.state.ak.us/esd_unemployment_insurance/home.htm

To file a UI claim, log on to **myAlaska.com** and click on "Unemployment Insurance Benefits". For employment assistance or to register and look for work, please visit **jobs.alaska.gov** or call 877-724-2539.

CONTACT INFORMATION

Specific questions related to your conditions of recall should be addressed to Recruitment Services in the Division of Personnel & Labor Relations at (907) 465-2498 or (907) 465-4789.

Specific questions related to your payroll activity connected to layoff should be addressed to the Payroll Services Section in the Division of Personnel & Labor Relations, at (907) 465-4056.

Specific questions related to your health insurance continuation options, Basic and/or Optional Life Insurance, SBS, PERS, Deferred Compensation, Health Care

Reimbursement Account, or Dependent Care accounts should be addressed to the Division of Retirement and Benefits at (907) 465-4460.

If you have questions that do not fall within the categories shown above you may contact your department's Human Resource Consultant.