

HRO FAQs (v. 2020.3.20 c)

COVID-19 Human Resource Planning

The State of Tennessee agencies have developed Continuity of Operations Plans (COOP) to maintain service to our customers, while also caring for the health and safety of our employees. Although the State has informed employees to work from home, we have an agile workforce that can leverage critical resources and strategies that will enable us to maintain essential business processes and services.

These frequently asked questions (FAQs) have been developed to help address the impact COVID-19 may have on the State's workforce. They are designed to help leadership, management, human resources directors, and state employees navigate topics related to human resources including working from home and leave.

Consideration was given to potential impacts to critical functions and how they could continue to be performed by working from home when possible. The State will monitor these plans and will provide further guidance as needed.

BACKGROUND INFORMATION ON COVID-19

Coronaviruses are a large family of viruses that are common in humans and many different species of animals. The virus that causes COVID-19 is spreading in numerous countries, including the United States.

COVID-19 is a new disease and the U.S. Centers for Disease Control (CDC) is still learning the severity of the illness, how the virus spreads, to what extent it may spread in the United States, and the potential short-term and long-term impact on those in the United States. Currently, the virus is thought to spread mainly from person-to-person:

- Between people who are in close contact with one another (within about 6 feet).
- Through respiratory droplets produced when an infected person coughs or sneezes.
- These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

Although people are thought to be the most contagious when they are symptomatic (showing symptoms), they may also be contagious when they are asymptomatic (showing no symptoms).

- It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

CURRENT RISK IN THE WORKPLACE

The CDC emphasizes that while COVID-19 poses a potentially serious public health threat, the risk to individuals is dependent on exposure. For most people in the United States, including most types of workers, the risk of infection with COVID-19 is currently low.

To help minimize workplace exposure, the State of Tennessee is strongly encouraging employees who are currently able to work from home to do so through March 31, 2020. However, some employees are in vital positions which require their presence at an office, citizens' homes, or in some other interactive

setting to provide direct customer service. For these employees, it is critical to be especially vigilant in doing all we can to keep them healthy.

The CDC advises that the best way to prevent infection is to avoid exposure to germs. There are simple everyday actions that can be taken to help prevent the spread of respiratory viruses:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Wash your hands often with soap and water for at least 20 seconds.
- Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.
- The CDC website continues to be a primary resource for questions regarding COVID-19. [Click here](#) to visit the website.

Agencies may choose to issue specific operational guidance and revised work procedures in response to COVID-19. Employees should be encouraged to consult with their leadership and HR teams about specialized processes and workflow that may be implemented.

SPECIAL GUIDANCE FOR HUMAN RESOURCE TEAMS

COVID-19 is not specific to an ethnicity or race. Racist behaviors or stereotyping are not tolerated. Employees who experience harassment or discrimination are encouraged to contact a human resources representative. To prevent stigma and discrimination in the workplace, do not make determinations of risk regarding COVID-19 based on race or country of origin, and be sure to maintain confidentiality of any people who are confirmed to have COVID-19.

Actively encourage sick employees to stay home. According to the CDC, employees with the following flu-like symptoms should not come to work:

- Fever of 100.4° F or higher (using an oral thermometer);
- Cough or sore throat;
- Headache or body aches;
- Diarrhea or vomiting; or
- Symptoms of acute respiratory illness.

Employees are recommended to stay home and not come to work until they are free of fever (100.4° F or higher using an oral thermometer), signs of a fever, and any other symptoms for at least 24 hours, without the use of fever-reducing or other symptom-altering medicines (e.g. Tylenol, cough suppressants).

COVID-19 EXPOSURE RISK QUESTIONS:

All specific COVID-19 workplace exposure and risk questions should be directed to medical professionals at the Tennessee Department of Health (TDH) to make directive decisions and to offer recommendations and advice. [Click here](#) to visit the TDH website.

As an HRO with specific COVID-19 workplace exposure risk questions regarding employees, you should contact the medical professionals at the Tennessee Department of Health (TDH) for directive decisions, recommendations, and advice. The TDH State Health Operations Center (SHOC) at (615) 741-7247, available until midnight daily. This number is available for workplace clinical and policy related questions. It is not the number for employees or the public to call with general questions.

TDH is operating a separate resource phone line for the public, including State employees, to ask general questions regarding COVID-19. That number is (877) 857-2945.

The CDC website continues to be a primary resource for information about COVID-19. Click here to visit the website.

GUIDELINES RELATED TO DISABILITY-RELATED INQUIRIES

On March 19, 2020, the Equal Employment Opportunity Commission (EEOC) updated its pandemic guidance to address the COVID-19 pandemic. This guidance discusses ADA principles relevant to questions about workplace pandemic planning. The following EEOC guidance focuses on implementing pandemic strategies in a manner consistent with the ADA and current Centers for Disease Control (CDC) and state/local guidance for keeping workplaces safe.

The ADA prohibits an employer from making disability-related inquiries and requiring medical examinations of employees, unless it is job-related and consistent with business necessity. Generally, a disability-related inquiry or medical examination of an employee is job-related and consistent with business necessity when an employer has a reasonable belief, based on objective evidence, that: an employee's ability to perform essential job functions will be impaired by a medical condition; or an employee will pose a direct threat due to a medical condition. A "direct threat" is "a significant risk of substantial harm to the health or safety of the individual or others that cannot be eliminated or reduced by reasonable accommodation." If an individual with a disability poses a direct threat despite reasonable accommodation, he or she is not protected by the nondiscrimination provisions of the ADA. Based on information from the CDC and public health authorities, COVID-19 meets the direct threat standard.

What this means for employers:

- An employer can send home an employee with COVID-19 or symptoms associated with it.
- Employers may ask employees who report feeling ill at work, or who call in sick, questions about their symptoms to determine if they have or may have COVID-19. Currently, these symptoms include, for example, fever, chills, cough, shortness of breath, or sore throat.
- Employers may measure employees' body temperature. As with all medical information, the fact that an employee had a fever or other symptoms would be subject to ADA confidentiality requirements. However, be aware that some people with COVID-19 do not have a fever.
- Follow the advice of the CDC and state/local public health authorities regarding information needed to permit an employee's return to the workplace after traveling to a certain location for business or personal reasons.

- The rapid spread of COVID-19 has disrupted normal work routines and may have resulted in unexpected or increased requests for reasonable accommodation. Although employers and employees should address these requests as soon as possible, the extraordinary circumstances of the COVID-19 pandemic may result in delay in discussing requests and in providing accommodation where warranted. Employers and employees are encouraged to use interim solutions to enable employees to keep working as much as possible.

FAQs on hiring during the COVID-19 pandemic

All specific COVID-19 workplace exposure and risk questions should be directed to medical professionals at the Tennessee Department of Health (TDH) to make directive decisions and to offer recommendations and advice.

- May an employer screen applicants for symptoms of COVID-19?
 - Yes. An employer may screen job applicants for symptoms of COVID-19 after making a conditional job offer, if it does so for all entering employees in the same type of job. This ADA rule allowing post-offer (but not pre-offer) medical inquiries and exams applies to all applicants, regardless of whether the applicant has a disability.
- May an employer take an applicant's temperature as part of a post-offer, pre-employment medical exam?
 - Yes. Any medical exams are permitted after an employer has made a conditional offer of employment. However, employers should be aware that some people with COVID-19 do not have a fever.
- May an employer delay the start date of an applicant who has COVID-19 or symptoms associated with it?
 - Yes. According to current CDC guidance, an individual who has COVID-19 or symptoms associated with it should not be in the workplace. CDC has issued guidance applicable to all workplaces generally, but also has issued more specific guidance for particular types of workplaces (e.g. health care employees). Guidance from public health authorities is likely to change as the COVID-19 pandemic evolves. Therefore, employers should continue to follow the most current information on maintaining workplace safety. To repeat: the ADA does not interfere with employers following recommendations of the CDC or public health authorities, and employers should feel free to do so.
- May an employer withdraw a job offer when it needs the applicant to start immediately but the individual has COVID-19 or symptoms of it?
 - Based on current CDC guidance, this individual cannot safely enter the workplace, and therefore the employer may withdraw the job offer.
- The full EEOC pandemic guidance can be accessed at:
 - https://www.eeoc.gov/facts/pandemic_flu.html

GENERAL QUESTIONS

1. Where can we find the latest updates on COVID-19 in general?

Visit the [Tennessee Dept of Health website](#) or the [Center for Disease Control website](#) for general updates, and for the most recent and accurate information about the virus.

2. How should I direct employees who feel they need to get tested?

Employees should call a healthcare provider, clinic, or hospital. The provider will give them instructions on whether they need to be tested and where to go to for care and testing. If instructed to seek care, they should follow the precautionary advice of the medical provider before going into any health facility.

3. What is the state's approach to use of leave for medically quarantined employees or confirmed COVID-19 cases?

All employees are encouraged to work from home if possible, even if they are not experiencing symptoms. If work from home is not possible and the employee has been diagnosed with COVID-19 or quarantined by a health professional, then paid administrative leave should be granted to that employee for up to ten workdays as recommended by that health professional, with the approval of their appointing authority. For employees who are otherwise ill, sick leave should be used.

4. What actions can agencies take if there is a suspected case or an employee exhibiting symptoms, and the employee isn't pursuing evaluation/testing?

All specific COVID-19 exposure risk questions should be directed to medical professionals at TDH State Health Operations Center (SHOC) at (615) 741-7247 to make directive decisions and offer recommendations and advice. If an employee has been determined by a health official to pose significant health risk to other employees, the first option should be work from home. If this is not possible, the employee may be granted up to ten days paid administrative leave as recommended by that health professional, with approval of their appointing authority.

5. What is the guidance around informing state employees if there has been a positive case in the workplace?

All specific COVID-19 exposure risk questions should be directed to medical professionals at the Tennessee Department of Health (TDH) State Health Operations Center (SHOC) at (615) 741-7247 to make directive decisions and offer recommendations and advice.

During the process it is critical to remember, as with any medical condition, confidentiality around an employee's health should be maintained to comply with federal regulations (FMLA, ADA, HIPAA). Agency and HR leaders may not disclose the identity of the infected employee. You may, however, provide general information (e.g. affected building, floor, or dates of exposure) that an employee has been infected to allow employees to monitor themselves for signs of symptoms. Employees should then be informed of any mitigating strategies that will be employed to ensure the safety of the work area, as well as modifications to their schedule or workplace.

6. Can employees wear a facemask to work?

The CDC does not recommend that people who are well wear a facemask to protect themselves from respiratory diseases, including COVID-19. You should only wear a mask if a healthcare professional recommends it.

WORK FROM HOME

Tennessee has designed Continuity of Operations Plans (COOP) with the goal of maintaining service to our citizens and simultaneously address the health and safety of our employees. We are fortunate to have an agile workforce that can leverage critical resources and strategies that will allow us to maintain essential business processes and customer support without disruption to customer services.

7. Should employees who are able to work remotely, start doing so now?

Employees who can perform their jobs from home are asked to do so. Leaders should work with their employees and teams to review agency COOP plans, practice procedures, and deploy available work tools which enable working from home for as many employees as possible. In the meantime, utilize [TN Dept of Health](#) and [CDC](#) guidance on how to keep the workforce safe.

8. What is the general guidance for state agencies about working from home?

As a temporary measure and as appropriate based on the current circumstances, state employees should work from home whenever practical to maintain business operations and continuity of service. This may require modifications to standard duties or exceptions to typical telework practices. Additionally, agencies are advised to modify (at least temporarily) their AWS policies to allow employees to work remotely at the same time they are caring for a child or other dependent during Governor-declared state of emergency. (i.e. closures due to weather, health or other safety concerns).

9. What should agencies consider regarding technology to allow employees to work from home?

Agencies should consider whether employees will need remote access to important state systems, and whether equipment will be needed for employees to work from home (e.g., laptops, internet connection, system access, VPN, printing capabilities). Contact your STS (Strategic Technology Solutions) representative with questions.

APPROVED LEAVE

10. What is the guidance on granting paid administrative leave?

If the employee has been determined by a health official or medical provider to pose significant risk to other employees, the first option should be work from home. If this is not possible, the employee should be granted up to ten days of paid administrative leave as recommended by the health professional, with the approval of their appointing authority.

11. How is leave addressed for employees who are quarantined for COVID-19? Is it the same for employees who are ordered by health departments versus employees who are “self-quarantined”?

If the employee has been diagnosed with COVID-19 or determined by a health official or medical provider to pose significant risk to other employees, the first option should be work from home. If this is not possible, the employee should be granted five days paid administrative leave. Under guidance from TDH, up to ten days paid leave may be issued. In line with CDC recommendations, we may consider relaxing requirements of medical documentation for COVID-like symptoms. Employees who are self-quarantined must submit a signed attestation that their request is for such symptoms before being granted paid leave.

Employees who are not ill but request to work from home because they are immuno-compromised or have other high-risk factors should be offered that opportunity. If the job is unable to be performed by working from home, the employee should work with their supervisor to minimize the impact their absence would have on the workplace and use their accrued compensatory and annual leave with supervisory approval.

12. If employees are deemed to be essential personnel because they perform a critical function, can we require them to work at their regular location?

Employees whose duties are deemed essential for the continuation of agency business during the emergency declaration, and who are not ill, may be required to work at their regular location. This may include public-facing service providers.

13. If schools or childcare facilities close for an extended period of time, are employees allowed to work from home in order to take care of their children or do they have to take leave?

During the declared state of emergency, the policy will be relaxed to allow employees to work from home at the same time they are caring for a child or other dependent, if the arrangement does not significantly hinder the employees’ effective job performance. See [DOHR Policy 14-001](#), Alternative Workplace Solutions (modified March 13, 2020).

14. Are we going to require employees to submit a medical certification for absences longer than three days, or a fitness to return if they are absent from work due to? Can we waive that requirement?

Consistent with CDC and TDH recommendations, normal agency requirements to provide a doctor’s note to justify an extended absence due to flu-like symptoms have been relaxed if an employee is having difficulty obtaining one from the medical provider, unless the employee is currently required to provide medical verification for all absences. Employees still need to follow normal work unit procedures when calling in sick (including calling in sick each day of absence).

Before returning to work, employees who have tested positive for COVID-19 are required to present a doctor’s note stating they are no longer contagious and are able to return to work. As a practical matter, however, doctors and other health care professionals may be too busy during and immediately after a pandemic outbreak to provide fitness-for-duty documentation. Therefore, agencies are encouraged to look at alternative certifications, such as boilerplate forms from local

clinics, a stamp, or e-mails to certify that an individual is no longer contagious or symptomatic and is safe to return to work.

15. What is the guidance around the use of leave sharing?

Employees who have Sick Leave Bank (SLB) accruals available to donate may do so under the regular program which requires that the receiving employee have used all other accrued leave.

LEAVE SUMMARY

Appointing authorities are given wide latitude to grant paid administrative leave. It is important for HROs to support their leaders in developing a process for making consistent decisions. Below is an example for your consideration.

Health Status	Event	Approach*	Note**
No COVID-19 Symptoms	Employee expresses ‘concern’ about coming to work	1. Current leave policy 2. Accrued Annual and Comp Leave w/ supervisory approval	Essential staff may be required to work.
COVID-19 Symptoms	Illness w/no medical recommendation	1. Accrued Sick Leave 2. Leave Without Pay	
COVID-19 Diagnosis	Medically recommended quarantine (e.g., Dept of Health, medical provider) May also include care for dependent (FMLA definition)	1. Paid Discretionary Leave 2. Accrued Leave a. Sick Leave b. Comp Leave c. Annual Leave 3. Leave Without Pay	Up to 10-day total (based on current 7- to 14-day quarantine guidelines)

*AWS should utilized if possible, regardless of symptom status

**Discretionary leave for reasons related to the employee’s own health is not strictly limited to 10 workdays. For example, if a health professional recommends quarantine for longer than 10 workdays, then the Commissioner of HR can approve a request for more than 10 workdays of paid discretionary leave.

**Discretionary leave should be granted to even a perfectly well employee if that employee is directed by the appointing authority not to report to work because of the outbreak. For example, if the employee’s working hours were reduced or office closed because of COVID-19, then the employee should receive paid discretionary leave for the duration of that period.

MEDICAL AND PHARMACY BENEFITS

16. As we anticipate an increase in medical visits, what is being done to increase telehealth and nurse advice line options for state employees?

The ParTNers for Health website has information about the telehealth and nurse advice line options that are available to employees for both Cigna and BlueCross BlueShield (BCBS) of Tennessee health plans. Click [here](#) to visit ParTNers for Health.

Employees and dependents who are covered by a state health insurance plan should visit their carriers' specific websites for updates and details about the benefits and services provided. Click [here](#) to visit Cigna. Click [here](#) to visit BCBS.

17. Who will pay for COVID-19 tests for people covered by the state benefit plans?

On March 17, the State Group Insurance Program received approval from the State, Local Education and Local Government Insurance Committees to waive member cost-sharing for in-network COVID-19 testing and in-network outpatient visits associated with this test. Members who have questions should call BCBS and Cigna member services:

BlueCross BlueShield of Tennessee
800.558.6213 Monday - Friday, 7 - 5 CT
bcbst.com/members/tn_state/

Cigna
800.997.1617 24/7
cigna.com/stateoftn

The CVS/Caremark Pharmacy Benefit has also been enhanced. Early refill limits are being temporarily waived on 30-day and 90-day prescriptions for maintenance medications (such as high blood pressure, high cholesterol, coronary artery disease, congestive heart failure, depression, and asthma/chronic obstructive pulmonary disease) at any in-network pharmacy. If you have any trouble, tell your pharmacy staff to check for messaging in their system from CVS/Caremark and that your plan sponsor is temporarily allowing early refill overrides. If they have trouble with the override, they should contact the CVS/Caremark pharmacy help desk (your pharmacy has the phone number). Also, some pharmacies are offering to mail or deliver prescriptions at no additional cost.

For more help with **CVS/Caremark Pharmacy Benefits**, visit info.caremark.com/stateoftn or call 877.522.TNRX (8679) 24/7.

WORKERS COMPENSATION

18. If COVID-19 is detected at a State facility or building, how will workers' compensation handle this?

Based on guidance from our vendor, it would depend on whether a causal relationship can be established. The exposure must be determined to be something that is unique to employment. All claims of contracting the virus at work would be investigated to determine whether the virus was transmitted via contact while at work and while performing essential functions of the job. Information to date indicates that individuals may not show any signs of exposure for as many as four days later. This coupled with a long incubation period of up to fourteen days, may make it more difficult for an employee to pinpoint the exposure, which may make it difficult to be approved as a workers' compensation claim.

EMPLOYEE TRAVEL

19. Can employees travel for state business?

Employees should cease all non-essential business travel through March 31, 2020. Essential travel is determined by the Agency Appointing Authority. Non-essential in-person employee meetings and gatherings of 10 or more individuals should be canceled or adjusted through March 31, 2020. To

perform collaborative work, employees should use alternative solutions such as WebEx, Jabber, and conference calls for conducting meetings.

19. Can agencies require employees to report if they have traveled to areas where there is widespread community transmission?

Yes, however all specific COVID-19 exposure risk questions should be directed to medical professionals at the TDH State Health Operations Center (SHOC) at 877-857-2945 to determine the level of risk the employee may pose to the workplace based on the travel location. Based on the level of risk public health may require employees to stay home from work for up to 14 calendar days. If it is possible for the employee to work from home, then consider using this option to protect the health of other employees.

20. Can agencies prevent employees from returning to work if they have traveled to areas where there is widespread community transmission?

Yes, however all specific COVID-19 workplace exposure and risk questions should be directed to medical professionals at the Tennessee Department of Health (TDH) to make directive decisions and to offer recommendations and advice. As an HRO with specific COVID-19 workplace exposure risk questions regarding employees, you should contact the medical professionals at the Tennessee Department of Health (TDH) for directive decisions, recommendations, and advice. The TDH State Health Operations Center (SHOC) at 615-741-7247, available until midnight daily. This number is available for workplace clinical and policy related questions. It is not the number for employees or the public to call with general questions.

TDH will give guidance to determine the level of risk the employee may pose to the workplace based on the travel location. Based on the level of risk public health may require employees to stay home from work for up to 14 days. If it is possible for the employee to work from home, then consider using this option to protect the health of other employees.

For any situations not covered by these guidelines, contact DOHR for specific guidance. Further updates will be provided on an ongoing basis via HR Leadership meetings, email announcements and documents like this. Remember to keep COOP plans updated and any essential employee lists/information updated. If you don't see your HR issue or concern addressed in this document, contact DOHR.Communications@tn.gov.