

## MEDICAL UNIVERSITY OF OHIO

Name of Policy:	Incentive Payments, Productivity Bonus and Supplemental Compensation	Effective Date: August 29, 2005
Issuing Office:	Human Resources	Policy No.: 05-088
Scope:	Medical University of Ohio University Medical Center	Responsible Agent: Vice President for Human Resources

### POLICY

The wages and salaries of all regular union and non-union staff members are intended as full compensation for job activities performed for the Medical University of Ohio at Toledo (MUOT). However, staff may be requested to render clinical, research or administrative services for faculty members to perform duties that are substantially outside the scope or reasonable potential scope of the individual's position. In such instances, the individual may be eligible to receive incentive payments, productivity or other supplemental compensation. Performance of work outside the individual's regular job duties or assigned department is subject to the approval of the employee's immediate supervisor and department administrator or Chairperson. This policy applies primarily to exempt salaried staff, as nonexempt staff receive compensation (either overtime pay or compensatory time off) for additional work performed. However, in certain instances, non-exempt staff may also be eligible for supplemental compensation. Faculty are ineligible for this supplemental compensation.

#### I. Definitions

For the purposes of the policy and guidelines the following definitions apply:

Home department - this is the employee's regularly assigned hospital, clinic or university department.

Incentive payment, productivity bonus and supplemental compensation – this does not include working out of classification pay, overtime pay or market equity wage increases.

#### II. Incentive Payments, Productivity Bonus, and other Supplemental Compensation

Before any services begin, all incentive payments, productivity bonuses and supplemental compensation arrangements must have prior approval. The University has no obligation to pay supplemental compensation for services that are not pre-approved by the persons listed in Section IV.C.

#### III. Eligibility

All non-faculty and non-resident staff members are eligible for this supplemental compensation program.

**PROCEDURE**

- I. Supplemental compensation should not conflict with or reduce effectiveness of the individual's performance of primary job responsibilities.
- II. Supplemental compensation is intended for short-term arrangements, not as an ongoing compensation strategy. For ongoing situations, departments should consider longer-term options, such as securing permanent or temporary staffing for the business need; using staff within the unit who may have the requisite skills; or training available staff members to gain the requisite skills, and incorporating the work into the individual's regular position description. If ongoing, supplemental compensation arrangements should be reviewed at least annually.
- III. Supplemental compensation payments should not exceed 20% of the employee's regular salary over a fiscal year.
- IV. Approvals:
  - A. Faculty or administrators should consult with the Department of Human Resources, prior to requesting a supplemental compensation arrangement with a given employee. The pay increase request form should be utilized by departments requesting such services, accompanied by a memorandum detailing the business or service need.
  - B. When a MUOT employee receives such payments, the following apply:
    - 1. Duties for which payment is to be made must be in writing and be carefully distinguished as being different from those duties performed as the employee's regular public employment (MUOT duties).
    - 2. The requestor must be prepared to support the reasonableness of these supplemental pay duties.
    - 3. All supplemental compensation arrangements must be approved by the Appropriate Dean or Vice President governing both the employee's home department and the department requesting the services. The Office of the Senior Vice President for Finance and Administration must approve all supplemental compensation arrangements before they are implemented.

Approved by:

\_\_\_\_\_  
William G. Logie, Vice President for  
Human Resources

Policies Superseded by this Policy:  
None

Original Effective Date: 08/29/05

Review/Revision Date:

*Review/Revision Completed by:  
Vice President for Human Resources*



**Incentive Payments, Productivity Bonus and  
Supplemental Compensation Approval Form**

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Please refer to Policy 05-088, Incentive Payments, Productivity Bonus and Supplemental Compensation. Contract Human Resources with questions.

Name: \_\_\_\_\_ Employee # \_\_\_\_\_  
 Home Dept: \_\_\_\_\_  
 Dept requesting Supplemental Services: \_\_\_\_\_  
 Description of Service with an explanation of how the services are outside the scope of work performed for the Medical University: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Hours to be spent on supplemental activity:  
 Weekly: \_\_\_\_\_ Total for Fiscal Year: \_\_\_\_\_

Period of supplemental activity:  
 From: \_\_\_\_\_ To: \_\_\_\_\_

Amount of compensation requested: \_\_\_\_\_

I hereby certify that during the course of this supplemental activity, my primary duties and responsibilities will not be adversely affected.

Supervisor/Manager Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Home Dept Chair/Admin. \_\_\_\_\_ Date \_\_\_\_\_  
 Home Dept Dean/V.P. \_\_\_\_\_ Date \_\_\_\_\_  
 Research and Grants: (if payment is from grant funding) \_\_\_\_\_ Date \_\_\_\_\_  
 Budget: (Academic or Hospital Budget depending on funding) \_\_\_\_\_ Date \_\_\_\_\_

**RETURN THIS FORM TO HUMAN RESOURCES**