



UNIVERSITY *of* MARYLAND  
SCHOOL OF MEDICINE

# **Faculty Contingent Category 1 Agreements for Per Diem Clinicians**

**Office of Academic Administration**

# Topics to Cover

- Offer Letter (sample)
- FCC1 Agreement (sample)
- FAIS (sample)
- Appointment Packet Considerations
- Setting Up in HRMS for Payments
- Payment Processing

# Offer Letter

- Includes language that is not in FCC1 agreement
  - Faculty Appointment
  - FPI Non-compete/Non-solicitation/Restrictive Covenant (as applicable)
  - Contingencies (eg Citizenship, Licensure, Credentialing)
  - Conflict of Interest
  - Professionalism
  - Statement re Form I-9 Employment Eligibility Verification
- Title includes “(*Non-Adjunct Faculty*)” for example  
“*Clinical Instructor (Non-Adjunct Faculty)*”
- Term should be consistent with FCC1 Agreement
- Attach draft FCC1 Agreement with draft letter to Dean’s Office
- Describe duties... no hourly rates
- Attach Salary Sheet with salary amount consistent with FCC1 agreement
- Notes:
  - If retiring need to be off payroll for 45 days before rehire
  - If resigning full-time position before re-hire need to terminate for them to get holiday payout

# FCC1 Agreement

- Complete Sections 1, 2, 3, 4 and 6 (can skip Section 5)
- Section 1 – Name, Location, Telework?, Remote?, Visa?
- Section 2 – Term should end on next 6/30/YEAR (NEW!)
- Section 3
  - Job Code - Non-Adjunct (245000)
  - Nature of Services
    - Deliverable Pay
    - Clinical
    - FLSA doesn't apply to per diem clinicians (or teachers)
  - Define rates in terms of shifts or fractions of shifts – no hourly rates – can attach sheet
  - Enter total not to exceed amount for term of contract (allow enough room so it is truly a max)
- Section 4
  - Brief description of deliverables. Could attach offer letter or another sheet
  - Estimate FTE during time period
- Section 6 – Dual Employment

# Faculty Appointment Information Sheet (FAIS)

- *New* FCC1 FAIS
- Set term consistent with FCC1 Agreement Term (through end of next June 30)
- Salary amount should be consistent with FCC1 agreement and add comment “maximum amount based on terms of FCC1 agreement”

# Appointment Packet Considerations

- Follow Guidelines for Part-Time Faculty Less than 50% FTE
- Title consistent throughout (e.g. “Clinical Instructor (non-adjunct faculty)’’)
- Dates consistent with FCC1 agreement
- Salary figures consistent with FCC1 agreement
- Include executed FCC1 agreement

# Setting Up in HRMS for Payments

- Submit ePAF attaching
  - Dean approval letter and FAIS,
  - Fully Executed FCC1 Agreement
  - Salary Sheet
- Employee must complete intake including I-9 within 3 days of effective date – in-person
- A notary can verify I-9 docs at dept level with pre-approval



# Payment for Faculty C1 Deliverable Pay



## Payment for C1 Deliverable Pay

- Payment will not be automatically populated on employee's payline. A Payroll Adjustment Form (PAF) is required for each payment.
  - Forms link: [Payroll Forms - Payroll Services \(umaryland.edu\)](#)
  - Can be paid bi-weekly, monthly, or quarterly
- Refer to the Payroll Calendar at [Calendars - Payroll Services \(umaryland.edu\)](#) for submission due dates



## Payment for C1 Deliverable Pay

- Attach supporting documents:
  - Fully executed Faculty C1 agreement
  - Copy of calculation sheet to justify the amount requested
  - Copy of the Job Data-Compensation page to show the approved maximum amount
- Completed and signed PAFs must be sent to: [DL-BF PAF Help](#)



## Payment for Deliverable Pay

- Departments are responsible for making sure total payments paid to faculty will not exceed the maximum contract amount
- Suggest to create a new Employee Funding Profile (EFP) for all C1 faculty to avoid expenses from charging to the Department PCA
  - Another option to avoid expenses charging to the Department PCA is to enter a Combo Code each time when submitting a payment request via Payroll Adjustment Form (PAF)



# Payment for Deliverable Pay- PAF Example



## Payroll Adjustment Form University of Maryland Baltimore

|   |   |  |  |                |
|---|---|--|--|----------------|
| <b>Employee Name<br/>(Last, First):</b> |   |  | <b>Pay Period<br/>Processed (FY-PP):</b> | <b>PP24-16</b> |
| <b>Empl ID/Rcd# / Paygroup:</b>         | 0 |  | <b>Dates of Service:</b>                 | 1/1/24-1/13/24 |
| <b>Employee Title:</b>                  |   |  | <b>Empl Class:</b>                       |                |
| <b>Department Name:</b>                 |   |  | <b>Payroll Contact:</b>                  |                |
| <b>Department ID:</b>                   |   |  | <b>Contact phone:</b>                    |                |

| <b>Check<br/>one:</b>               | <b>Type of Pay<br/>Adjustment:</b>                       | <b>Description/Notes:</b>                                      | <b>Attachment:</b>  | <b>Earnings Codes:</b>                           |
|-------------------------------------|--|--|---|--|
| <input type="checkbox"/>            | Supplemental Compensation                                | Regular Faculty & Post Docs only (Empl Class 01, 02, 03, 15)   | Approved Supplemental Compensation Request for Regular Faculty  | FAW, TOV, CPP, SUM, CED, CON, GLS, HON, SEC, SEA |
| <input type="checkbox"/>            | Increased Responsibilities and Supplemental Compensation | Regular Exempt & Contingent II Staff Only (Empl Class 33 & 35) | Increased Responsibilities and Supplemental Compensation Request for Exempt Regular & Contingent II Staff | SEC<br>SEJ                                       |
| <input checked="" type="checkbox"/> | Defined Payment Agreement Option (Deliverable Only)      | C1-Exempt or C1-Faculty only (Empl Class 34, 36, 19)           | Approved Defined Payment Agreement Option Form  | DVA, DVR, DVI, DVC                               |

**Pay Period Processed (FY-PP):** Enter the Pay Period number for which this is being submitted in the format FY-PP

**Dates of Service:** Enter the exact dates of period in which the submitted amount was earned

**Check:** Defined Payment Agreement Option (Deliverable Only)



# Payment for Deliverable Pay- PAF Example

| <b>Comments on back of form?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No |                                    |                               |  |   |                    |
|---|------------------------------------|-------------------------------|--|---|--------------------|
| <b>Earnings Code:</b>   | <b>Reason Code: FS-PR Use Only</b> | <b>Hours (if applicable):</b> | <b>Amount (if applicable):</b>                     | <b>Combo Code</b><br>(This will override EFP and prevent changes through the Budget Retro process): | <b>Tax Periods</b> |
| DVC   |                                    |                               | 5,000.00   | 5000001640  |                    |
|   |                                    |                               |  | Only enter a CC if no EFP has been set up   |                    |
|   |                                    |                               |  |   |                    |
|   |                                    | <b>TOTAL</b>                  |  |   |                    |
| <b>Purpose of the payment:</b>  |                                    |                               |  |   |                    |
| <b>Signature of Requestor and Date:</b>   |                                    |                               | <b>Signature of Approving Supervisor and Date:</b> |   |                    |
| <b>Printed Name &amp; Title:</b>  |                                    |                               | <b>Printed Name and Title:</b>                     |   |                    |
| <b>FS-Payroll Use</b>   |                                    |                               |  |   |                    |
| Entered by/Date:  |                                    |                               | Reviewed by/Date:                                  |   |                    |

**Earnings Code:** Refer to the Faculty C1 Agreement. The earnings code (EC) for Deliverable Pay starts with 'DV.' For this example, DVC is Deliverable Pay for Clinical. If it was research, the EC is 'DVR.'

**Amount:** Attach back up calculation of how to come up with the requested amount.

**Combo Code:** Only enter a Combo Code here if no Employee Funding Profile (EFP) has been set up

**Purpose of the payment:** Brief description of the payment

# Questions?