

State of Louisiana  
Office of the Lieutenant Governor  
Department of Culture, Recreation and Tourism

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**Policy Name:** *Cellular Phones and Smart Phones*  
**Policy Number:** *HR #2D-0106*  
**Effective Date:** *September 15, 2010*  
**Authorization:** *Louisiana Administrative Code  
Title 4; Part IX; 9:901 and  
R.S. 42:1461*



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*Pam Breaux, Secretary*

## **POLICY**

It is the policy of the Office of the Lieutenant Governor (OLG) and the Department of Culture, Recreation and Tourism (DCRT) to utilize cellular phones and smart phones in the most cost efficient and effective way to carry out its mission. Revisions of this policy are effective with the approval of the Civil Service Commission and certification of the Human Resources Director.

## **PURPOSE**

This policy will establish guidelines for determining the need for cellular phones and smart phones (BlackBerry, iPhone, Droid, etc.) and accounting for their use by the employees of the OLG and DCRT.

## **APPLICABILITY**

This policy will apply to all Offices within the OLG and DCRT with cellular phones and smart phones assigned to employees in their section and/or division.

## **PROCEDURES FOR OBTAINING CELLULAR SERVICE**

The OLG and DCRT offer two types of cellular service to state employees - **Option I and Option II:**

### **Option I:**

Employees whose appointing authority certifies that a cellular telephone is necessary for them to satisfactorily perform their duties will be assigned a monthly cellular phone allowance in the amount of \$35.00. The Lieutenant Governor, Secretary, Undersecretary, and his/her designee, must approve an employee's participation in this option. Upon documentation of appropriateness, he/she may approve an amount in excess of \$35.00. However, the amount of the monthly allowance shall not exceed \$50.00. The amount of the allowance will depend upon job related usage and will be determined by the appointing authority. Employees whose appointing authority deems it necessary that they have a smart

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phone will be reimbursed \$75.00 per month. Specific written documentation will be required to determine the allowance needed for each employee to perform their job. There will be no reimbursement of any charges other than this allowance. The allowance will be spread over the employees twenty-six (26) pay periods and will appear on the employee's remuneration statement as earned income. Every January, an employee's needs for a cellular phone will be evaluated and re-certified by the appointing authority and approved by the Undersecretary or his/her designee using the Cellular Phone Policy Acknowledgement and Certification Form (See Attachment 1). Employees will be responsible for promptly notifying the appointing authority and/or Human Resources if the cell service is discontinued.

Employees using Option I will be required to:

1. Complete the Phone Policy Acknowledgement and Certification Form (Attachment 1);
2. Obtain a smart phone that is compatible with OLG/DCRT's Information Services Platform.
3. Obtain a cellular plan that provides detailed billing which list all calls made, calls received and duration;
4. Retain bills for the prior twelve (12) month period; and
5. If bills are audited, identify business calls and camouflage personal calls.

In accordance with IRS regulations, this allowance will be reported as income on an employee's W-2. Taxes and retirement will be withheld.

Random audits may be conducted by the internal auditor to assure that a substantial usage of the phone is job related. Employees will be required to provide their personal cell phone bills for this audit.

Any repairs to the smart phone are the responsibility of the employee.

**Option II:**

The OLG and DCRT provide an employee with cellular service and a cellular telephone or smart phone. Employees who choose this option will be required to complete the DCRT Mobile Device Communication Authorization which can be found on Channel Z under E Forms for CRT. This form is a Web-based Workflow Form (example attached).

The Lieutenant Governor, Secretary, Undersecretary or his/her designee must approve an employee's participation in this option. Employees will have the minimum minute plan, 450 minutes, unless authorization is given by the Lieutenant Governor, Secretary,

Undersecretary or Appointing Authority. Employees who **do not** exceed the minutes in their allotted plan **will not** be required to identify any non-business related charges.

Employees will be required to pay and will be invoiced for directory assistance charges that are not business related. Text messaging and international calls without prior approval of the Lieutenant Governor, Secretary, Undersecretary, Assistant Secretary or his/her designee will be the responsibility of the employee.

If an employee exceeds the minutes of their assigned plan, the employee will be required to identify any non-business related calls and reimburse the department. Authorization may be given by the Lieutenant Governor, Secretary or Undersecretary to approve an appropriate plan according to the business purpose of the position assigned the phone.

## **RESPONSIBILITY**

### **Lieutenant Governor, Secretary, Undersecretary**

Approves all state issued cellular phone or smart phone requests.

### **Assistant Secretary or Appointing Authority:**

Assures compliance of this policy; annually certifies that justification still exists for the continued use of a cellular telephone or smart phone.

### **Immediate Supervisor:**

Assures compliance with this policy and certifies monthly that substantial usage if subordinates cellular phones and smart phones are work related.

### **Human Resources Division:**

Provides guidance to the Appointing Authority or his/her designee regarding discipline of an employee who misuses or abuses the cellular service.

## **EXCLUSIONS**

The Lieutenant Governor, Secretary or Undersecretary may make exceptions to this policy as he/she deems necessary, provided such exceptions shall not be in conflict with Civil Service Rules and Regulations.

## **QUESTIONS**

Questions regarding this policy should be directed to the Undersecretary.

## **VIOLATIONS**

Employees found to have violated this policy may be subject to disciplinary action.

**OFFICE OF THE LIEUTENANT GOVERNOR  
DEPARTMENT OF CULTURE, RECREATION AND TOURISM  
CELLULAR PHONE/SMART PHONE POLICY ACKNOWLEDGEMENT AND  
CERTIFICATION FORM**

I \_\_\_\_\_ understand that in accordance with  
(Please Print Name)

HR #2D-0106 Policy, concerning cellular phones/smart phones that I will receive a monthly allowance of \$\_\_\_\_\_ to be used to provide cellular phone service that is needed in conjunction with the performance of my job duties. This will be the only reimbursement for cellular phone expenses I receive.

I acknowledge that I have been told that I must maintain cellular service in order to receive reimbursement, and my failure to do so will subject me to disciplinary action.

I also acknowledge that this allowance will be report as income on my W-2.

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Employee Number

\_\_\_\_\_  
Supervisor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Appointing Authority Signature


\_\_\_\_\_  
Date

\_\_\_\_\_  
Secretary or Designee

\_\_\_\_\_  
Date

**Please forward this completed form to the Undersecretary**

## DCRT Mobile Communications Device Justification/Authorization

Office of:	<input type="radio"/> Secretary <input type="radio"/> Management & Finance <input type="radio"/> Cultural Development <input type="radio"/> State Library <input type="radio"/> State Museum <input type="radio"/> State Parks <input type="radio"/> Tourism <input type="radio"/> City Park - New Orleans
Type of Device Requested:	<input type="radio"/> Mobile Email/Data/ <b>Voice</b> Device (blackberry, with voice plan) <input type="radio"/> Mobile Email/Data Device (blackberry, <b>no voice</b> ) <input type="radio"/> Mobile Phone (voice only)
Cell Phone Plan:	<input type="radio"/> 450 Minutes <input type="radio"/> 900 Minutes <i>Note: Users are financially responsible for all non-CRT related minutes, and usage MUST be fully accounted for each month</i> <input type="radio"/> 1350 Minutes <input type="radio"/> 2000 Minutes +
Area Code:	<input type="radio"/> 225 <input type="radio"/> 318 <input type="radio"/> 337 <input type="radio"/> 504 <input type="radio"/> 985 
USB Tethered Access:	<input type="radio"/> Yes <input checked="" type="radio"/> No     \$25 more per month, allows the device to act as a high-speed wireless modem for a CRT issued laptop. This option must be justified in the Comments/Concerns or Special Instructions section at the end of this form.
Employee Name:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <small>name of employee to use this device</small>
Employee Title/Position:	<div style="border: 1px solid black; height: 20px; width: 100%;"></div> <small>title of employee to use this device</small>
OTM Justification Category:	<p><input type="checkbox"/> <b>Protection of life and property</b> - the job duties of the individual require the performance of duties that could impact the protection of life and property. These duties may be impeded without immediate access (inbound and/or outbound) to the public telephone network regardless of the time of day or location of the employee.</p> <ul style="list-style-type: none"> <li><input type="radio"/> Law enforcement - the daily job duties of the individual require the performance of law enforcement activities, and these activities may expose the individual or the general public to harm or danger.</li> <li><input type="radio"/> Personal Safety - the daily job duties of the individual require the performance of activities that may expose the individual or clients to harm or danger.</li> <li><input type="radio"/> Public Welfare - the daily job duties of the individual require the performance of activities that may directly impact the health, safety and welfare of the general public.</li> </ul> <p><input type="checkbox"/> <b>Improved efficiency and effectiveness</b> - the job duties of the individual require immediate access (inbound and/or outbound) to the public telephone network for recall, consultation, and/or decision making. Lack of instantaneous communications could have significant effect on the operational efficiency of the agency or significant impact on the economic or political welfare of the state.</p> <ul style="list-style-type: none"> <li><input type="radio"/> On call - duties require that the individual be immediately accessible after normal work hours regardless of location.</li> </ul>

	<p><input type="radio"/> Mobile or in transit - duties require that the individual be mobile or in transit a large percentage of the business day yet immediately accessible.</p> <p><input type="checkbox"/> <b>Lack of suitable communications alternatives</b> - no other suitable communications alternatives (pagers, two-way radio, standard telephone service) are available due to the location or environmental conditions of the workplace.</p>
Justification:  <i>specifically, how and why do the above selected (checked) criteria apply to this employee</i>	<div></div>
Employee Supervisor Name:	<div></div>
Employee Supervisor Email:	<div>@crt.state.la.us</div>
Your Network ID:  <i>person submitting request</i>	<div>ALDUNN 192.168.97.11</div>
Your Phone Number:  <i>person submitting request</i>	<div></div>
Comments/Concerns or Special Instructions:  <i>any special information/instructions to be passed along with this form - i.e. requests for special auxillary equipment</i>	<div></div> <p><i>Note: requests for additional or auxillary equipment must be justified by the requirements of the employees job and stated in the above space with the request.</i></p>
	<div>Submit Request for Approval</div>