FAMILY MEDICAL LEAVE Of ABSENCE (FMLA) GUIDELINES

FMLA applies to all public agencies, including state, local and federal employer, local education agencies (schools) and private sector employers who employed 50 or more employees in 20 or more workweeks in the current or preceding calendar year, including joint employers and successors of covered employers. FMLA entitles eligible employees take up to 12 work weeks of unpaid, job-protected leave in a 12-month period for specified family and medical reasons. Leave may be taken intermittently or in a single block of time.

EMPLOYEE ELIGIBILITY

To be eligible to apply for FMLA benefits and employee MUST:

- Work for a covered employer
- Have worked for the employer a total of 12 months;
- Have worked at least 1250 hours over the previous 12 months; and
- Work at a location in the United States or in any territory or possession of the United States where at least 50 employees are employed by the employer within 75 miles.

ALL absences of 3 or more consecutive business days must be reported to the HR Director immediately for review of qualification under FMLA. You are not required to apply for FMLA but the employer is required to inform you of whether or not you would be eligible to apply for FMLA and your options under the program.

The 12 months worked need not be consecutive but employment periods prior to a break in service of seven year or more need not be counted unless the break is due to the employee's fulfillment of their obligation to National Guard or Reserve military obligations.

LEAVE ENTITLEMENT

A covered employer must grant an eligible employee up to a total of 12 workweeks of unpaid leave during any 12-month period for one or more of the following reasons:

- For the birth and care of a newborn child of employee;
- For placement with the employee of a son or daughter for adoption or foster care;
- To care for a **spouse, son, daughter, or parent** with a serious health condition;
- To take medical leave when the employee is unable to work because of a serious health condition; or
- For qualifying exigencies arising out of the fact that the employees spouse, son, daughter, or parent is on active duty or called to active duty status as a member of the National Guard or Reserves in support of a contingency operation.
- Birth and care of a newborn child, placement of a child or adoption or foster care, or to care for a parent who has a serious health condition to a combined total of 12 work weeks.

Spouse:	Current legal spouse.
Son/Daughter:	Does not include individuals 18 years of age or older unless they are incapable of self care.
Parent:	Does not include "in-laws"

Under some circumstances employees may take FMLA intermittently (separate blocks of time) for a single qualifying reason – or on a reduced work schedule – effectively reducing the employee's usual weekly or daily schedule. When the leave is planned due to medical treatment, the employee must make a reasonable effort to schedule treatment so as not to unduly disrupt the employer's operations. IF FMLA leave is for the birth and care of a child, or placement of a child for adoption or foster care, use of intermittent leave is subject to the employers approval.

The provisions of this policy will apply to all family and/or medical leaves approved for eligible employees for the reasons described above.

PREGNANCY/MATERNITY LEAVE

If you plan to apply for maternity leave due to pregnancy you are not required to complete the WH380. However, you must complete the Notice of Intent to take FMLA and submit the completed form to the Human Resources (HR) Director no less than 30 days from your expected due date. You will not be able to count time taken for prenatal appointments or illness as FMLA unless your leave has already been approved. Retroactive FMLA is not permitted.

Once received, HR will record the FMLA notice and send a written notice when your FMLA is approved. If your physician determines that you are unable to work due to health reasons/complications before your full-term due date, then the doctor's written recommendation is required. The time taken pre-partum will be counted as part of your FMLA leave.

After your baby is born, you must have a full-duty release/return to work notice from your physician with an effective date of such release before you can return to work.

Once FMLA has been approved (if you are exempt):

1) You can access your long term sick leave bank for prenatal care appointments and incapacitating illness relating to your pregnancy.

2) Without approved FMLA status all of these types of absences will be charged to your short term bank and would not be counted as FMLA leave time

HOURLY

You must first use your Short Term Sick leave to pay yourself during FMLA for your own health issue or recovery. Once accrued Short Term Sick Leave is exhausted you must use any accrued Long Term/Extended Sick leave for the balance of the FMLA leave. In the cases where leave is needed to care for a qualifying family member, the employee may access up to 4 weeks of accrued sick leave.

PAID LEAVE TIME

If eligible employees that have accrued paid leave benefits under employment benefit plans or policies of the employer, the employee will be required to use those accrued benefits to provide compensation during all or any part of the twelve weeks leave. If the employee's paid benefits are exhausted, the remainder, if any, of the family or medical leave will be unpaid. The use of accrued benefits will not extend the duration of a family or medical leave.

FMLA - PATERNITY LEAVE

If you would like to take paternity leave under FMLA after the birth of a child you must complete the leave within 12 months of the qualifying event (the birth of the child). Exempt personnel who desire to take paternity leave under FMLA will be allowed to access their long term sick bank for up to 4 weeks of paid leave. Any additional paternity leave time requested will be unpaid.

PREMIUMS and RESPONSIBILITIES

You are responsible for continuing payments for any insurance premiums such as medical, SAFE, etc in which you are enrolled thru your employer. You may submit the payments to the HR department either in the form of a personal check or through regular payroll deductions. Part of the FMLA paperwork sent to you will identify the benefits in which you are currently enrolled and their corresponding amounts per payroll period (monthly). Your employer will provide service credit and vacation/sick leave accrual on all paid portions of your FMLA leave. Federal FMLA provisions do NOT provide for income. Employer guidelines and policies regarding access to paid leave determine how or if an employee is paid while out on FMLA. FMLA leave can also run concurrently with:

- Unpaid leave time
- Worker's Compensation
- Short Term Disability

In either case, the total extent of FMLA is not to exceed the 12-week federal mandated limit.

APPLICATION FOR FMLA

The application forms are located on the pcsda.org website >. . . .

1) **Print and complete the Notice of Intent and return form with original signature to HR Director as soon as possible once you are aware of a potential need for FMLA leave – preferably no less than 30 days from needed leave.**
   The form is located on the HR website (URL) if you know you will be or are absent for 3 or more consecutive working days due to you own health condition or that of a family member . Please provide all applicable and requested information. The processing of your request may be delayed if information is incomplete. The information provided will be reviewed for qualification of initial requirements for qualification under FMLA.
2) **You will be provided with a written Notice of Eligibility (WH381) letting you know if the condition or situation qualifies for FMLA status within (5) business days.** HR will inform you supervisor of your intent to take FMLA and the length of time needed. NO specific or confidential information will be shared with anyone during this process by HR. You are able to share information with anyone as you wish or deem appropriate.

If approval is granted –

3) Download the appropriate medical documentation forms (WH380E or WH380F) and forward them to the appropriate medical provider overseeing medical care for yourself or family member. This form must be received within 15 days of the receipt of the Notice of Eligibility (WH381). Contact HR Director immediately if there are any questions or concerns regarding this process.
4) HR will send a formal written approval of FMLA status within 3 working days of receiving a properly completed WH 380E or WH380F.
5) HR will also send a detailed list of the Premiums and Deductions. During FMLA which you are responsible for continuing interrupted during your leave and you will need to specify how you plan to pay for those premiums during your leave so appropriate arrangements can be made to continue coverage during the entire time of your leave.
6) Once approval is granted HR will send you the Final Designation Form (WH382) which lets you know all has been processed and that FLMA has been approved. HR will inform your supervisor of the official decision regarding FMLA so that they can plan appropriately for staffing and coverage.

DURING FMLA

While you are out on FMLA you will be required to give periodic general updates regarding your expected return to work date. These will be specified to you in writing in your approval notice.

RETURNING TO WORK FROM FMLA

You must have a doctor's note certifying you are fully able to perform all job duties and functions with NO restrictions.