EASTERN MICHIGAN UNIVERSITY

Family & Medical Leave Guidelines

ELIGIBLE EMPLOYEES: Employees must have been employed for at least twelve (12) months and have completed at least 1250 hours of service (does not include any paid or unpaid leave time) in the twelve (12) month period immediately preceding the date on which the leave commences.

FAMILY AND MEDICAL LEAVE (FMLA) with or without pay of up to twelve (12) work weeks per rolling year, will be granted to eligible employees for family or medical leave purposes as defined below:

FAMILY LEAVE is for the birth of a child of an employee or to care for such child, or for the placement with the employee of a child via adoption or foster care. Family leave must be taken within twelve (12) months of the birth or placement, although the leave may begin before the actual birth, adoption or placement. Family leave may be taken intermittently or as a reduced work schedule at the discretion of the University, as determined by the immediate supervisor. The employee must give thirty (30) calendar days written notice if the leave is foreseeable or notice within 2 business days of being aware of a need for leave if the leave is not foreseeable. (Reminder: Status change form must be submitted within 30 days to add the child to your health insurance)

<u>MEDICAL LEAVE</u> is used to care for the employee's spouse, child or parent with a serious health condition or because of a serious health condition of the employee which makes the employee unable to perform his/her job. Medical leave may be taken intermittently or at a reduced work schedule at the employee's request, when medically necessary, at the discretion of the University. The employee is required to give thirty (30) calendar days written notice or as much notice as practicable and to schedule treatment to minimize the disruption to University operations.

MILLITARY LEAVE is used to care for an employee's spouse, son, daughter, parent, or next of kin who needs care due to a serious illness or injury that resulted directly from duty as a member in the Armed Forces, National Guard, or Reserves (Veterans are covered up to five years after treatment for serious illness or injury incurred while on active duty). Leave can be granted for up to 26 weeks under this section of FMLA.

QUALIFYING EXIGENCY is used for members of the Armed Forces, National Guard or Reserves who are called to active duty (this leave also applies to the spouses, children and parents of these members). It provides up to 12 weeks of leave to make preparations for short-notice deployment

activities, military and related activities, childcare and school activities, financial and legal arrangements, counseling activities, rest and recuperation activities, and/or post-deployment activities.

SERIOUS HEALTH CONDITION means an illness, injury, impairment or physical/mental condition that involves:

- 1) Any period of incapacity or treatment connected with inpatient care in a hospital, hospice or residential medical care facility; (includes periods of incapacity and subsequent treatments in connection with the inpatient care), or
- 2) Continuing treatment by a health care provider, including any one or more of the following:
 - a) A period of incapacity of more than three (3) consecutive calendar days and any subsequent treatment or period of incapacity relating to the same condition that also involves:
 - 1) Treatment two (2) or more times by a health care provider (of which the first treatment must occur within 7 days of leave request, the second within 30 days), or
 - 2) Treatment by a health care provider on at least one (1) occasion (within 7 days of leave request) which results in a regimen of continuing treatment under the supervision of the health care provider (within 30 days of leave request).
 - b) Any period of incapacity due to pregnancy or for prenatal care.
 - c) Any period of incapacity or treatment for such incapacity due to a chronic serious health condition. (Example: asthma) A chronic serious health condition is one which:
 - 1) Requires periodic visits for treatment by a health care provider or
 - 2) Continues over an extended period of time and
 - 3) May cause episodic rather than continuing periods of incapacity.
 - 4) Requires a minimum of two visits for treatment by a health care provider a year to qualify.
 - d) A period of incapacity, which is permanent or long term due to a condition for which treatment may not be effective. Person must be under continuing supervision of, but need not be receiving active treatments by, a health care provider. (Example: Alzheimer's, cancer)
 - e) Any period of absence to receive multiple treatments (including recovery there from) for restorative surgery after an accident or injury or for a condition that would likely result in a period of incapacity of more than three days in the absence of medical treatment. (Example: Chemotherapy for cancer)

NOTE: Items b, c, d, and e do not require three-day incapacity.

TREATMENT includes in-person examinations to determine if a serious health condition exists. Routine physical, eye or dental exams are not included.

REGIMEN FOR CONTINUING TREATMENT includes a course of prescription medication or therapy requiring special equipment to resolve or alleviate the health condition. A regimen of taking over-the-counter medications, bed rest, exercise or other similar activities that can be initiated without a visit to a health care provider is not, by itself, sufficient to constitute a regimen of continuing treatment for FMLA purposes.

Substance abuse may be a serious health condition if criteria in a-e above are met; however, FMLA may be taken only for treatment of substance abuse.

Ordinarily, unless complications arise, the common cold, flu, ear aches, upset stomach, headaches other than migraine, routine dental or orthodontia problems, periodontal disease are examples of conditions that do not qualify for FMLA.

HEALTH CARE PROVIDER includes Doctor of Medicine, authorized to practice medicine or surgery by the state in which doctor practices, dentist, clinical psychologist, clinical social worker, optometrist, chiropractor (limited), nurse practitioners, midwives, Christian Science practitioners and providers authorized to give care under the health plan.

CARE FOR FAMILY MEMBER includes physical and psychological care (basic medical, hygienic or nutritional needs or safety needs, transportation for medical treatments/appointments, arranging for changes in care, psychological comfort or reassurance).

SPOUSE means a husband or wife as defined or recognized by State law for purposes of marriage. Spouses who both work for the University are each entitled to exercise the provisions of this policy. *Note: Federal FMLA regulations and guidelines do not recognize same sex domestic partners.*

PARENT means a biological parent or an individual who stood in loco parentis to an employee when the employee was a child. This term does not include parents "in law".

CHILD means a biological, adopted, foster child, stepchild, legal ward or child of a person standing in loco parentis who is either under age 18, or age 18 or older and "incapable of self-care because of a mental or physical disability".

<u>MEDICAL CERTIFICATION</u> will be required to verify the serious illness of the employee or the family member. The employee must provide the medical certification within 15 calendar days of the leave request. The University requires

the use of the appropriate Department of Labor medical certification form (available on HR website) as well as a medical certification addendum and release of information form because of limitations on what information can be obtained. A certification must be legibly written or typed and include the date the condition began, the probable duration, medical facts, and a statement that the employee is needed to care for family member and an estimate of time required to provide the care; or that the employee is unable to perform the functions of his/her position. If intermittent leave or reduced work schedule is requested, the certification must speak to the date and duration of the need. Only in certain situations may additional information be requested, contact Human Resources for more information.

It is the employee's responsibility to obtain a complete certification from their health care provider and provide the form to the University when necessary. The employee is responsible for any costs (cost for completing the form) associated with obtaining medical certification. Failure to provide requested medical certification may mean that the leave of absence (LOA) will not be counted as FMLA and therefore not subject to the protections of the Family and Medical Leave Act.

The University, through Human Resources, may require a second opinion at the University's expense (charged to the department of the employee). If the medical opinions conflict, a third opinion may be obtained from a health care provider jointly approved by the employee and the University through Human Resources, at the University's expense (charged to department of the employee). The University may require subsequent recertification on a reasonable basis. The University may periodically require the employee to report on his/her status or intent to return to work.

The University will require certification of the employee's ability to return to work following a leave necessitated by the employee's own serious health condition within 48 hours of the expected return to work date.

PAID TIME - When approving FMLA, the University will require the employee to use paid sick time as specified by the respective collective bargaining agreement. Upon exhaustion of paid leave time, any portion of the remaining FMLA will be unpaid.

AC Employees- May use up to 48 hours of sick leave for illness or injury of a family member.

AP Employees- May use up to 48 hours of sick leave for illness or injury of a family member.

CC Employees- May use up to 24 hours for any particular illness or injury of a family member with a maximum use of 72 hours per fiscal year.

CS Employees- May use up to 24 hours for any particular illness or injury of a family member with a maximum use of 72 hours in any fiscal year.

CP Employees- May use up to 16 hours of sick leave for any particular illness or injury of a family member with a maximum use of 48 hours in any fiscal year.

FM Employees- May use up to 16 hours of sick leave for any particular illness or injury of a family member with a maximum use of 48 hours in any fiscal year.

PS Employees- May use up to 16 hours of sick leave for any particular illness or injury of a family member with a maximum use of 48 hours in any fiscal year.

PT Employees- May use up to 80 hours of sick leave for illness or injury of a family member in any calendar year.

BENEFIT CONTINUATION - The University will continue to contribute toward group health, dental and life insurance coverage at the same level and under the same conditions that existed while the employee was working for up to 12 weeks. Employees will be required to continue to pay any portion of the premium which they were paying prior to taking the leave such as rider payments for dependent children. After 12 weeks, the employee will have to pay for benefits in order for them to continue. Arrangements must be made with the Benefits Office. The employee will not lose any benefit accrued prior to the start of the leave, but will not accrue benefits during unpaid leave time.

If the employee's premium payment is more than thirty (30) days late, the University may drop coverage by providing written notice to the employee that payment has not been received. Notice will be mailed at least fifteen (15) days before coverage will cease advising the employee that coverage will be dropped on a specific date unless payment is received.

In some cases, the University may recover from the employee premiums paid for maintaining an employee's health coverage if the employee fails to return to work from family medical leave. The University may require medical certification of the employee's inability to return from leave.

TRANSFER - For intermittent and reduced work schedules, the employer may temporarily transfer the employee to an alternative position with equivalent pay and benefits if the employee is qualified for the position and the new position better accommodates the intermittent or reduced leave than the employee's regular job. Such transfers must be requested through Human Resources.

REINSTATEMENT - The employee will generally be returned to the same position held prior to the leave. In certain situations, the employee may be returned to a position equivalent in pay, benefits and other terms and conditions of employment upon return from leave. These situations must be approved through Human Resources.

EMPLOYEE'S RESPONSIBILITIES

The employee will be responsible for:

- initiating the Leave of Absence (LOA) request process at least 30 days in advance, or within 2 business days of becoming aware of the need for leave when need for leave was unforeseen or in the event of an emergency.
- completing sections A-E of the Leave of Absence Form.
- obtaining supervisor's signature in Section F of the Leave of Absence Form (unless leave is for medical reasons, then supervisor does not need to sign).
- having their doctor complete the Medical Certification Statement, addendum and initiating Short Term Disability Claim if applicable. Note: If the Medical Certification Form is not returned, is not complete, or fails to substantiate your need for Family Medical Leave (FMLA), the leave will not be granted and your absences may be considered unexcused and subject to disciplinary action.
- completing the Staff Release of Medical Information Form.
- submitting the completed LOA request form, Medical Certification Statement, addendum, Staff Release Form, and if applicable, Short Term Disability Form to Human Resources, 140 McKenny Hall..
- discussing with supervisor all available time accrued and the type(s) and amounts, if any, to be used while on leave.
- Communicating periodically with supervisor to keep him/her abreast of leave status and/or return to work date.
- contacting doctor when extensions of FMLA are needed. Obtaining updated medical certification and addendum forms and submitting them to Human Resources.
- providing to Human Resources Medical Certification Addendum Form (fitness for duty) when employee has been approved by doctor to return to work from a Family Medical Leave.

SUPERVISOR'S RESPONSIBILITIES

The employee's supervisor will be responsible for:

- beginning the FMLA discussion with the employee
- directing employees requesting a leave of absence or an extension of a leave to Human Resources for assistance
- reviewing and signing leave of absence form in a timely fashion and returning it to the employee
- ensuring that any paid time off used by the employee requesting a leave is accurately reported to Payroll

• directing employees to turn in all medical certification forms to Human Resources. In cases where employees have inadvertently turned in medical documents to their department, the supervisor should immediately send the information addressed as "confidential" to Human Resources.

HUMAN RESOURCES' RESPONSIBILITIES

Human Resources will be responsible for:

- assuring that employees are eligible for family medical leave
- determining if requests are for family medical leave reasons
- assuring that employees have completed and submitted the appropriate certification and leave forms
- assuring that paid time is used before unpaid leave time is granted except as noted earlier:
- giving proper notification to the employee (Leave Notification form);
- giving proper notification to the employee's supervisor when an employee takes a leave and is ready to return to work

Human Resources will inform employees who request leave that qualifies as FMLA:

- that the time will be counted against their annual family and medical leave entitlement;
- if there is any requirement that the employee furnish a medical certification and the consequences of failing to do so;
- how their time will be recorded and that paid time must be used before going on unpaid leave except as noted earlier;
- what are their rights, requirements, arrangements and consequences of making payments for benefit continuation;
- of their potential liability for premium reimbursement if they do not return from leave;
- of their right to restoration to their regular position or an equivalent position; and
- that a medical certification of ability to return to work will be required in all cases of serious health condition of the employee.

This notice must be given within 5 business days of the request. Written notification should be given using the Employer LOA Response Letter.

<u>COMMUNICATION</u> - Notices will be posted in McKenny Hall.

OTHER - It is unlawful to interfere with, restrain or deny employees of any right provided.

Form # HRLOA 2 Date Revised: 11/2009