HUMAN RESOURCES POLICY

PURPOSE:

To set policy defining Medical/FMLA leaves of absence for employees due to illness or injury (serious health condition) for self, family member; or, leave due to birth, adoption or foster care in compliance with the provisions of the New Jersey Family Leave Act (inclusive of the New Jersey Paid Leave provisions) and the Federal Family & Medical Leave Act (inclusive of Military Family Leave).

The policy defines eligibility, duration, notice provisions and reasons for granting medical/FMLA, New Jersey Paid Family Leave and addresses the treatment of time accrual benefits (e.g., sick time, vacation etc.), insurance benefits and pension while on such leaves.

ACCOUNTABILITY:

The Chief Human Resources Officer is to ensure compliance with this policy.

APPLICABILITY:

This policy applies to all University Hospital staff members.

ELIGIBILITY:

1. All non-union staff employed by University Hospital for at least twelve (12) months and who have at least 1,000 hours of worked time for the hospital during the twelve (12) month period immediately preceding the leave will be eligible under this policy. Time spent on leave during the twelve (12) month period immediately preceding the leave shall not be counted in determining whether an employee has reached the 1,000 hours of work threshold, regardless of whether such leave was paid or unpaid.

2. Effective July 1, 2017, Union regular full or part-time staff employed on or prior to June 30, 2017, will qualify under this policy if they have worked 20 hours or more per week for a minimum of six (6) months. Full time temporary employees employed a minimum of six (6) months are also eligible. Union represented staff employed on or after July 1, 2017, shall be eligible based upon the same criteria as non-union staff.

3. January 1, 2018, the eligibility criteria for all University Hospital staff shall be:
   - Employed for at least twelve (12) months and who have at least 1,000 hours of worked time for the hospital during the twelve (12) month period immediately preceding the leave will be eligible under this policy.
   - Time spent on leave during the twelve (12) month period immediately preceding the
leave shall not be counted in determining whether an employee has reached the 1,000 hours of work threshold, regardless of whether such leave was paid or unpaid.

DEFINITIONS: (Also see definitions related to Military Caregiver and New Jersey Paid Family leaves below) Family Member: A spouse, domestic partner, civil union partner, child, or parent.

Parent: A person who is the biological parent, adoptive parent, foster parent, stepparent, or legal guardian, having a "parent-child relationship" with a child as defined by law, or having sole or joint legal or physical custody, care, guardianship, or visitation with a child.

Child: A biological, adopted, or foster child, stepchild, legal ward, or child of a parent who is: (1) under 18 years of age; or (2) 18 years of age or older but incapable of self-care because of a mental or physical impairment. See definition of “child” pursuant to the New Jersey Paid Family Leave Act below.

Health Care Provider: Physicians and physician assistants who are authorized to practice under state law qualify as health care providers and all medical para-professionals who fall within the definition of “health care provider” (e.g. nurse practitioners, nurse-midwives, clinical social workers, etc.).

Intermittent Leave: Leave time taken on a periodic basis as a result of a health condition. Leave shall not exceed twelve (12) weeks within a rolling 12 (twelve) month period.

Reduced Leave Schedule: Leave schedule that reduces the normal number of hours worked per workweek as a result of a health condition.

Serious Health Condition: A “Serious Health Condition” means an illness, injury, impairment or physical or mental condition that involves one of the following:

1. **Hospital Care**:

   Inpatient care (minimum of 1-night inpatient care) in a hospital, hospice, or residential medical care facility, including any period of incapacity or subsequent treatment in connection with or consequent to such inpatient care.

2. **Incapacity plus Treatment**

   A period of incapacity of more than three consecutive calendar days (including any subsequent treatment or period of incapacity relating to the same condition), that also requires in-person treatment by a health care provider at least once within seven days of the first day of incapacity; and

   Either:

   a. a regimen of continuing treatment initiated by the health care provider during the first treatment

   -or-

   b. a second in-person visit to the health care provider for treatment (the necessity of which is determined by the health care provider) within 30 days of the first day of incapacity.

3. **Chronic Condition**:

   A chronic condition is one that:

   a. requires visits for treatment by a health care provider at least twice a year;
b. continues over an extended period of time (including recurring episodes of a condition); and

c. may cause episodic incapacity rather than a continuing period of incapacity.

4. **Pregnancy:**

Any period of incapacity due to pregnancy, or for prenatal care as indicated by a health care provider.

5. **Permanent/Long-term Conditions Requiring Supervision:**

A period of incapacity, which is permanent or long-term due to a condition for which treatment may not be effective. The employee or family member must be under the continuing supervision of, but need not be receiving active treatment by, a health care provider.

6. **Multiple Treatments (Non-Chronic Conditions):**

Any period of absence to receive multiple treatments (including any period of recovery therefrom) by a health care provider or by a provider of health care services under orders of, or on referral by, a health care provider, either for restorative surgery after an accident or other injury, or for a condition that would likely result in a period of incapacity of more than three consecutive calendar days in the absence of medical intervention or treatment.

**ADDITIONAL DEFINITIONS RELATED TO MILITARY CAREGIVER LEAVE AND QUALIFYING EXIGENCY:**

**Covered Servicemember.** For purposes of Military Caregiver Leave, a covered servicemember is a current member of the Regular Armed Forces, National Guard, or Reserve, including those on the temporary disability retired list (TDRL), but not including members on permanent disability. Also, covered servicemember includes a veteran who is undergoing medical treatment, recuperation, or therapy for a serious injury or illness if the veteran was a member of the Armed Forces at any time during the period of five (5) years preceding the date on which such veteran undergoes medical treatment, recuperation, or therapy.

**Serious Injury or illness.** An injury or illness incurred by a covered servicemember in the line of duty on active duty or that existed before the beginning of the member’s active duty and was aggravated by service in line of duty on active duty in the Armed Forces that may render the member medically unfit to perform the duties of the member’s office, grade, rank or rating.

For a veteran, serious injury or illness is defined as a qualifying injury or illness that was incurred by the member in the line of duty on active duty in the Armed Forces (or that existed before the beginning of the member’s active duty and was aggravated by service in line of duty on active duty in the Armed Forces) and that manifested itself before or after the member became a veteran.

**Family Relationships under Military Leave.** Parent, spouse, son, daughter, or next of kin (see definition below) of a covered servicemember as defined above.

**Next of Kin** – For purposes of Military Caregiver leave only, a blood relative other than spouse, parent, son or daughter specifically designated in writing by the service member as his/her nearest blood relative.

**Military Caregiver Leave.** Eligible employees can take up to 26 weeks of job-protected “military caregiver leave” during a single rolling 12-month period to care for a family member who is a covered service member with a serious illness or injury. See above definitions of “Covered Servicemember” and “Serious Injury or illness.”
Qualifying Exigency. Eligible employees may take FMLA leave (12 weeks in a single rolling 12 month period) for a qualifying exigency when the employee’s spouse, son, daughter, or parent is on (or has been notified of an impending call to) “covered active duty” in the Armed Forces. “Covered active duty” for members of a regular component of the Armed Forces means duty during deployment of the member with the Armed Forces to a foreign country. “Covered active duty” for members of the reserve components of the Armed Forces (members of the U.S. National Guard and Reserves) means duty during deployment of the member with the Armed Forces to a foreign country under a call to order to active duty in a contingency operation as defined in section 101(a) (13) (B) of Title 10, U.S. Code. The seven categories of qualifying exigencies are:

- short-notice deployment (leave permitted up to seven (7) days if the military member receives seven or less days’ notice of a call to active duty),
- military events and related activities,
- certain temporary childcare arrangements and school activities (but not ongoing childcare),
- financial and legal arrangements,
- counseling by a non-medical counselor (such as a member of the clergy),
- rest and recuperation (leave permitted up to five (5) days when the military member is on temporary rest and recuperation leave), and
- post-deployment military activities.

DEFINITION RELATED TO THE NEW JERSEY PAID FAMILY LEAVE ACT:

Child: Biological, adopted or foster child, stepchild or legal ward of covered employee; child of a domestic partner of covered employee; child of civil union partner of covered employee, less than 19 years old (or older than 19, but incapable of self-care because of mental or physical impairment.)

REFERENCES:

A. Staff Leave Donation Program Policy  
B. Holiday Policy  
C. Sick Pay Policy  
D. Attendance Control Policy

POLICY:

Medical/FMLA leave of absence for self is:

An absence from work for a specific period for an illness or injury (serious health condition) with the approval of the Department of Human Resources. University Hospital may, at its discretion, designate employee absences of three (3) days or more as FMLA if the absences qualify as such and regardless of whether the employee has applied for leave. Leaves are taken with the understanding that the employee will return to work at the conclusion of the leave.

For employees taking medical/FMLA leave for self, the maximum leave allowed will be twelve (12) weeks, unless the employee has paid time accruals exceeding that amount of time. In cases where the employee has in excess of twelve (12) weeks of paid time accrued, the maximum length of leave time shall be equal to the lesser of the employee’s paid time accrual or twelve (12) months. All Paid sick time accruals must be utilized first, then float holidays and vacation accruals may be used at the employee’s option. For employees applying for New Jersey Temporary Disability, accrued sick time must be used first and exhausted. The statutory 12-week FMLA shall run concurrent with the first 12 weeks of such leave.

Staff members hired prior to January 1, 1983, with accrued sick time exceeding twelve (12) months will be entitled to use all such time.
According to the Staff Leave Donation Policy, for employees who receive donated time, such time shall not cause the employee to exceed the maximum leave time allowed by this policy. In addition, all accrued sick, vacation, float days and compensatory time must be exhausted. Refer to the Staff Leave Donation Policy.

**FMLA leave of absence for family member:**

For employees taking FMLA leave to care for a family member for a serious illness, the maximum leave allowed is twelve (12) weeks. Paid leave time must include a maximum of (10) days of accrued sick time (utilized first) and then, at the employee’s option, float holidays and vacation accruals. However, in circumstances where the family member has a catastrophic illness (defined as an illness, injury, impairment, or physical or mental condition that a licensed physician or certified practitioner certifies as life threatening or terminal), ten (10) sick days must be taken, and then, at the employee’s option, float holidays and vacation accruals. If additional time is required beyond the initial ten (10) sick days, **and the employee has exhausted float holidays and vacation accruals**, additional sick days may then be used for the remainder of the twelve (12) week maximum allowed under the terms of this policy.

**Intermittent/Reduced Leave of Absence for Self/Family Members:**

An employee does not need to use FMLA entitlement in one (1) block. Leave can be taken intermittently or on a reduced leave schedule when medically necessary. Employees must make a reasonable effort to schedule leave for planned medical treatment so as not to unduly disrupt the employer’s operations. Employees on approved Intermittent Leaves of Absence must follow departmental procedure to notify the immediate supervisor referencing the need for FMLA leave daily. Calling in “sick” is not enough to trigger the FMLA requirements. Intermittent leave runs concurrent with FMLA at all times.

**Intermittent/Reduced Schedule FMLA Leave for Self:** For employees taking Medical/FMLA leave for self, the maximum leave allowed will be twelve (12) weeks. All Paid sick time accruals must be utilized first, then float holidays and vacation accruals may be used at the employee’s option.

**Intermittent/Reduced Schedule FMLA Leave for Family Member:** For employees taking Intermittent/Reduced FMLA leave to care for a family member for a serious illness, the maximum leave allowed is twelve (12) weeks. Paid leave time must include a maximum of (10) days of accrued sick time (utilized first) and then float holidays and vacation accruals at the employee’s option.

**FMLA leave of absence for birth or adoption:**

An approved leave from employment to enable an employee to provide necessary care due to the birth, adoption or foster care of a child by the employee and/or spouse. Intermittent or reduced schedule leaves are not allowed for birth or adoption.

The maximum leave allowed for birth, adoption or foster care of a child is twelve (12) weeks. At least ten (10) days of accrued vacation and float holidays must be used if applying for New Jersey Paid Family Leave Insurance. If not applying for New Jersey Paid Family Leave Insurance it shall be the employee’s option whether to use accrued vacation and float holidays or take the leave as unpaid. In either event, leave shall not exceed the allowed twelve (12) weeks within a rolling 12-month period.

Note: If an employee is applying for medical leave due to pregnancy disability, or for any other reason, the medical leave will be in effect only for the period where there is an inability to work. After a birth, once the employee is medically able to work but requires childcare leave, a family leave can be requested under the birth or adoption provisions of FMLA.
Military Caregiver Leave:

An eligible employee may take up to 26 weeks of job-protected "military caregiver leave" during a single 12 month period. This leave must be used to care for a covered service member with a serious illness or injury (See Definitions related to Military Caregiver Leave). This leave can be taken on a continuous, intermittent or reduced schedule basis.

Qualifying Exigency Leave:

An eligible employee may take up to 12 weeks of job-protected leave for a "qualifying exigency" arising from the employee's spouse, child, or parent's status of (or has been notified of an impending call to) "covered active duty" in the Armed Forces. “Covered active duty” for members of a regular component of the Armed Forces means duty during deployment of the member with the Armed Forces to a foreign country. “Covered active duty” for members of the reserve components of the Armed Forces (members of the U.S. National Guard and Reserves) means duty during deployment of the member with the Armed Forces to a foreign country under a call to order to active duty in a contingency operation. Qualifying exigency military leave is not available to family members in cases where the call to active duty comes from a state rather than the federal government.

REQUIREMENTS:

Employee Notice Requirements

Foreseeable Leave: Employees must provide 30 days advance notice for birth, adoption, foster care, planned medical treatment for self, family member or covered service member. If 30 days' advance notice is not possible, notice must be given “as soon as practicable” (meaning the same day or next business day). In the event the employee does not provide 30 days' notice, University Hospital has the right to ask the employee to provide reasons why such notice was not practicable.

Unforeseeable Leave: When the need for leave is not foreseeable, employees must follow University Hospital's usual and customary notice and procedural requirements for absences, unless extenuating circumstances exist. If an employee fails to comply with his/her Department’s procedure, leave may be delayed or denied.

Failure of an employee to provide timely notice to the department and to Human Resources will result in absences occurring during the delay to be counted as non-FMLA absences, and may be subject to disciplinary actions.

Employer Notice Requirements

Once University Hospital has received a completed certification or other information sufficient to determine whether leave is being taken or requested for an FMLA-qualifying reason, the employer has five business days to "designate" leave as FMLA leave.

University Hospital shall provide written "Rights and Responsibilities" notice to each employee taking FMLA leave that details the specific expectations and obligations of the employee and the consequences of not meeting those terms.

Medical Certification/Recertification Requirements

University Hospital will request a Medical Certification within five business days after the employee gives notice of the need for leave, or within five business days after the leave commences.
Employees must submit a complete and sufficient Medical Certification within 15 days of the hospital’s request for certification. In most cases, leave can be denied if the Certification is not submitted at all within this time frame. University Hospital has no obligation to notify the employee that it has not been received.

If an employee submits a certification from a foreign health care provider and it is not in English, University Hospital will require the employee to have it translated.

Once a Certification is received, University Hospital may request additional information, if necessary, and will give the employee seven days to supplement the Certification. If the employee does not provide the information in this timeframe, leave can be denied. University Hospital representatives, including Human Resources professionals (but not an employee’s direct supervisor or department) may contact an employee’s health care provider to clarify and authenticate a Medical Certification presented in connection with an FMLA leave request.

University Hospital requires a new application and Medical Certification for each leave and/or leave extension request. In addition, recertification for ongoing conditions is required at least every six months in conjunction with an absence, and more frequently if an extension is requested, circumstances have changed, or University Hospital receives information casting doubt on the employee’s stated reason for leave.

University Hospital Human Resources has the right to contact an employee’s healthcare provider with information about the employee’s attendance and ask the provider to evaluate whether the employee’s attendance pattern is consistent with the health condition that qualified them for FMLA.

**NOTE:** The submission of any altered and/or falsified documentation, or other misrepresentation, is a violation of this Policy and will subject an employee to disciplinary action, up to and including termination of employment.

**Other Provisions**

All medical/FMLA leaves for self or family member, military caregiver, qualifying exigency or for birth, adoption or foster care of a child, whether paid or unpaid, shall run concurrent with the maximum amount of leave permitted by policy. This provision includes workers compensation leaves, the first twelve (12) weeks of which shall run concurrent with FMLA.

For employees applying for New Jersey Temporary Disability, only accrued sick leave must be used first and exhausted.

Employees must comply with the terms and conditions of hospital leave policies regarding the treatment of time accrual benefits during FMLA.

An employee on an approved FMLA may not work for any other employer.

An employee will be considered absent without authorization (AWOL) and subject to termination if he/she fails to:

- apply for a Leave of Absence within the guidelines of this policy;
- provide required documentation (medical certification) justifying the leave within the maximum fifteen (15) calendar days of the request for documentation;
- return to work within three (3) or more days after the leave expiration date and has not applied for an extension;
- respond to a written communication from University Hospital advising of the leave expiration.
University Hospital may require an employee to obtain a second opinion at University Hospital’s expense. University Hospital is permitted to designate the health care provider to furnish the second opinion. If the employee refuses to release relevant medical records to the designated health care provider for the second opinion, or if the provider’s certification does not ultimately establish the employee’s entitlement to FMLA leave, the leave shall not be designated as FMLA leave. If the opinions of the employee’s and University Hospital-designated health care providers differ, the employee will obtain certification from a third health care provider, at the expense of University Hospital. This third opinion shall be final and binding.

The maximum time allowed for Leaves of Absence is calculated on a rolling 12-month period measured retrospectively from the time of the new request or an extension request.

NEW JERSEY PAID FAMILY LEAVE ACT PROVISIONS

Effective July 1, 2009, New Jersey enacts Paid Family leave that provides employees with up to six (6) weeks of paid leave in a 12-month period to care for newborns, newly adopted children or seriously ill family members. The paid leave is a partial wage replacement benefit administered and paid by the New Jersey Department of Labor and Workforce Development, Division of Temporary Disability Insurance. It allows an employee to receive two-thirds of his or her weekly compensation up to a maximum amount per week as determined by the New Jersey Department of Labor and Workforce Development.

However:

- The new paid leave law does not cover leave for an employee’s own serious health condition.
- Unlike the Family and Medical Leave Act (FMLA) or New Jersey Family Leave Act (NJFLA), the law does not mandate employment restoration or job protection for employees.
- If the employee meets University Hospital Medical/FMLA Leave of Absence policy requirements for eligibility, the Paid Family Leave will run concurrently with FMLA and NJFLA statutes.

Eligibility:

An individual will be covered if he or she is engaged in employment as defined by New Jersey’s unemployment compensation law. This means the employee meets minimum earning requirements. Specifically, an employee who earns either $145* or more per week for 20 consecutive weeks, or $7,300* or more over the previous 52 calendar weeks, qualifies for the program. *Minimum wage eligibility requirements are subject to change as determined annually by the New Jersey Department of Labor and Workforce Development.

Benefits:

An employee is eligible for paid family leave benefits if:

- The individual takes leave from work to provide care for a qualifying family member as defined by NJFLA who has a serious health condition;
- The individual is to provide care for a newborn during the first 12 months after the child’s birth; or
- The individual takes leave during the first 12 months after the placement of a child for adoption.

Notice Requirements:

Employees must provide reasonable and practicable notice (e.g., same or next business day) to his/her department supervisor unless there is an emergency.
Birth of a Child or Placement of a Child for Adoption or Foster Care

An employee must provide his/her departmental supervisor and Human Resources with thirty (30) days’ notice when requesting leave for the birth of a child or placement of a child for adoption or foster care. If thirty (30) days’ notice is not provided, the employee will forfeit two weeks of paid benefits. The penalty is waived if the leave is due to unforeseeable circumstances.

Care for a Family Member with a Serious Health Condition (as defined by FMLA)

- For a continuous, non-intermittent leave, the employee must provide advance notice in a reasonable and practicable manner, unless an emergency or other unforeseen circumstance precludes such notice.
- For an intermittent leave, a minimum of 15 days’ notice prior to the commencement of the family leave must be given unless an emergency or other unforeseen circumstance precludes such notice. A maximum of up to 42 days may be taken in whole day increments.

For all of the above leaves, employees must also submit a claim for benefits to the New Jersey Division of Temporary Disability Insurance within 30 days after leave begins.

Certification:

Employees will be required to complete the following and submit completed forms to the Human Resources Leave of Absence Office:

- Request for Leave of Absence form and submit same, signed by his/her department supervisor
- Certification of Health Care Provider for Family Member’s Serious Health Condition (Form WH-380-F-UH)
- Division of Temporary Disability Application for Family Leave Insurance Benefits (FL-1), only if applying for New Jersey Paid Family Leave Insurance.

Use of Accrued Time Benefits in Connection with Paid Family Leave:

University Hospital employees may use available accrued time benefits, at the employee’s option, for all or part of the six (6) weeks of paid leave, as identified in the following:

<table>
<thead>
<tr>
<th>TYPE OF LEAVE</th>
<th>ACCRUED TIME BENEFITS</th>
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<tbody>
<tr>
<td>Birth of a Child or Placement of a Child for Adoption</td>
<td>Use of accrued float holidays and vacation accruals if available</td>
</tr>
<tr>
<td>Care for a Family Member with a serious health condition</td>
<td>Use of sick days (maximum of 10), float holidays, then vacation accruals if available</td>
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Employees may either utilize their leave accruals as indicated above and then: (a) apply for Family Temporary Disability Insurance or; (b) apply for Family Temporary Disability Insurance after exhausting all available accrued time. Please note that the aforementioned selection is irrevocable unless an employee’s disability claim is denied by the State or the circumstances supporting the leave change, i.e., extension of leave request, recertification, etc.

NOTE:

If an employee is currently collecting New Jersey State Temporary Disability benefits (for self), he/she can apply for New Jersey Paid Family Leave without first utilizing two weeks of their accrued time benefits.
PROCEDURES:
Performed by:

Staff Member:

1. Application for a medical/FMLA leave of absence for a foreseeable event must be made thirty (30) days in advance.

2. Employees (or immediate family member in case of emergencies) are required to follow the department’s designated call-in procedure for any unforeseeable absences.

3. Application for a medical/FMLA leave of absence for an unforeseeable event, must be made on or before the fourth (4th) day (or next business day, if the 4th day is a weekend) of any period when an employee is absent due to serious illness or injury of self or family member, or due to birth or adoption.

4. Employees must complete the Request for Leave of Absence and provide a completed Certification of Health Care Provider to the Leave of Absence Office for the appropriate leave being requested:

   - Employee’s Serious Health Condition – Form WH-380-E-UH
   - Family Member’s Serious Health Condition – Form WH-380-F-UH
   - Qualifying Exigency for Military Family Leave – Form WH 384-UH
   - Serious Illness of Covered Service Member for Military Family Leave – Form WH 385-UH

   Forms can be accessed at the Human Resources Online Forms Library, [http://www.uhnj.org/hrweb/forms/index.htm](http://www.uhnj.org/hrweb/forms/index.htm)

5. Employees have a maximum of fifteen (15) calendar days from the date of the request, or the date of notice of extension, within which to provide such certification justifying a leave.

6. Employees are required to submit recertification of the reason for medical leaves every thirty (30) days or upon expiration of prior certification whichever is longer, to the Leave of Absence Office (Except for birth, adoption, and intermittent leaves).

7. If circumstances of the leave change, the employee is responsible for contacting the Leave of Absence Office.

8. Employees on leave, but requiring an extension, must apply for the extension at least five (5) days before the expiration of the previously approved leave. The extension cannot extend the leave beyond the maximum time allowed under policy. Contact the Leave of Absence Office to apply.

9. Upon return from leave, employees must present a medical statement from his/her health care provider to the Leave of Absence Office that states the employee is able to return to work. A Fitness for Duty Certification may be required from the Health Care Provider to actually assess whether the employee has the ability to perform essential functions of the job. If leave was for a communicable disease, employee must be cleared through the hospital’s designated health service.

Department Head:

1. Must inform staff of FMLA rights and advise them to contact HR if the staff member provides
sufficient information to indicate that FMLA may apply.

2. Must notify their Leave of Absence Office that they have an employee who may be FMLA eligible and will be contacting them.

3. Must indicate on the employee’s timesheet, the usage of leave accruals as allowed under policy.

4. Must track leave usage for employees on intermittent leave. If there are multiple intermittent leaves for the same employee, the department must track whether absence is related to employee’s own self or his/her family member.

Leave of Absence Office:

1. Reviews the application for a leave of absence and determines if the employee qualifies.

2. Advises department head that employee has requested a leave of absence.

3. Prepares and submits to the employee: (1) Initial Notice of Eligibility and Rights & Responsibilities and Letter of Approval, Deficiency or Denial. The letter informs the employee if the FMLA has been approved and if necessary, requests additional information to determine if the FMLA can be approved.

4. Notifies Department Head of the approval of leave requests.

Benefits during Medical/FMLA Leaves of Absence:

The first twelve (12) weeks of a medical/FMLA (paid and unpaid) leave of absence (including birth, adoption or foster care) granted to an employee will be considered leave pursuant to the Federal Family and Medical Leave Act.

Employees on paid leave for self, family member or birth, adoption or foster care will continue to enjoy full benefits.

During the first twelve (12) weeks of unpaid status, the employee will be required to pre-pay the employee portion of any applicable health plan premium cost during the leave. Once the twelve (12) week unpaid period is exhausted, the employee will be required to pre-pay the applicable employee and employer premium costs for the remainder of the leave.

If the required pre-payments are not made, the employee’s benefit coverage will be terminated under the provisions of the State Health Benefits Program (SHBP). Affected employees will be offered COBRA up to eighteen (18) months. The employee may elect to continue any or all of the coverage (medical, prescription drug or dental) they had while in active status. They may not increase the level of coverage, but may switch plans upon enrollment in COBRA. The time employees spend on leave will not count as part of the COBRA eligibility period.

Employees will not accrue pension credit while on unpaid leave of absence status. However, upon return to work, employees may be allowed to purchase pension credit up to a designated maximum, with the exception of employees who are members of the Alternate Benefit Plan (ABP). Contact your Human Resources Benefits Office for information.

Sick and vacation time accruals will continue for the remainder of the month in which the unpaid medical leave commences, providing the employee is still in active pay status as of the first pay cycle of the month.
When an employee returns from leave, sick and vacation time will begin to accrue the first pay cycle of
the month after the employee returns to work.

Employees who are on an unpaid medical leave of absence on January 1, are not credited with float
holidays at that time. Employees returning from unpaid leave between January 2 and July 1, will be
credited with three (3) float holidays within one full pay cycle after July 1. No float holidays will be credited
for employees returning from leave of absence from July 2 - December 31.

Seniority held prior to the commencement of the leave of absence will be retained.

Holidays which fall during an unpaid medical leave of absence will not be granted pursuant to the Holiday
Policy 30-01-40-10:00.

Return from Leave

An employee who exercises the right to take a medical leave under the Federal Family and Medical Leave
Act (first twelve weeks), upon expiration of the leave is entitled to be restored to the position he/she held
when the leave commenced or an equivalent position with same seniority, status (i.e. full time or part
time), employment benefits, pay and other terms and conditions of employment. If a layoff occurs while
the employee is on leave, the employee will be treated as if he/she were not on a leave relative to any
layoff provisions. However, any bumping rights will be determined upon the employee’s return from an
official leave of absence.

Upon returning from a medical leave, the employee must present a medical statement from his/her
personal physician to the Leave of Absence Office that states the employee is able to return to work and
if the leave was for a communicable disease, the employee will be cleared through the UH designated
health service.

Immediately upon the employee’s return to duty, the department must contact the Leave of Absence
Office to reactivate the employee. A return Leave of Absence Transaction Form will be completed by the
Leave of Absence Office and forwarded to Data Administration for processing.

Please be reminded that failure to immediately notify the Leave of Absence Office about the employee’s
return from leave can result in the employee not receiving a paycheck.

By Direction of the President and CEO:

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Chief Human Resources Officer